

READING HEALTH AND WELLBEING BOARD

Date of Meeting	06 October 2023
Title	BCF Integration Update and Plan for 2023-25
Purpose of the report	To note the report for information
Report author	Beverley Nicholson
Job title	Integration Programme Manager
Organisation	RBC – Adult Social Care / BOB Integrated Care Board
Recommendations	<ol style="list-style-type: none"> 1. That the Health and Wellbeing Board note both the Quarter 4 (2022/23) and Quarter 1 (2023/24) performance and progress made in respect of the Better Care Fund (BCF) schemes as part of the Reading Integration Board’s Programme of Work. 2. To note the contents of the End of Year Return for Better Care Fund (BCF) 2022/23 and the compliance with the BCF National Conditions. 3. That the Health and Wellbeing Board note the contents of the Better Care Fund (BCF) Plan and Narrative for 2023/25, including the National Conditions and Metrics against which BCF performance will be measured. 4. Note the final BCF Plan and Narrative for 2022/23 has been formally submitted by the due date 28th June 2023, following delegated authority by the Acting Executive Director for Adult Social Care in consultation with the Lead Member for Public Health in order to comply with the national deadlines which fall outside the cycle of Board meetings.

1. Executive Summary

- 1.1 The purpose of this report is to provide an update on the Integration Programme and performance of Reading against the national Better Care Fund (BCF) targets. This report will show the position as at the end of 2022/23 (Quarter 4 of 2022/23 reporting period) and the position as at the end of Quarter 1 2023/24 (April to June), The report also outlines the spend against the BCF Plan and the Adult Social Care Discharge Fund Plan (2022/23), which was an additional fund provided by NHS England to be used to support hospital discharge over the Winter period in 2022/23, and the spend to date from the 2023/24 additional funding for Discharge.
- 1.2 The BCF metrics were updated in the planning guidance for 2023/25¹ and the targets against the revised metrics were agreed with system partners during the BCF Planning process. Outcomes shown here are as at the end of March 2023 which is the year end position and the position in Quarter 1 as at the end of June 2023.
 - a) The number of avoidable admissions (unplanned hospitalisation for chronic ambulatory care) (2022/23 Q4 **Met**, 2023/24 Q1 **Met**)

¹ [PRN00315-better-care-fund-planning-requirements-2023-25.pdf \(england.nhs.uk\)](https://www.england.nhs.uk/PRN00315-better-care-fund-planning-requirements-2023-25.pdf)

- b) The number of emergency hospital admissions due to falls in people aged 65 and over, per 100,000 population. A new metric for 2023/24 (2023/24 Q1 **Met**)
- c) An increase in the proportion of people discharged home using data on discharge to their usual place of residence (2022/23 Q4 **Met**, 2023/24 Q1 **Met**)
- d) The number of older adults whose long-term care needs are met by admission to residential or nursing care per 100,000 population (2022/23 Q4 **Met**, 2023/24 Q1 **Met**)
- e) The effectiveness of reablement (proportion of older people still at home 91 days after discharge from hospital into reablement or rehabilitation) (2022/23 Q4 **Not Met**, 2023/24 Q1 **Met**)

Details against each of these targets is outlined in Section 3 of this report and demonstrates the effectiveness of the collaborative work with system partners.

The report also covers the Better Care Fund End of Year return for 2022/23, having met the 4 National Conditions and submitted through delegated authority by the Acting Executive Director of Adult Social Care in Consultation with the lead Councillor for the Health and Wellbeing Board. An overview of the return can be found in Section 10 of this report and the full end of year return is contained in Appendix 1.

The Better Care Fund Plan for 2023/25 has been submitted in line with the national timeframe as set out in the BCF Policy Framework 2023/25² and has been signed off through the delegated authority process due to submission deadlines falling outside the Health and Wellbeing Board schedule of meetings. An overview of the Plan can be seen in Section 10 of this report and the full plan and supporting narrative is appended to this report at Appendices 2 and 3.

