

Health and Wellbeing Board

6 September 2023

Better Care Fund plan 2023-2025: progress update

Recommendations

That the Health and Wellbeing Board:

1. Notes the progress of the Better Together Programme in 2022/23 and the updates provided on the key areas of joint focus in the Better Care Fund plan for 2023-25; and
2. Notes performance against the national Better Care Fund metrics.

1. Executive Summary

- 1.1 This report provides the Health and Wellbeing Board with an update on progress against the key areas of focus in the Better Care Fund Plan for 2023-25, and progress against the metrics approved by a Sub-Committee of this Board on the 19 July 2023.

Key areas of joint focus for NHS partners and the local authority

- 1.2 Discharge to Assess and Community Recovery

As the Health and Wellbeing Board is aware, Warwickshire is one of six national discharge integration frontrunners with a focus on intermediate care, which involves developing pathway 1 (person returns home with support) discharge to assess services in Warwickshire. These services enable people in an acute hospital to access timely domiciliary care and where required, therapeutic intermediate care services on discharge.

Since the pilot went live on the 22 April 2023 to the 31 July 2023, 879 people have been referred to the new Community Recovery Service. 634 of these referrals were for both domiciliary care support and a therapeutic intervention. A dashboard is under development to monitor the effectiveness of reducing length of stay in hospital and the outcomes of the service. Parallel work is underway to obtain qualitative feedback from customers and providers.

Month	Number of referrals to CRS
April 2023	55

May 2023	195
June 2023	221
July 2023	225
Total	879

Partners continue to review and refine the service as we build by doing through the pilot.

1.3 Review and Redesign of Continuing Healthcare

Through joint working between the ICB and the two geographic Care Collaboratives, the commissioning arrangements for NHS Continuing Healthcare ('CHC') services are being reviewed and re-designed to support a transition to more integrated delivery at Place. This work is progressing with system wide engagement. So far partner organisations have, through a number of workshops, expressed their in-principle position, in relation to receiving delegated services from the ICB. These are split between clinical and non-clinical functions and 2 subgroups have been established to develop option appraisals for each. At the end of month four an established governance structure is embedding. A workshop has also been held to provide a detailed overview of the services and functions that are being delegated. Further organisation specific briefing sessions have also been offered to partner organisations.

1.4 Ageing Well Programme

Working in collaboration with this NHS lead programme of 3 joint areas impacting health and social care the following progress has been made:

Urgent Community Response - continues to exceed targets for patients seen in under 2 hours, responding to around 1,200 patients every month, with at least 85% in under 2 hours. Ongoing work with West Midlands Ambulance Service is increasing referral rates for patients who could be better treated in the community. New pathways are also being developed, including removing long lie exclusion criteria for falls patients. Point of care blood testing is being progressed to support more timely diagnostics in a patient's home and is hoped to be implemented in the near future.

Enhanced Health in Care Homes - now has a well-established development group, with members from across health and care services including care home representatives. A re-launch of the red bag scheme across Warwickshire is helping promote good communication between care homes and hospital. A new care home information pack has recently been completed to support work on managing deterioration and has been well received by care home providers. The development plan for the next 12 months is now being finalised.

Proactive (anticipatory) care - Proactive (anticipatory) care is focused on frail patients with multiple long-term conditions, living in their own homes. Work is underway to develop the use of data to identify patients who would most benefit from a proactive care approach. A pilot project led by primary care in Warwickshire North is exploring a new approach to support for this group of patients with more complex needs.

1.5 Integrated Care Record for under 18s

Warwickshire County Council's Children's and Families service commenced sharing relevant information relating to children and young people under the age of 18 with the NHS in the Integrated Care Record (ICR) and using the ICR to access relevant NHS information to assist them in their roles, on 27 July 2023. Appropriate information governance processes and data protection principles have been followed.

Information being shared includes:

- Key demographics including name, date of birth, gender, ethnicity, first language, fluency in English, NHS number
- Contact information – phone and email addresses
- Any specific communication needs
- Key contacts of the allocated worker
- Title and date of any assessments or reviews completed, including any safeguarding information

Performance Update

- 1.6 Locally our Better Care Fund plan for 2023/25 focusses our activities to improve our performance in the five key areas which are measured against the National Performance Metrics. These being:
- a. Reducing Avoidable Admissions (General and Acute)
 - b. Improving the proportion of people discharged home to their usual place of residence
 - c. Reducing permanent admissions to residential and care homes
 - d. Increasing effectiveness of reablement
 - e. New - Reducing emergency admissions due to falls

- 1.7 A summary of performance against the national areas of focus using the most recent data available:

Metric	23/24 performance where available	Target	Status
Reducing Avoidable Admissions (General and Acute)	Quarter 1 Actual: 1,103	1,213	Under (better than target)
Improving the proportion of people discharged home to their usual place of residence	Quarter 1 Actual: 95.0%	95.8%	On target

Reducing permanent admissions to residential and care homes; and	Quarter 1 Actual: 232	176.5	Over (worse than) target
Increasing effectiveness of reablement	2022/23 Actual: 94.4% 23/24: Data for 23/24 not available until May 24	94.2%	Target achieved
Reducing emergency admissions due to a fall	Quarter 1 Actual: 548	466.25	Over (worse than) target

2. Financial Implications

2.1 The Improved Better Care Fund (iBCF) allocation for 2023/24 is £15.133m.- The Discharge Fund allocation for Warwickshire for 2023/24 is £5.639m, comprising of:

- £2.121m from the local authority Discharge Fund allocation; and
- £3.518m from the Integrated Care Board Discharge Fund allocation.

