

Meeting: Adult Social Care, Health and Wellbeing Sub-Committee of the Overview and Scrutiny Committee

Date: 10th January 2019

Title: Better Care Fund update

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Service: Health, Education, Care & Safeguarding

Wards affected: ALL

1. Purpose of Report

1.1 This report provides an update on the activity of the Better Care Fund.

2. Introduction

2.1 What is the Better Care Fund ?

The Better Care Fund (BCF) is a component of government policy to improve integration between health and social care. It creates a pooled fund, operated jointly by local authorities and NHS Clinical Commissioning Group. The BCF commenced in 2015/16.

3. Details

3.1 A report to the Committee on 5th July noted that “the North Tyneside BCF plan identified that the CCG and the Authority will work in collaboration to review and rebase existing schemes within the BCF document, ensuring value for money and positive quality outcomes, identifying opportunities to include (where appropriate) system and service changes, working within the current financial envelope. Any changes to services provided will take effect from April 2018 for 2018/19, or later as agreed between the two organisations. Any changes must ensure that the North Tyneside BCF plan continues to comply with the BCF national requirements. Both organisations will work together to ensure that the residents of North Tyneside get the best return for investment in the BCF.

Accordingly, a review of BCF schemes was carried out and considered by the BCF Partnership Board. The review identified many examples of good practice, and some ways in which the services could improve their coordination with each other.

Following the review, work is underway to consider how the work of services related to the frail elderly population work together most effectively. This particularly relates to Carepoint, CarePlus, and Intermediate Care.

4. Future Developments

On a national level, the current policy framework lasts only until March 2019..

As noted in the July 2018 report, the Secretary of State for Health and Social Care stated in the House of Commons on 18th June 2018 .

“For our most vulnerable citizens with both health and care needs, we also recognise that NHS and social care provision are two sides of the same coin. It is not possible to have a plan for one sector without having a plan for the other. Indeed, we have been clear with the NHS that a key plank of its plan must be the full integration of the two services. As part of the NHS plan, we will review the current functioning and structure of the Better Care Fund to make sure that it supports that. While the long-term funding profile of the social care system will not be settled until the spending review, we will publish the social care Green Paper ahead of that. However, because we want to integrate plans for social care with the new NHS plan, it does not make sense to publish it before the NHS plan has even been drafted, so we now intend to publish the social care Green Paper in the autumn around the same time as the NHS plan.”¹

Hence we can expect the BCF to continue beyond 2019/20 but there may be changes in the operation of the BCF. At the time of writing, no further information has been received from Government on future arrangements for the BCF.

5. Background Information

The following documents have been used in the compilation of this report and may be inspected at the offices of the author.

Better Care Fund Narrative Plan 2017-18-19

6. Appendices

Appendix 1 – BCF metrics

¹ <https://hansard.parliament.uk/commons/2018-06-18/debates/6FAA6047-F74C-40ED-9C01-CE7313E8B740/NHSLong-TermPlan>