2. Policy Context

- 2.1. The Better Care Fund Policy Framework sets the principles for the pooling of funds to support integrated working across health and social care, to ensure the right care is available to people at the right time. The Reading Integration Board (RIB) is responsible for leading and overseeing system working with Local Authority Adult Social Care and Housing, Acute and Community health providers, Primary Care, Integrated Care Board (ICB) Commissioners, Voluntary Sector partners and Healthwatch, across Reading. The aim of the board is to facilitate partners and other interested stakeholders to agree a programme of work that promotes integrated working to achieve the national Better Care Fund (BCF) performance targets, as set out in sections 1.2 and 3.0 of this paper.

3. Performance Update for Better Care Fund and Integration Programme *(aligned with metrics set out in the Better Care Fund Plan 2023/25)*

3.1. Performance as at the end of Quarter 1, 2023/24

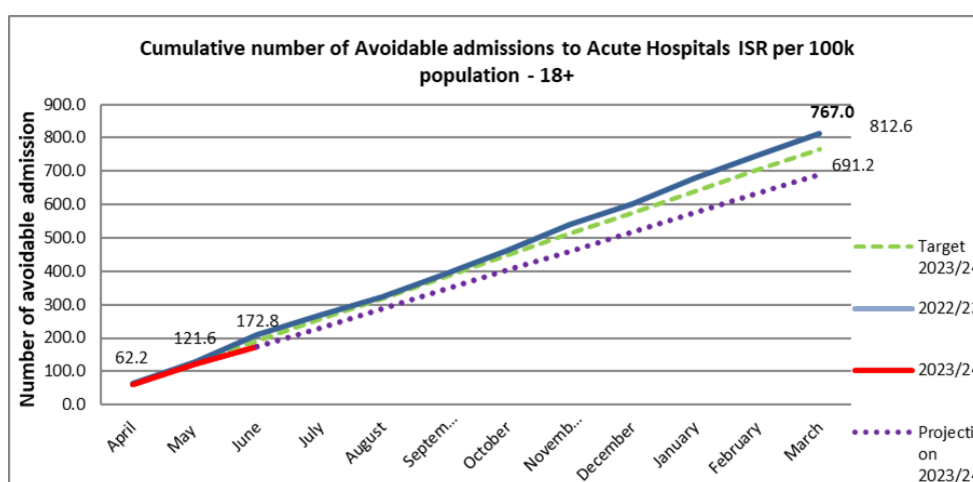
3.1.1. Admission Avoidance

This aims to reduce avoidable admissions (unplanned hospitalisation for chronic ambulatory care sensitive conditions), and have no more than 767, per 100,000 population, for the year. This metric was adjusted to a more realistic target based on previous performance and projections for 2023/24. It measures how many people with specific long-term conditions, which should not normally require hospitalisation if their conditions were well managed, who were admitted to hospital in an emergency. These conditions include, for example, diabetes, epilepsy and high blood pressure.

² <https://www.gov.uk/government/publications/better-care-fund-policy-framework-2023-to-2025>

We are on track to achieve the target and current projections are that we will continue this trajectory to the end of the year. Factors that support this positive outcome included engaging with the Berkshire West Ageing Well programme for rapid and emergency responses by intermediate care services, to support people to stay well at home with a short-term care package, where appropriate. Other activity to support the promotion of healthy living is delivered through a variety of Public Health and Wellbeing services, working with Carers and Dementia groups, as well as our Voluntary Care Sector and Community partners.