2.2 The iBCF is temporary. In order to counter the risk inherent in temporary funding, all new initiatives are either temporary or commissioned with exit clauses. There are, however, a number of areas where the funding is being used to maintain statutory social care spending and this would require replacement funding if the Better Care Fund was removed without replacement. This risk continues to be noted in Warwickshire County Council's annual and medium-term financial planning.

3. Environmental Implications

3.1 None.

4. Supporting Information

Performance against the national areas of focus using the latest confirmed data available.

4.1 Reducing Avoidable Admissions (General and Acute)

Year to date (April 2023 to June 2023), unplanned hospitalisations for chronic ambulatory care sensitive conditions in Warwickshire were 109 admissions or 9% lower than the same period last year and 9% better than target. This follows a similar trend to the same period last year where performance was better than target in quarters 1 and 2, before increasing during the second half of the year.

Quarter	Actual (lower is better)	Target	% under target
Q1 2023/24	1,103	1,213	-9%

4.2 Improving the proportion of people discharged home to their usual place of residence

Year to date (April 2023 to June 2023), the proportion of people discharged home to their usual place of residence in Warwickshire was 0.8% lower than the same period last year and is tracking just below target.

Quarter	Actual (higher is better)	Target	% under target
Q1 2023/24	95.0%	95.8%	-0.8%

4.3 Reducing long term admissions to residential and nursing care 65+

Year to date (April 2023 to June 2023), permanent admissions were 20% higher than the same period last year and 31.5% above target. There appears to be a greater demand for care home placements, both nursing and residential and at relative equal measure. The majority of these placements are being made post a hospital admission, but with a backdrop of an enhanced offer being available in relation to supporting people to return home after a hospital admission. This above expected increase is directly related to the older people's population requiring this level of support and not due to a lack of other options in relation to being supported at home or in extra care housing. In June 2023 the number of permanent admissions to care home post a hospital stay was 55, the highest it has been since April 2019 when 66 people were placed. Looking at the most recent performance information, the number of admissions in July 2023 post a hospital admission appears significantly lower than expected. Work is also taking place to review Discharge to Assess arrangements.

The target for 2023/24 is 706 admissions per 100k population, which equates to a quarterly target of 176.5.

Quarter	Actual (lower is better)	Target	% over target
Q1 23/24	232	176.5	31.5%

4.4 Increasing the effectiveness of reablement 65+

This target measures the percentage of older people (65 and over) who are still at home 91 days after discharge from hospital into reablement or rehabilitative services. This target is an annual measure and performance for

2022/23 was, similar to previous years, above target and continues to improve.

Year	Actual (higher is better)	Target	% over (better than) target
2022/23	94.4%	94.2%	0.2%
2021/22	93.7%	91.7%	2%

4.5 Reducing emergency hospital admissions due to falls in people aged 65+

This is a new metric for 2023/4 to measure the impact of frailty and falls prevention initiatives delivered through for example the Ageing Well and Better Care Fund programmes.

The target for 2023/24 is 1,865 admissions per 100k population, which equates to a quarterly target of 466.25.

The impact of falls prevention initiatives such as timed up and go assessments, strength and balance exercise videos and falls urgent response can start to be seen as year to date (April 2023 to June 2023), emergency admissions due to falls were 15.4% lower than the same period last year, although still 17.5% above target.

Quarter	Actual (lower is better)	Target	% over target
Q1 23/24	548	466.25	+17.5%

5. Timescales associated with the decision and next steps

Better Care Fund Plan 2023-2523

- 5.1 At the time of writing this report, confirmation is awaited from NHS England that our Better Care Plan for 2023-25 has been approved. This is expected around the 8th September 2023.
- 5.2 As in previous years, a Section 75 Legal Agreement will underpin the financial pooling arrangements, including for the Adult Social Care Discharge Fund outlined in section 2.1. This cannot be signed until our Plan has been nationally approved. The intention is that the Section 75 agreement will be finalised and signed by 31st October 2023.

Better Care Fund Policy Framework 2023/24

- 5.3 As the Health and Wellbeing Board is already aware the Improved Better Care Fund (iBCF) settlement for 2024/25 has not been published, and so the draft

iBCF plan for 2024/25 will commence being prepared based on the current allocation.

Appendices

1. None

Background Papers

None

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The report was circulated to the following members prior to publication:

Local Member(s): County wide report

Other members: To be circulated to the Chair & spokes of ASC&H OSC