

<b>REPORT TO:</b>	<b>HEALTH AND WELLBEING BOARD</b> 17 October 2022
<b>SUBJECT:</b>	<b>Better Care Fund plan 2022/23 submission to NHS England</b>
<b>BOARD SPONSOR:</b>	<b>Annette McPartland</b> <b>Corporate Director</b> <b>Adult Social Care &amp; Health Directorate</b>  <b>Matthew Kershaw</b> <b>Chief Executive / Place Based Lead for Health</b> <b>Croydon Health Services NHS Trust</b>
<b>PUBLIC/EXEMPT:</b>	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 22/23 planning submission to NHS England.

#### **BOARD PRIORITY/POLICY CONTEXT**

Approving submission of the plans to NHS England sits within the legislative remit of the Health and Wellbeing Board.

#### **FINANCIAL IMPACT**

This report confirms to NHS England that Croydon's 2022/23 Better Care Fund allocations have been allocated 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 well board ratify the 2022/23 Better Care Fund planning 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 Place Based NHS ICB's 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 There were minor changes made to the BCF plans from 21/22 and the 22/23 plans build on progress of previous plans. The plans strengthening the integration of commissioning and delivery of services and delivering person-centred care.

- 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 (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 2022/23 BCF PLAN**

- 2.1 The 2022/23 plan was jointly created by Croydon's health and social care partners. It was signed-off by the One Croydon Senior Executive Group in September 2022.
- 2.2 The submission deadline for the 22/23 plans was 26 September 2022. However, it was not possible for the Board to approve prior to submission, due to the date of the Board and the Terms of Reference not enabling delegation outside of the Board.
- 2.3 It has been agreed by NHS England that the plans on this occasion may be signed off by the Place Based Lead for Health and the Director Adult Social Services (DASS) and a retrospective report brought to the next Health and Well Being Board for ratification.

## **3. CHANGES TO THE 2022/23 BCF POLICY FRAMEWORK REQUIREMENTS**

- 3.1 An additional national condition in 22/23 requires areas to agree an overarching approach to meeting the BCF policy objectives to:

- Enable people to stay well, safe and independent at home for longer
- Provide the right care in the right place at the right time

Croydon schemes support these policy objectives.

- 3.2 Local systems have been required to outline how they provide support to unpaid carers. In Croydon the Council commission the Carers Support Partnership to provide carer's assessment and other support services that aim to prevent, reduce and delay future needs for support. The BCF part funds these services. For End-of-Life Care, there are services to support unpaid carers, focussing on supporting people to have care within their home, if that is their place of choice.
- 3.3 For the first time local areas are required to submit an intermediate care Demand and Capacity template. The requirement encompasses community reablement, bed based intermediate care for both step up from the community

and hospital discharge. This element of the template does not require assurance.

#### 4. KEY FEATURES OF THE PLANS

##### 4.1 Better Care Fund- 2022/23 Income and Expenditure Summary

<b>Funding Sources</b>	<b>Income</b>	<b>Expenditure</b>
DFG	£2,992,679	£2,992,679
Minimum NHS Contribution	£29,339,813	£29,339,813
iBCF	£9,978,112	£9,978,112
Additional LA Contribution	£0	£0
Additional ICB Contribution	£1,315,000	£1,315,000
<b>Total</b>	<b>£43,625,604</b>	<b>£43,625,604</b>

##### NHS Commissioned Out of Hospital spend from the minimum ICB allocation

Minimum required spend	£8,337,543
Planned spend	£16,756,455

##### Adult Social Care services spend from the minimum ICB allocations

Minimum required spend	£11,213,755
Planned spend	£11,357,393

##### Scheme Types

Assistive Technologies and Equipment	£569,997
Care Act Implementation Related Duties	£658,000
Carers Services	£243,233
Community Based Schemes	£4,365,808
DFG Related Schemes	£2,992,679
Enablers for Integration	£0
High Impact Change Model for Managing Transfer of Care	£0
Home Care or Domiciliary Care	£5,183,879
Housing Related Schemes	£133,000
Integrated Care Planning and Navigation	£5,608,367
Bed based intermediate Care Services	£2,585,432
Reablement in a persons own home	£3,826,448
Personalised Budgeting and Commissioning	£880,802
Personalised Care at Home	£9,883,364
Prevention / Early Intervention	£85,000
Residential Placements	£6,609,595
Other	£0
<b>Total</b>	<b>£43,625,604</b>

