

Better Care Fund 2023-24 Year End Reporting Template

1. Guidance for Year-End

Overview

The Better Care Fund (BCF) reporting requirements are set out in the BCF Planning Requirements document for 2023-25, which supports the aims of the BCF Policy Framework and the BCF programme; jointly led and developed by the national partners Department of Health and Social Care (DHSC), Department for Levelling Up, Housing and Communities (DLUHC), NHS England (NHSE), working with the Local Government Association (LGA) and the Association of Directors of Adult Social Services (ADASS). An addendum to the Policy Framework and Planning Requirements has also been published, which provides some further detail on the end of year and reporting requirements for this period.

The key purposes of BCF reporting are:

- 1) To confirm the status of continued compliance against the requirements of the fund (BCF)
- 2) To confirm actual income and expenditure in BCF plans at the end of the financial year
- 3) To provide information from local areas on challenges, achievements and support needs in progressing the delivery of BCF plans, including performance metrics
- 4) To enable the use of this information for national partners to inform future direction and for local areas to inform

BCF reporting can be used by local areas, including ICBs, local authorities/HWBs and service providers, to further understand and progress the integration of health, social care and housing on their patch. BCF national partners will also use the information submitted in these reports to aid with a bigger-picture understanding of these issues.

BCF reports submitted by local areas are required to be signed off by HWBs, including through delegated arrangements as appropriate, as the accountable governance body for the BCF locally. Aggregated reporting information will be

Note on entering information into this template

Throughout the template, cells which are open for input have a yellow background and those that are pre-populated have a blue background and those that are not for completion are in grey, as below:

Data needs inputting in the cell

Pre-populated cells

Not applicable - cells where data cannot be added

Note on viewing the sheets optimally

To more optimally view each of the sheets and in particular the drop down lists clearly on screen, please change the zoom level to between 90% - 100%. Most drop downs are also available to view as lists within the relevant sheet or in The row heights and column widths can be adjusted to fit and view text more comfortably for the cells that require

Please DO NOT directly copy/cut & paste to populate the fields when completing the template as this can cause issues during the aggregation process. If you must 'copy & paste', please use the 'Paste Special' operation and paste 'Values'

The details of each sheet within the template are outlined below.

Checklist (2. Cover)

1. This section helps identify the sheets that have not been completed. All fields that appear as incomplete should be complete before sending to the BCF team.
2. The checker column, which can be found on the individual sheets, updates automatically as questions are completed. It will appear 'Red' and contain the word 'No' if the information has not been completed. Once completed the checker column will change to 'Green' and contain the word 'Yes'
3. The 'sheet completed' cell will update when all 'checker' values for the sheet are green containing the word 'Yes'.
4. Once the checker column contains all cells marked 'Yes' the 'Incomplete Template' cell (below the title) will change to 'Templ
5. Please ensure that all boxes on the checklist are green before submitting to england.bettercarefundteam@nhs.net and copying in your Better Care Manager.

2. Cover

1. The cover sheet provides essential information on the area for which the template is being completed, contacts and sign off. Once you select your HWB from the drop down list, relevant data on metric ambitions and spend from your BCF plans for 2023-24 will prepopulate in the relevant worksheets.
2. HWB sign off will be subject to your own governance arrangements which may include a delegated authority.
3. Please note that in line with fair processing of personal data we request email addresses for individuals completing the reporting template in order to communicate with and resolve any issues arising during the reporting cycle. We remove these addresses from the supplied templates when they are collated and delete them when they are no longer needed.