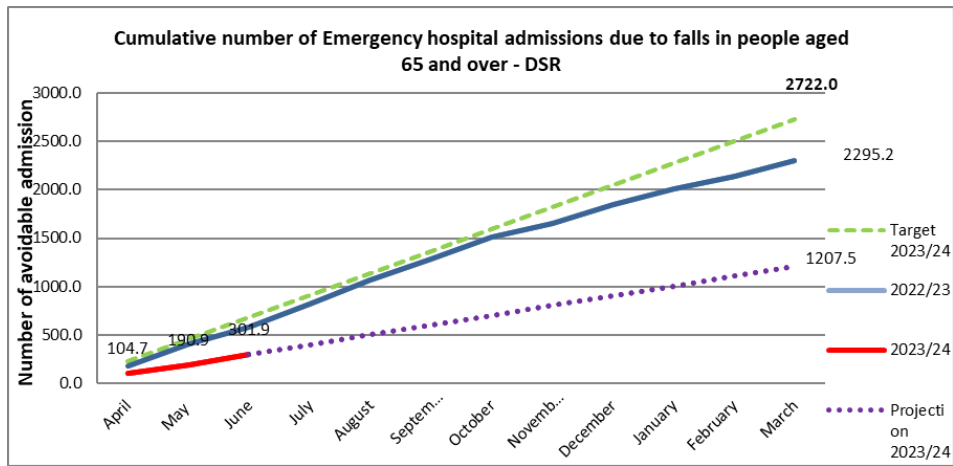
Cumulative number of Unplanned hospitalisations for chronic ambulatory care sensitive conditions per 100,000 population - 18+, Acute hospitals	
Target performance per annum (no more than)	767
Actual cumulative performance to date	173
Projected performance to end of the year	691
Status	Green



3.1.2. Falls

This is a new metric introduced for 2023/24 in relation to emergency hospital admissions due to falls in people aged 65 and over. The target for 2023/24 is to have no more than 2,722 people per 100,000 (given the population of Reading for this age group this equates to no more than 500 people), and represents a 2% improvement on the average performance in the previous two years. We also had increased numbers of Technology Enabled Care equipment that could be installed/worn to build confidence and ensure early alerts for people who are frail or at risk of falls. Performance to date is significantly better than the plan, which is positive and if necessary, adjustments can be made to planned targets when the BCF metrics are refreshed in 2024/25.

Cumulative number of Directly Standardised Rate (DSR) of Emergency hospital admissions due to falls in people aged 65+	
Target performance per annum (no more than)	2722
Actual performance to date	302
Average performance for the current period	1207
Status	Green



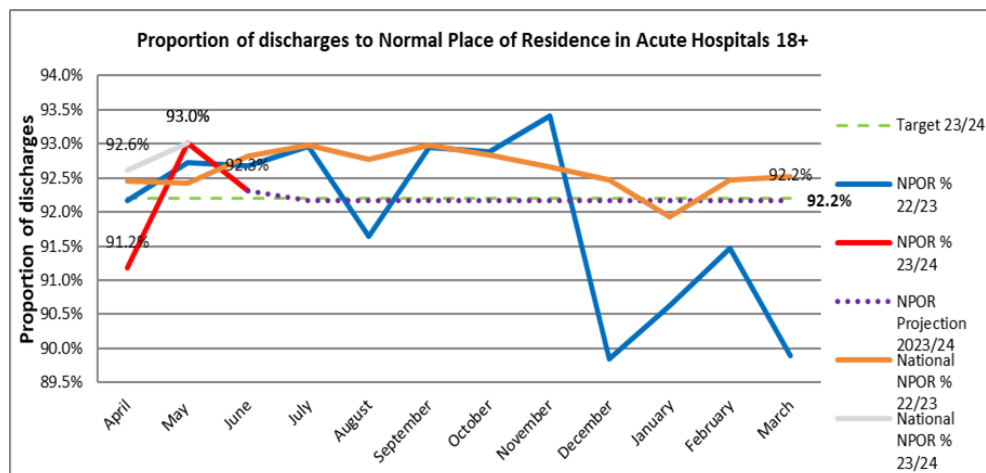
Reading Local Authority has agreed with the Integrated Care Board to develop a falls service to work with people to help prevent falls by using OT and Physio specialist support to reduce the number of falls in Reading, although we are unlikely to see an impact until Q4 2023/24.

3.1.3. Discharge to Normal Place of Residence

This aims to increase the proportion of people who are discharged directly home, from acute hospitals with a target of not less than 92.2% per month. This is based on hospital data for people “discharged to their normal place of residence”.