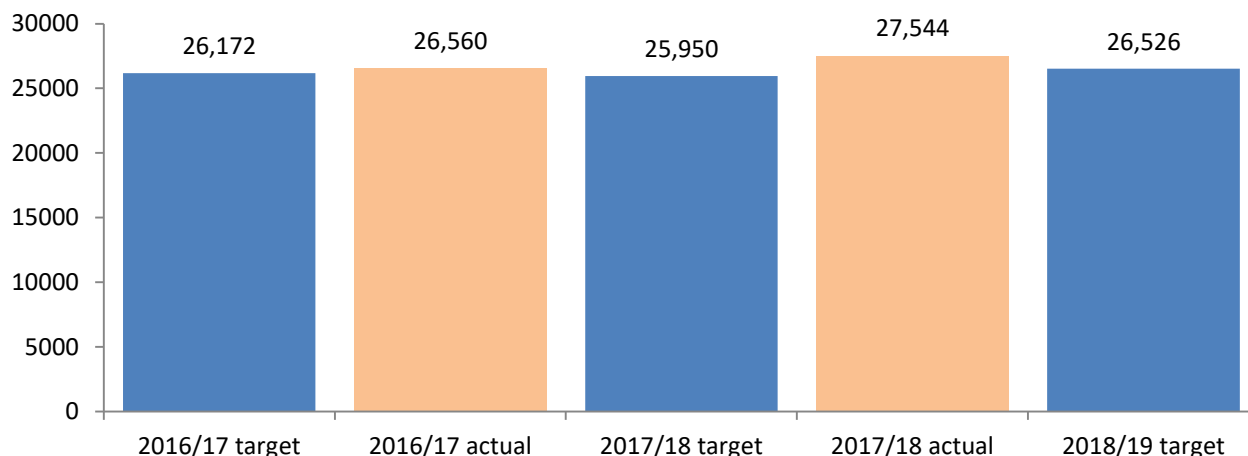
Appendix 1 – BCF metrics

The BCF Policy Framework identifies four metrics that are monitored centrally; these are emergency hospital admissions; delayed transfers of care; the effectiveness of reablement; and permanent admissions to residential care.

Emergency Hospital Admissions

Figure 1 below shows the year-on-year trend in emergency hospital admissions and the planned trajectory for 2018/19.

Figure 1



- From April–October 2018 there were 16,201 emergency admissions, which suggests a full-year outturn in the region of 27,800.
- The volume of emergency admissions for April–October 2018 was above the BCF trajectory.
- However NHS England have agreed target levels for emergency admissions, in CCG Operational Plans for 2019/20, which supersede the BCF targets (which were set on 2017 for two years ahead). The current level of emergency admissions is lower than the level set out in the CCG Operational Plan.

Delayed transfers of care (DTOCs)

The Department of Health and Social Care have set targets for reductions in the levels of delay. These targets are expressed in delayed days per 100,000 patients:

Table 1

Total delayed days per day. (Per 100,000 population aged 18+)	Target October 2018
NHS responsible	5.2
Social care responsible	2.4
Both responsible	0
Total	7.6

Figure 2

Delayed transfers of care Number of beds occupied by delayed patients per day, per 100,000 population

