

**REPORT TO:** Health & Wellbeing Board

**DATE:** 6 July 2022

**REPORTING OFFICER:** Director Adult Social Services

**PORTFOLIO:** Health and Wellbeing

**SUBJECT:** Better Care Fund (BCF) 2021-22 Year-End Return

**WARD(S):** Borough-wide

## 1.0 PURPOSE OF REPORT

1.1 To update the Health and Wellbeing Board on the Better Care Fund 2021/22 Year-End return, for information, following its submission on 27<sup>th</sup> May.

2.0 **RECOMMENDATION: The BCF Year-End Return for 2021/22 be noted for information.**

## 3.0 SUPPORTING INFORMATION

### 3.1 BCF Year-End Return 2021/22

The BCF Year-End Return for 2021/22 is attached at the Appendix and details the following information:

#### **Tab 3 – National Conditions**

There are four national conditions which are confirmed as meeting:

- The plan includes all mandatory funding and is included in a pooled fund governed under Section 75 of the NHS Act 2006;
- Planned contribution to social care from the CCG minimum contribution is agreed in line with the BCF Policy;
- Agreement to invest in NHS commissioned out of hospital services; and
- Plan for improvement in outcomes for people being discharged from hospital.

#### **Tab 4 – Metrics**

There are five national metrics and we are currently on track with three of them. In terms of the metric for **Length of Stay** – Hospital lengths of stay, particularly stranded and super-stranded numbers, have been a focus for Halton as well as the Trusts and the Cheshire & Merseyside Hospital cell. The number of patients who have been super-stranded during the year has been greater than planned largely due to the wave of Covid that occurred over the winter which resulted in high hospitalisations, high number of patients having to remain in isolation and high number of care home closures due to outbreaks. During the spring, Halton

has recovered its position, but there are still more long stay patients than desired, but now largely due to increase acuity and mental health issues.

### **Tab 5 – Income and Expenditure Actual**

Planned and actual expenditure has a difference of £1,994,703. This was due to the Disabled Facilities Grant (DFG) not being spent in year due to delays resulting from the pandemic, particularly in terms of accessibility to buildings. This funding has been committed to use in 2022/23.

### **Tab 6 – Year-End Feedback**

Year-end feedback confirms that the overall delivery of the BCF in our locality has improved joint working between health and social care, and our schemes for 2021/22 were implemented as planned and had a positive impact.

Two main successes that are highlighted include:

- ***Integrated workforce*** – Throughout the year we have strengthened the approach for intermediate care and frailty services resulting in increased referrals, which have demonstrably improved the timeliness and effectiveness of hospital discharges and hospital admission avoidance.
- ***Pooled or aligned resources*** - The above has been facilitated by the long-held governance and financial arrangements associated with the pooled budget as well as enabling timely and appropriate re-direction of resources to meet changing demand.

Two main challenges that are highlighted include:

- ***Integrated electronic records and sharing across the system with service users*** - The theoretical idea of health and care records requires substantial cross-system work to make progress on achieving this.
- ***Joined-up regulatory approach*** - Whilst there is communication across health and social care, commissioning and quality assurance with some interaction with the Care Quality Commission (CQC), there is further work that is required to focus on a pathway approach to regulation with a focus on outcomes for individuals.

### **Tab 7 – Adult Social Care Fee Rates**

This tab details the Adult Social Care Fee Rates in relation to:

- Average amount paid to external providers for home care, per contact hour - £18.18
- Average amount paid for external provider care homes without nursing, for clients aged 65+, per client week - £445.40
- Average amount paid for external provider care homes with nursing, for clients aged 65+, per client week - £656.86.

Further detail can be found within the spreadsheet.

#### **4.0 POLICY IMPLICATIONS**

4.1 None identified at this stage.

#### **5.0 OTHER/FINANCIAL IMPLICATIONS**

5.1 The Better Care Fund sits within the wider pooled budget arrangement and the financial context of the local health and social care environment. The pooling of resources and integrating processes and approach to the management of people with health and social care needs will support effective resource utilisation.

#### **6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

##### **6.1 A Healthy Halton**

Developing integration further between Halton Borough Council and the NHS Halton Clinical Commissioning Group will have a direct impact on improving the health of people living in Halton. The plan that is developed is linked to the priorities identified for the borough by the Health and Wellbeing Board.

#### **7.0 RISK ANALYSIS**

7.1 Management of risks associated with service redesign and project implementation are through the governance structures outlined within the Joint Working Agreement.

#### **8.0 EQUALITY AND DIVERSITY ISSUES**

8.1 None identified at this stage.

#### **9.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

None within the meaning of the Act.