

REPORT TO:	HEALTH AND WELLBEING BOARD 17 October 2022
SUBJECT:	Better Care Fund end of year 2021/22 submission to NHS England
BOARD SPONSOR:	Annette McPartland Corporate Director Adult Social Care & Health Directorate Matthew Kershaw Chief Executive / Place Based Lead for Health Croydon Health Services NHS Trust
PUBLIC/EXEMPT:	Public

SUMMARY OF REPORT

To ensure that both national and local governance is completed correctly, the Health and Wellbeing Board is asked to review and note the submission of the Better Care Fund end of year submission to NHS England.

BOARD PRIORITY/POLICY CONTEXT

Approving submission of the end of year report to NHS England sits within the legislative remit of the Health and Wellbeing Board. See section 4 of this report which sets out why for 2021/22 the Board is being asked to note, rather than approve the submission.

FINANCIAL IMPACT

This report confirms to NHS England that Croydon's 2021/22 Better Care Fund allocations were allocated and spent within the guidelines of the national Better Care Fund policy framework. It does not impact current budgets.

RECOMMENDATIONS

This report recommends that the Health and Wellbeing Board is asked to note the end of year 2021/22 outturn submission to NHS England.

1. BACKGROUND AND CONTEXT

- 1.1 The Better Care Fund (BCF) is one of the Government's national vehicles for driving health and social care integration. It requires Clinical Commissioning Groups (CCGs), now Integrated Care Board (ICBs), and local government to agree a joint plan, owned by the Health and Wellbeing Board (HWB). These plans enable using pooled budgets to support integration, governed by an agreement under section 75 of the NHS Act (2006).
- 1.2 Given the ongoing pressures in systems from COVID-19, there were minimal changes made to the BCF in 2021 to 2022. The 2021-22 Better Care Fund

policy framework built on progress during the COVID-19 pandemic, strengthening the integration of commissioning and delivery of services and delivering person-centred care, as well as continuing to support system recovery from the pandemic.

- 1.3 In Croydon, the Better Care Fund is delivered through the One Croydon Alliance. The Alliance is a health and care partnership created from a shared ambition to use Outcomes Based Commissioning and Population Health Management approaches to improve the lives of people in Croydon.
- 1.4 The Partners in this Alliance are Croydon Council, South West London ICB, formerly CCG (Croydon Place), Croydon Health Service NHS Trust, The Croydon GP Collaborative, South London and Maudsley NHS Foundation Trust; and voluntary sector partners including Age UK Croydon.

2. APPROVING THE 2021/22 BCF PLAN

- 3.1 The 2021/22 plan was jointly created by Croydon's health and social care partners. It was signed-off by the One Croydon Senior Executive Group in November 2021.
- 2.1 2021/22 approval was sought from the Chair of the Health and Wellbeing Board on the 16 December 2021 and the Board ratified the plan at the next meeting on 19 January 2022.

3. SUBMITTING THE END OF YEAR 2021/22 REPORT TO NHS ENGLAND

- 3.1 The submission deadline for the end of year report was 27 May 2022. However, it was not possible for the Board to approve prior to submission, due to the cancellation of the June Board and the Terms of Reference not enabling delegation outside of the Board.
- 3.2 Having taken advice from Democratic Services, the only way to secure Board sign off for the submission, would be for NHS England to allow an extension to the deadline from 27 May until the next Board Meeting, or for NHS England to allow a temporary change to who can approve the report for submission.
- 3.3 The issue was escalated to the NHS England Better Care Fund regional lead on 17 May 2022. The response received confirmed, on this occasion, the Director Adult Social Services (DASS) and the Place Based Lead for Health would have permission to sign off the submission. Although a retrospective report would still need to go to the Health and Wellbeing Board to note the submission.
- 3.4 The report was duly signed off and submitted, meeting the national deadline of 27 May 2022. This report, once noted by the Board, concludes the second part of the amended submission guidance advised by NHS England.

4. KEY SUCCESS AND CHALLENGES NOTED IN THE SUBMISSION

- 4.1 The plan for 2021-22 was built upon established joint working in Croydon through the One Croydon Alliance and the delivery of the Croydon Health and Care Plan. This is a fully integrated programme of work between NHS

partners, the Voluntary Sector, Mental Health and social care. It outlines a vision for how health and social care will be delivered across the borough, particularly for those with the greatest need, to transform the health and wellbeing of local people.