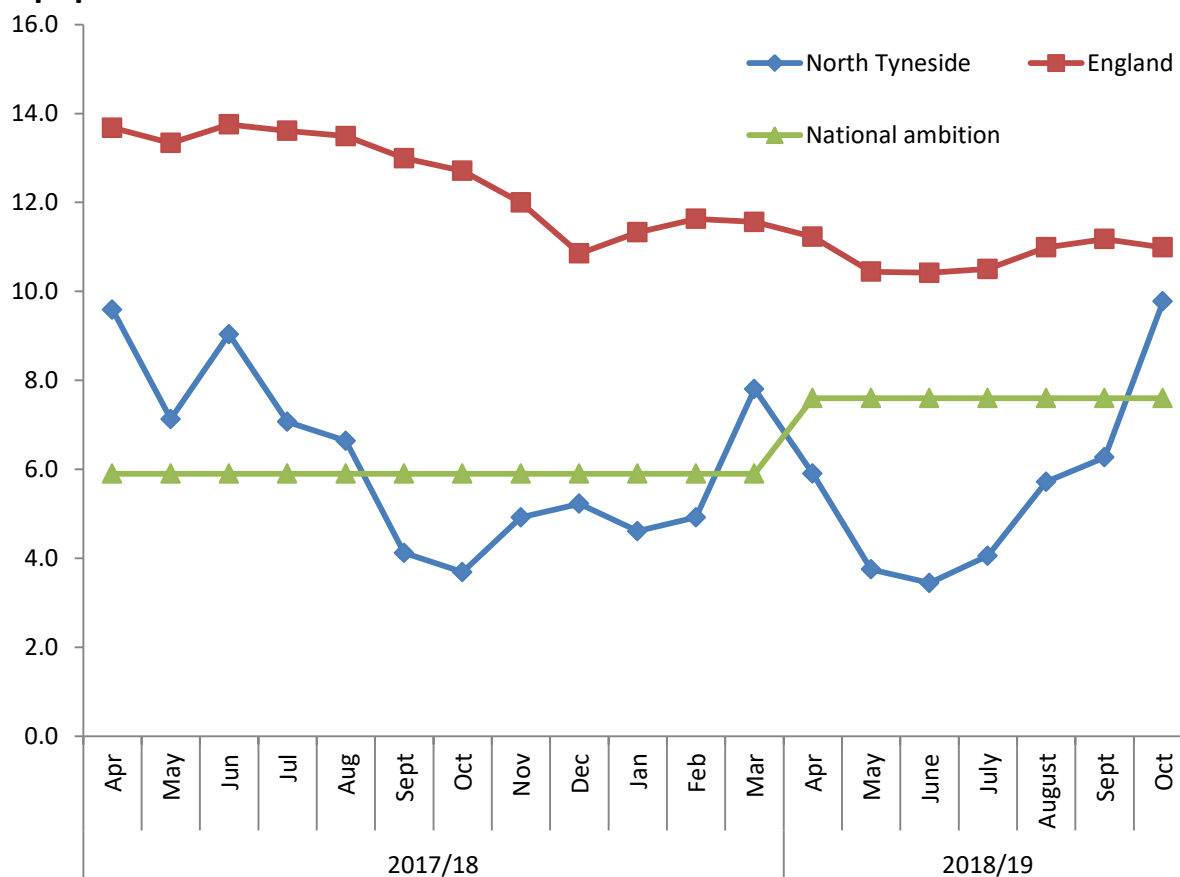


Figure 2 above shows that:

- The rate of delays in North Tyneside has been well below the England rate throughout 2017/18 and most of 2018/19.
- Both the England rate and the North Tyneside rate have declined, however there was a sharp increase in the North Tyneside rate in September and October 2018.
- North Tyneside was below the national ambition level (i.e. better than target) in 10 of the last 12 reported months, the exceptions being March 2018 and October 2018.

The increase in September and October 2018 has been mainly related to North Tyneside patients in specialist mental health beds managed by Northumberland, Tyne and Wear NHS Foundation Trust (NTW).

Figure 3

**Delayed transfers of care by NHS provider
(North Tyneside patients only)**

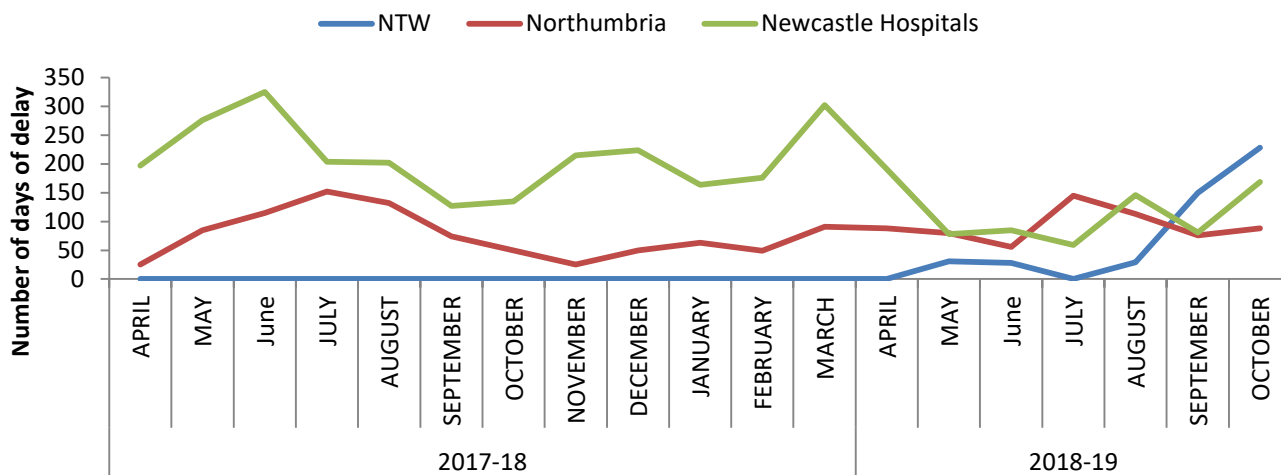


Figure 3 above shows that delays relating to NTW have generally been very low but increased in September and October. The CCG and the Authority are in discussion with managers at NTW to understand the reasons for this increase.

Effectiveness of reablement

The target for the number of patients at home 91 days after discharge from hospital to reablement remains at 93.1%. Current performance is above target at 94%, compared to an England average of 82%.

Permanent admissions to residential care

As shown in Figure 4 below, in the first two months of 2018/19, the number of admissions has declined during the past 12 months, being below the target level for nine out of twelve months.

There has been an increase in October and November but it is too early to establish a trend.

Figure 4

Permanent admissions to residential care