Performance slightly exceeded the minimum target in Quarter 1, at 92.3%. We continue to work with the multi-disciplinary team in the hospital and following the ethos of “Home First”, in line with the Hospital Discharge Policy, with support if needed through the use of TEC / equipment that can be installed to support independent living and reablement.

Proportion of discharges to Normal Place of Residence in Acute Hospitals 18+, per month	
Target performance per month (not less than)	92.2%
Actual performance this month (May)	92.3%
Projected performance to end of the year	92%
Status	Green

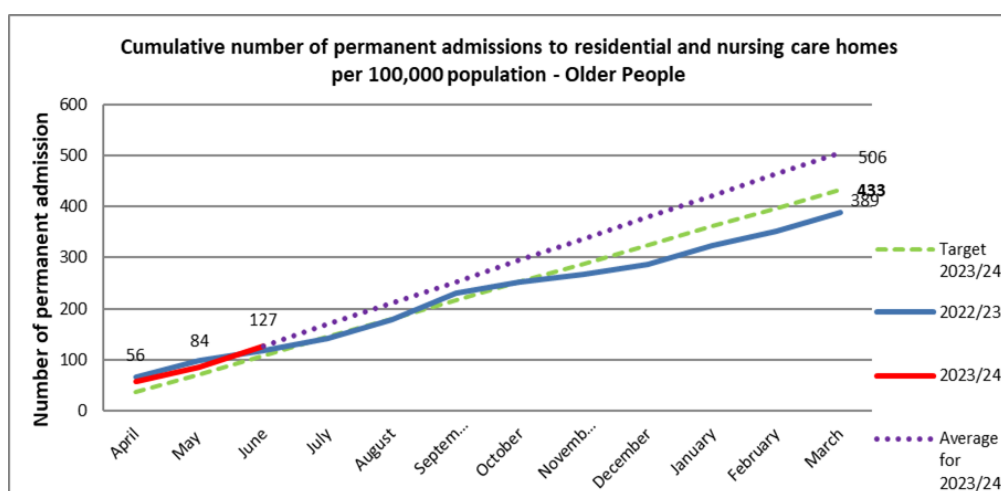


3.1.4. Permanent Admissions to Residential/Care Homes

This aims to reduce the number of older adults (65+) whose long-term care needs are met by admission to residential or nursing care per 100,000 population with a maximum target

of 433 for the year. We have been successful in maintaining a lower admission rate, despite challenges with capacity in the care market for complex cases, such as people with more challenging behaviours. We continue to work with our system partners to identify appropriate care for people to meet their needs. Whilst the current year end projection exceeds the target, this has been skewed by an unusually high number of admissions in June. There is usually a slow-down of admissions from September onwards. This will be closely monitored.

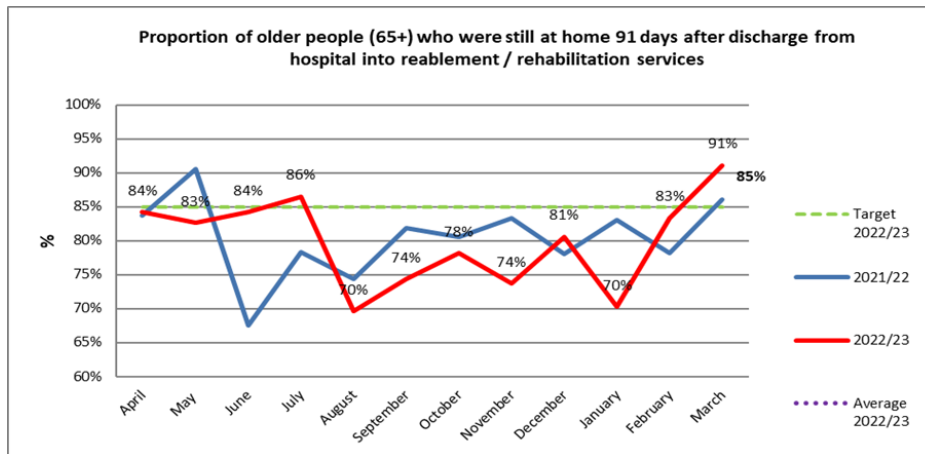
Cumulative number of permanent admissions to residential and nursing care homes per 100,000 population - Older People	
Target performance per annum (no more than)	433
Actual performance to date	127
Projected performance to the end of the year	506
Current Status	Green