Better Care Fund 2023-24 Year End Reporting Template

3. National Conditions

Selected Health and Wellbeing Board:

Halton

Has the section 75 agreement for your BCF plan been finalised and signed off?	Yes	
If it has not been signed off, please provide the date the section 75 agreement is expected to be signed off		
Confirmation of National Conditions		
National Conditions	Confirmation	If the answer is "No" please provide an explanation as to why the condition was not met in the year:
1) Jointly agreed plan	Yes	
2) Implementing BCF Policy Objective 1: Enabling people to stay well, safe and independent at home for longer	Yes	
3) Implementing BCF Policy Objective 2: Providing the right care in the right place at the right time	Yes	
4) Maintaining NHS's contribution to adult social care and investment in NHS commissioned out of hospital services	Yes	

Checklist
Complete:
Yes
Yes
Yes
Yes
Yes
Yes

Better Care Fund 2023-24 Year End Reporting Template

4. Metrics

Selected Health and Wellbeing Board:

Halton

National data may be unavailable at the time of reporting. As such, please use data that may only be available system-wide and other local intelligence.

Challenges and Support Needs Please describe any challenges faced in meeting the planned target, and please highlight any support that may facilitate or ease the achievements of metric plans

Achievements Please describe any achievements, impact observed or lessons learnt when considering improvements being pursued for the respective metrics

Metric	Definition	For information - Your planned performance as reported in 2023-24 planning				Assessment of progress against the metric plan for the reporting period	Challenges and any Support Needs	Achievements - including where BCF funding is supporting improvements.	
		Q1	Q2	Q3	Q4				
Avoidable admissions	Unplanned hospitalisation for chronic ambulatory care sensitive conditions (NHS Outcome Framework indicator 2.3i)	285.2	267.2	306.8	257.7	On track to meet target	The 2023/4 plan had a high level of volatility between the quarter, which reflected the 2022/3 activity levels, but in 23/4 the active was far more stable with consistent values each quarter. The cumulative annual	The introduction of type 5 A&E attendances at WHHFT may have had an impact in reducing the number of admissions of this cohort of patients.	
Discharge to normal place of residence	Percentage of people who are discharged from acute hospital to their normal place of residence	95.3%	95.4%	95.5%	95.6%	Not on track to meet target	Overall Halton achieved a 94.7% rate compared to the 95.5% plan, which reflects the acuity of patients within the acute setting and an high than anticipated level of care home referrals, which has been seen	None	
Falls	Emergency hospital admissions due to falls in people aged 65 and over directly age standardised rate per 100,000.					2,272.4	On track to meet target	Haltons falls rate per 100k residents has significantly improved over the last 2 years and consistently remains significantly better than the C&M average.	None
Residential Admissions	Rate of permanent admissions to residential care per 100,000 population (65+)					597	On track to meet target	We are currently working on year-end calculations, therefore actual figures are not yet available.	We are currently working on year-end calculations, therefore actual figures are not yet available.
Reablement	Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services					85.0%	On track to meet target	We are currently working on year-end calculations, therefore actual figures are not yet available.	We are currently working on year-end calculations, therefore actual figures are not yet available.

Checklist
Complete:

Yes

Yes

Yes

Yes

Yes

Better Care Fund 2023-24 Year End Reporting Template

5. Income actual

Selected Health and Wellbeing Board:

Halton

Income

		2023-24	
Disabled Facilities Grant		£2,168,761	
Improved Better Care Fund		£6,982,074	
NHS Minimum Fund		£12,762,141	
Minimum Sub Total			£21,912,976
	Planned		Actual
NHS Additional Funding	£0		Do you wish to change your additional actual NHS funding? No
LA Additional Funding	£0		Do you wish to change your additional actual LA funding? No
Additional Sub Total		£0	£0
	Planned 23-24	Actual 23-24	
Total BCF Pooled Fund	£21,912,976	£21,912,976	

		Additional Discharge Fund	
	Planned		Actual
LA Plan Spend	£978,876		Do you wish to change your additional actual LA funding? No
ICB Plan Spend	£942,072		Do you wish to change your additional actual ICB funding? No
Additional Discharge Fund Total		£1,920,948	£1,920,948
	Planned 23-24	Actual 23-24	
BCF + Discharge Fund	£23,833,924	£23,833,924	

Please provide any comments that may be useful for local context where there is a difference between planned and actual income for 2023-24

In terms of the DFG we received additional monies back in August/Sept 2023 for 2023/24 - £174,058

Expenditure

		2023-24
Plan		£23,659,866
Do you wish to change your actual BCF expenditure?		Yes
Actual		£23,240,282

Please provide any comments that may be useful for local context where there is a difference between the planned and actual expenditure for 2023-24

DFG underspend £419,584 due to slippage on capital programme. However these funds have been committed and will be incurred during 2024/25.