The Croydon BCF plan for 2022-23:

- 4.2 Includes a contribution to adult social care from the NHS in line with the required minimum contribution. This is approximately £11.3M which is the minimum requirement.
- 4.3 Includes a large proportion of NHS commissioned schemes delivered out of hospital. Croydon's BCF investment in NHS commissioned out-of-hospital services will total approx. £16.7, in excess of the mandated minimum of £8.35M.
- 4.4 Makes a significant contribution to enabling people to stay well, safe and independent at home for longer, whilst also striving to provide the right care at the right time in the right place. This is through a programme of work centred around developing integrated localities team with a focus on neighbourhood and communities to be at the heart of people's care, underpinned by a proactive and preventative approach using population health management to tackle health inequalities and target people with the highest needs.
- 4.5 As such, our plan meets the BCF national conditions, which were set out in the Planning Requirements published on July 19<sup>th</sup> 2022.
- 4.6 The BCF and One Croydon Programme are the strong foundations for integrated care in Croydon and help us deliver on our strategic commitments on the sustainability of Croydon's health and care services, delivering care where our population needs it and encouraging healthy lifestyles, as well as recognising the need within our transformational work to reduce avoidable hospital admissions and hospital length of stay.

## **5. CHANGES TO SCHEME EXPENDITURE FROM 2021/22**

- 5.1 Most of the BCF schemes in 2022-23 have been rolled over from 2021-22.
- 5.2 Additional investment has been allocated to Discharge to Assess processes in Croydon, to enable this pathway to continue. In addition, extra social work staff are funded also in the acute wards to facilitate discharges from acute elderly ward and palliative care.
- 5.3 We are continuing to strengthen Frailty as a key area of work through BCF funding and ICN+, by developing a strategy that will join up acute frailty care with frailty care in the community, posts are funded in ED to support early identification of frailty or those at risk of frailty.

## 6.0 METRICS

6.1. Quarterly metric ambitions are required to be set in 4 areas for 22/23

Using methodology, based on our current trajectory we have set realistic but stretching ambitions for these metrics:

Avoidable Admissions, Discharge to the Usual Place of Residence.  
Residential Admissions and Reablement

## 8.0 NHSE ASSURANCE AND NEXT STEPS

8.1 The Timetable for agreeing BCF Plans and assurance are set out below:

Scrutiny of BCF plans by regional assurers, assurance panel meetings and regional moderation	26/9/2022- 24/10/2022
Regionally moderated assurance outcomes sent to BCF team	24/10/2022
Cross- regional calibration	01/11/2022
Approval letters issued giving formal permission to spend (NHS Minimum)	30/11/2022
All Section 75 agreements need to be signed and in place	31/12/2022

8.2 As with previous years plans, there will be ongoing continued monitoring and compliance and quarterly reports will be submitted following the governance processes.

## 9.0 CONSULTATION

9.1 This year's 22/ 23 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.

## 10.0 HUMAN RESOURCES IMPACT

10.1 BCF funding streams will enable staff recruitment within the stakeholder organisations. There are no identified risks.

## 11.0 EQUALITIES IMPACT

There are no changes proposed in this report that affect people, policies, facilities, or processes. An equality impact assessment therefore has not been carried out.

## 12.0 DATA PROTECTION IMPLICATIONS

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

**NO**

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## **CONTACT OFFICERS:**

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## **APPENDICES TO THIS REPORT**

**Appendix 1** Better Care Fund 2022/23 Main Planning Template NHS England submission

**Appendix 2** Better Care Fund 2022/23 Planning Narrative

**Appendix 3** Better Care Fund 2022/23 Intermediate Care Demand and Capacity Template