3.1.5. 91 Day Rehabilitation

This aims to measure the effectiveness of reablement by looking at the proportion of older people who are still at home 91 days after discharge from hospital into reablement or rehabilitation. The target for 2022/23 is a minimum of 85% and will remain as the target until the end of Quarter 1 as it is based on discharges up to the end of March 2023, who were still at home in June 2023. Performance significantly improved for this March cohort of discharges and the target was met for Q1, with performance at 91% for the first time. We had proposed a stretch target of 82.5% for 2023/24, based on our performance throughout last year, which will be used from Quarter 2, 2023/24 (September). The reason for a reduction in the target was that the proposed schemes, such as the dedicated End of Life pathway and extended Hospital to Home service, to improve performance will take some time to be implemented and to impact on outcomes.

Proportion of older people (65+) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services	
Target performance (2022/23)	85%
Total no. of people departing hospital into reablement 91 days ago (numerical)	45
Of those, no. at home 91 days later (numerical) this month	41
Actual performance (%) this month	91%
Status of Monthly performance	Green



(based on people discharged in March 2023, who were still at home in June 2023-the March cohort)

4. Contribution to Reading’s Health and Wellbeing Strategic Aims

4.1 The activity reported through the Better Care Fund metrics in Section 3 supports people to remain well at home and to receive the right care in the right place based on their needs, and is primarily aligned to priorities 1 and 2 of the [Berkshire West Joint Health & Wellbeing Strategy 2021-30](#) and partially supports priority 5.

1. Reduce the differences in health between different groups of people
2. Support individuals at high risk of bad health outcomes to live healthy lives
3. Help children and families in early years
4. Promote good mental health and wellbeing for all children and young people
5. Promote good mental health and wellbeing for all adults

The Reading Integration Board (RIB) are leading on delivery against priorities 1 and 2 for Reading. Action plans have been developed in collaboration with the members of RIB, which includes representation from system partners, including Acute hospital, Community care providers, Primary Care and Voluntary Care Sector. Delivery against the action plans will be a collaborative approach, supported by a number of groups, such as the Long-Term Conditions Board and Voluntary Care Sector groups, in order to achieve the expected outcomes in the short-term. Action plans will be regularly reviewed against the 10-year strategy.

4.2 The Reading Integration Board (RIB) Programme Plan objectives are mapped to both the Health and Wellbeing Board strategic priorities, as listed in 4.1 above, and the Berkshire West Integrated Care Partnership (ICP) priorities, listed below, to ensure alignment and effective reporting:

Berkshire West Integrated Care Partnership (ICP) Strategic Objectives

- Promote and improve health and wellbeing for Berkshire West residents
- Create a financially sustainable health and social care system
- Create partnerships and integrate services that deliver high quality and accessible Health and Social Care
- Create a sustainable workforce that supports new ways of working

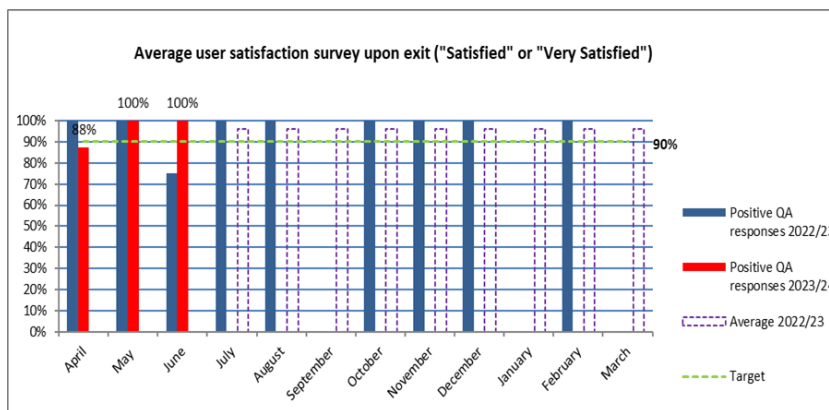
5. Environmental and Climate Implications