Checklist Complete:
Yes
Yes
Yes
Yes
Yes
Yes

Better Care Fund 2023-24 Capacity & Demand EOY Report

7.1. Capacity & Demand

Selected Health and Wellbeing Board:

Halton

Estimated demand - Hospital Discharge		Prepopulated from plan:								Q2 Refreshed planned demand				
		Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	
Service Area	Metric													
Reablement & Rehabilitation at home (pathway 1)	Planned demand. Number of referrals.	83	82	77	87	85	80	72	76	79	79	67	83	
Short term domiciliary care (pathway 1)	Planned demand. Number of referrals.	0	0	0	0	0	0	0	0	0	0	0	0	
Reablement & Rehabilitation in a bedded setting (pathway 2)	Planned demand. Number of referrals.	32	34	26	21	34	25	25	28	30	39	28	40	
Short-term residential/nursing care for someone likely to require a longer-term care home placement (pathway 3)	Planned demand. Number of referrals.	19	19	19	19	19	19	19	21	21	21	21	21	

Actual activity - Hospital Discharge		Actual activity (not spot purchase):												
		Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	
Service Area	Metric													
Reablement & Rehabilitation at home (pathway 1)	Monthly activity. Number of new clients.	34	37	41	41	29	41	32	43	41	52	32	42	
Short term domiciliary care (pathway 1)	Monthly activity. Number of new clients.	0	0	0	0	0	0	0	0	0	0	0	0	
Reablement & Rehabilitation in a bedded setting (pathway 2)	Monthly activity. Number of new clients.	11	13	12	15	18	14	17	23	21	15	16	13	
Short-term residential/nursing care for someone likely to require a longer-term care home placement (pathway 3)	Monthly activity. Number of new clients.	3	17	8	7	2	6	8	4	15	10	9	4	

Actual activity - Hospital Discharge		Actual activity in spot purchasing:												
		Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	
Service Area	Metric													
Reablement & Rehabilitation at home (pathway 1)	Monthly activity. Number of new clients.	0	0	0	0	0	0	0	0	0	0	0	0	
Short term domiciliary care (pathway 1)	Monthly activity. Number of new clients.	0	0	0	0	0	0	0	0	0	0	0	0	
Reablement & Rehabilitation in a bedded setting (pathway 2)	Monthly activity. Number of new clients.	0	0	0	0	0	0	0	0	0	0	0	0	
Short-term residential/nursing care for someone likely to require a longer-term care home placement (pathway 3)	Monthly activity. Number of new clients.	0	0	0	0	0	0	0	0	0	0	0	0	

Checklist

Complete:

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Better Care Fund 2023-24 Capacity & Demand Refresh

7.2 Capacity & Demand

Selected Health and Wellbeing Board:

Halton

Demand - Community		Prepopulated from plan:							Q2 refreshed expected demand				
Service Area	Metric	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24
Social support (including VCS)	Planned demand. Number of referrals.	12	12	12	12	12	12	12	12	12	12	12	12
Urgent Community Response	Planned demand. Number of referrals.	120	120	120	120	120	120	120	120	150	180	140	190
Reablement & Rehabilitation at home	Planned demand. Number of referrals.	1	1	1	1	1	1	1	1	1	1	1	1
Reablement & Rehabilitation in a bedded setting	Planned demand. Number of referrals.	2	2	2	2	2	2	2	2	2	2	2	2
Other short-term social care	Planned demand. Number of referrals.	0	0	0	0	0	0	0	0	0	0	0	0