- 4.2 The Better Care Fund and One Croydon programme delivering the funded schemes within it, are the strong foundations for integrated care in Croydon.
- 4.3 They help to deliver strategic commitments on the sustainability of Croydon's health and care services. These are to deliver care where the population needs it, encourage healthy lifestyles, as well as recognising the need for transformational work to reduce avoidable hospital admissions and hospital length of stay.
- 4.4 Most of the schemes in 2021-22 were rolled over from 2020-21 but the ethos shifted toward building on the integration work that Croydon has implemented since 2017.
- 4.5 2021/22 also built on previous plans to consider the increased emphasis on maximising independence and outcomes for people discharged from hospital via our integrated LIFE service.
- 4.6 It further included development of the Integrated Care Network Plus (ICN+) model of care in the 6 localities in Croydon. This is a major programme of transformation and integration that aims to improve outcomes for Croydon people through a proactive and preventative approach in each of the locality.

SUCCESSSES

- 4.7 There is a joint organisational development working group. This aims to understand the learning and development needs across the system and increase awareness of and access to training and learning opportunities that are available across key partners.
- 4.8 There have been joint 'Localities Teams' Induction sessions, team manager meetings and relationship building workshops, including ongoing joined learning and development sessions for integrated teams in each of the six localities. Enabling team members to learn about each other's areas of work as well as about wider services available in the community.
- 4.9 Also commissioned has been systemic leadership development sessions for a cohort of 46 managers of operational teams to:
 - Further build relationships with each other.
 - Openly share opportunities and challenges they are facing.
 - Raise awareness and understanding of different perspectives and capacities across the system.
 - Develop new ways of working to better support the operational staff in each locality.

CHALLENGES

Population health management

- 4.10 The Croydon health and care system continues to face similar challenges as in previous years. Wider system pressures, including relatively high bed occupancy in hospital and sustained increased hospital discharges, impacted on the already challenging Council financial position, with additional costs on packages of care.
- 4.11 Croydon Council is the second largest of all the London boroughs in terms of population. And its population keeps growing. Around one in seven (13.8%) of our residents are aged 65 years or over. People are living longer, and our population is ageing with projections suggesting that the number of people aged over 85 will increase by two thirds in Croydon by 2029. This is an important trend because we know that older people generally have more health problems and are more likely to use health and care services.
- 4.12 The number of older people living on their own in Croydon is increasing, and a far greater proportions of older people living alone, aged 75 and over, are women.
- 4.13 Croydon faces significant challenges around deprivation and inequalities. 50% of the South West London Integrated Care System population are Croydon residents. They face barriers to improving health and wellbeing including income, health, education and housing. Over the last 4 quarters the number of households that were accepted as homeless has been more than 2,000 over the year.
- 4.14 Social isolation and loneliness can have a detrimental effect on health and wellbeing and people living on their own can be more at risk.
- 4.15 The difference in how these challenges are addressed, is in the shift towards more locality working via the ICN+ programme and more targeted population health management approach. Primary Care Networks (PCNs) are also addressing many issues around health inequalities using population health management.
- 4.16 One Croydon has also undertaken a series of actions that aimed to embed a strategic whole system approach through its Population Health Management (PHM) strategy, including:
- Participating in the NHS England place development programme.
 - Selecting a key PHM challenge to test the Croydon approach.
 - Setting up a PHM steering group.
 - Developing a proactive and preventative framework.
 - Working with PCNs to address local inequalities.
 - Developing our PHM enablers (data, analysis, listening to our communities, leadership, evaluation).

Care homes

- 4.17 Croydon has a very high number of residential and nursing care homes in the borough (128). It admits a greater number of its residents to permanent

residential placement than it would like to, meaning that residents are not moved onto more suitable longer-term accommodation.

- 4.18 Despite the high number of homes in Croydon there is often still a need to find placements outside of the borough, resulting in the undesirable outcome of an individual being cared for outside of their local area.
- 4.19 The services provided by homes within the borough have not been developed fully this year in alignment with the requirements of our residents due to the pandemic; although we have seen positive engagement with providers in the period.
- 4.20 There is also the risk of provider failure, due to the rising costs of care, which the Council is committed to addressing locally via the Fair Cost of Care and its commitment to paying an appropriate unit cost.

5. CONSULTATION

- 5.1 This year's 21/ 22 plan was developed with input from the One Croydon Alliance partners and wider stakeholders in health and social care. The One Croydon Governance was used to agree and implement the schemes as planned.

6. EQUALITY IMPACT ASSESSMENT

This report has no impact or changes proposed that impact on people, budgets, processes, facilities or policies. An equality impact assessment was not required.

7. DATA PROTECTION IMPLICATIONS

- 7.1 **WILL THE SUBJECT OF THE REPORT INVOLVE THE PROCESSING OF 'PERSONAL DATA'?**

NO

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APPENDICES TO THIS REPORT

Appendix 1 Better Care Fund end of year 2021/22 NHS England submission