5.1. The Council declared a Climate Emergency at its meeting on 26 February 2019 (Minute 48 refers).

5.2. No new services are being proposed or implemented that would impact on the climate or environment, however climate implications are being considered in relation to the wider context of the Health and Wellbeing Board Strategic Priority Action Plans.

6. Community Engagement

- 6.1. Engagement in relation to specific services takes place, such as feedback on customer satisfaction for services such as Reablement. Stakeholder engagement continues to be a key factor to effective integrated models of care, and engagement with all system partners is important to the Reading Integration Board. Service User satisfaction rates for our Community Reablement Team was 100%, with an average to date of 96%, against a minimum target of 90%. Service Users being discharged from hospital have been given an opportunity to provide feedback on their experience to enable us to shape our services.



- 6.2. Reading is currently recruiting a co-production lead, to help ensure that services are co-designed with service users, carers and families and feedback on user experience are gathered.

7. Equality Implications

- 7.1. Under the Equality Act 2010, Section 149, a public authority must, in the exercise of its functions, have due regard to the need to—
- eliminate discrimination, harassment, victimisation, and any other conduct that is prohibited by or under this Act;
 - advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
 - foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
- 7.2. Not applicable as there are no new proposals or services recommended or requested in this report.

8. Other Relevant Considerations

- 8.1. The Better Care Fund Planning and Performance reporting included in this report is requires us to adhere to the Better Care Fund Framework 2023/25 four National Conditions and the Better Care Fund Objectives:
- National Condition 1: Plans to be jointly agreed.
 - National Condition 2: Enabling people to stay well, safe and independent at home for longer.
 - National condition 3: Provide the right care in the right place at the right time.
 - National Condition 4: Maintaining NHS's contribution to adult social care and investment in NHS commissioned out of hospital services.

9. Legal Implications

- 9.1 Compliance with the Better Care Fund (BCF) 2022/23 National Conditions: The report sets out the National Conditions in Section 8. A variation to the Section 75 Framework Partnership Agreement (2021/22) was agreed between the Integrated Care Board (ICB) and Reading Borough Council (RBC) in relation to the pooled funds, as required under Better Care Fund Policy and Guidance for 2022/23, and meets National Conditions 1, 2 and 3.
- 9.2 A Section 75 Framework Agreement will be drawn up and signed off by 31st October, in relation to the BCF Plan for 2023-25, in accordance with the Planning Requirements.³

10. Financial Implications

10.1. BCF 2022/23 End of Year position

BCF Income 2022/23	
Disabled Facilities Grant	£1,197,341
Improved Better Care Fund	£2,692,624
NHS Minimum Fund	£11,781,757
LA Additional Funding	£270,400
Total BCF Pooled Fund	£15,942,122

ASC Discharge Fund 2022/23	
LA Plan Spend	£474,585
ICB Plan Spend	£810,196
ASC Discharge Fund Total	£1,284,781
	Planned 22-23
Total BCF + Discharge Fund Income	£17,226,903

BCF Expenditure 2022/23	
Actual	£15,154,122
ASC Discharge Fund 2022/23	
Actual	£1,284,781
Total BCF + Discharge Fund Expenditure	£16,438,903

The underspend of £788k has been incorporated into the BCF Plan for 2023-25 to support projects to meet the BCF objectives and deliver against the BCF Metrics.