Actual activity - Community		Actual activity:												
Service Area	Metric	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	
Social support (including VCS)	Monthly activity. Number of new clients.	16	17	17	16	16	16	19	19	20	17	17	16	
Urgent Community Response	Monthly activity. Number of new clients.	114	176	152	164	174	191	153	174	158	164	151	148	
Reablement & Rehabilitation at home	Monthly activity. Number of new clients.	1	3	0	0	1	2	4	0	2	3	1	0	
Reablement & Rehabilitation in a bedded setting	Monthly activity. Number of new clients.	0	0	0	1	0	0	0	0	0	2	0	0	
Other short-term social care	Monthly activity. Number of new clients.	0	0	0	0	1	0	0	0	0	0	2	1	

Checklist

Complete:

Yes

Yes

Yes

Yes

Yes

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8. Year-End Feedback

The purpose of this survey is to provide an opportunity for local areas to consider and give feedback on the impact of the BCF. There is a total of 5 questions. These are set out below.

Selected Health and Wellbeing Board:

Part 1: Delivery of the Better Care Fund

Please use the below form to indicate to what extent you agree with the following statements and then detail any further supporting information in the corresponding comment boxes.

Statement:	Response:	Comments: Please detail any further supporting information for each response
1. The overall delivery of the BCF has improved joint working between health and social care in our locality	Agree	Strong partnership working has been maintained in the Borough throughout the past year.
2. Our BCF schemes were implemented as planned in 2023-24	Strongly Agree	All BCF Schemes were implemented in line with the plan.
3. The delivery of our BCF plan in 2023-24 had a positive impact on the integration of health and social care in our locality	Agree	Multi-agency working takes place to reduce avoidable admissions and support the discharge of patients from hospital when they are medically fit to leave.

Part 2: Successes and Challenges

Please select two Enablers from the SCIE Logic model which you have observed demonstrable success in progressing and two Enablers which you have experienced a relatively greater degree of challenge in progressing. Please provide a brief description alongside.

4. Outline two key successes observed toward driving the enablers for integration (expressed in SCIE's logical model) in 2023-24	SCIE Logic Model Enablers, Response category:	Response - Please detail your greatest successes
Success 1	8. Pooled or aligned resources	There is a history of pooled resources in place. This has continued to be in place/has been maintained throughout the year with agreed governance arrangements in place, supported by the Joint Working Agreement (Section 75) between Halton Borough Council and NHS Cheshire & Merseyside (Halton Place).
Success 2	9. Joint commissioning of health and social care	Integrated commissioning arrangements supported through the Better Care Fund has successfully delivered a number of schemes including the home first approach for hospital discharge ensuring resources were allocated to maintain improved capacity.
5. Outline two key challenges observed toward driving the enablers for integration (expressed in SCIE's logical model) in 2023-24	SCIE Logic Model Enablers, Response category:	Response - Please detail your greatest challenges
Challenge 1	5. Integrated workforce: joint approach to training and upskilling of workforce	Progress on integrated approaches to training and workforce in general is challenging due to competing priorities across organisations and the interaction with sub-regional and regional plans. Progress continues to be made in relation to the care and treatment of residents in care homes with the Borough.
Challenge 2	3. Integrated electronic records and sharing across the system with service users	Plans still in development for integrated care records.

Checklist Complete:

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Footnotes:

Question 4 and 5 are should be assigned to one of the following categories:

1. Local contextual factors (e.g. financial health, funding arrangements, demographics, urban vs rural factors)
 2. Strong, system-wide governance and systems leadership
 3. Integrated electronic records and sharing across the system with service users
 4. Empowering users to have choice and control through an asset based approach, shared decision making and co-production
 5. Integrated workforce: joint approach to training and upskilling of workforce
 6. Good quality and sustainable provider market that can meet demand
 7. Joined-up regulatory approach
 8. Pooled or aligned resources
 9. Joint commissioning of health and social care
- Other