10.2. BCF 2023/25 Planned Income and Expenditure.

Details of income and expenditure will be set out in the Section 75 Framework Agreement for pooling of funds between the Integrated Care Board (ICB) and Reading Borough Council (RBC) for 2023/25. The table below is an excerpt from the final submitted Better Care Fund Plan. Please note that since submission of plans, the Better Care Fund has released an additional amount of Disabled Facilities Grant Funding of £104k, which will be reflected in the Quarterly monitoring return due to the Better Care Fund team by 31st October 2023.

³ <https://www.england.nhs.uk/wp-content/uploads/2023/04/PRN00315-better-care-fund-planning-requirements-2023-25.pdf>

Funding Sources	Income Yr 1	Income Yr 2	Expenditure Yr 1	Expenditure Yr 2	Difference
DFG	£1,197,341	£1,197,341	£1,197,341	£1,197,341	£0
Minimum NHS Contribution	£12,448,604	£13,153,195	£12,448,604	£13,153,195	£0
iBCF	£2,692,624	£2,692,624	£2,692,624	£2,692,624	£0
Additional LA Contribution	£1,093,000	£305,000	£1,093,000	£305,000	£0
Additional ICB Contribution	£0	£0	£0	£0	£0
Local Authority Discharge Funding	£377,502	£626,653	£377,502	£626,654	£0
ICB Discharge Funding	£833,925	£1,473,618	£833,925	£1,473,618	£0
Total	£18,642,996	£19,448,432	£18,642,996	£19,448,432	£0

The total spend, as at 10th September, against the Discharge Funding for 2023/24, based on the fortnightly reporting to the Better Care Fund Team, was £240,430 (25% of the ICB Discharge Funding and 9% of the Local Authority Discharge Funding streams), out of a total fund for the year of £1.2M.

Scheme Type	Spend from ICB Allocation to date	Spend from LA allocation to date	Total spending to date
Home care or domiciliary care (Pathway 1)	£9,418	£0	£9,418
Home-based intermediate care services (Pathway 1)	£0	£0	£0
Bed based intermediate care services (Pathway 2)	£0	£0	£0
Residential placements (Pathway 3)	£38,584	£0	£38,584
Workforce recruitment and retention	£110,087	£6,000	£116,087
Assistive technologies and equipment	£23,077		£23,077
Voluntary and community support		£19,481	£19,481
All other spend	£23,330	£10,454	£33,784
Total	£204,495	£35,935	£240,430

Additional capacity will be available from November 2023 to meet the demand over the Winter period and the bulk planned spend from this fund will be from November 2023 to March 2024.

11. Timetable for Implementation

- 11.1. The timescales for agreeing Better Care Fund plans 2023/25 and assurance are set out below. All key submission dates were met and we were advised on 18th September 2023, that our plans have been formally approved. Quarterly monitoring reports will recommence from October 2023.

BCF planning requirements published	5 April
Optional draft BCF planning submission (including intermediate care capacity and demand plan) submitted to BCM and copied to the BCF team (england.bettercarefundteam@nhs.net)	19 May
BCF planning submission (including intermediate care and short term care capacity and demand plan; and discharge spending plan) from local HWB areas (agreed by ICBs and local government). All submissions will need to be sent to the local BCM, and copied to england.bettercarefundteam@nhs.net	28 June
Scrutiny of BCF plans by regional assurers, assurance panel meetings and regional moderation	28 June – 28 July
Regionally moderated assurance outcomes sent to BCF team	28 July
Cross-regional calibration	3 August
Approval letters issued giving formal permission to spend (NHS minimum)	8 September
All section 75 agreements to be signed and in place	31 October

12. Background Papers

- 12.1 The BCF performance data included in this report is drawn from the *Reading Integration Board Dashboard – April 2023 (Reporting up to 31st March 2023) and July 2023 (Reporting up to 30th June 2023)*.

Appendices

- Appendix 1 Reading BCF End of Year Return (2022/23)
- Appendix 2 Reading BCF Narrative (2023/25)
- Appendix 3 Reading BCF Planning Template (2023/25)