

West Northamptonshire Health and Wellbeing Board
10th January 2023

Report Title	Better Care Fund update (discharge fund)
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List of Appendices

Appendix 1 – West Northamptonshire submission

1. Purpose of Report

- 1.1. To update the Health and Wellbeing Board on the National Health and Adult Social Care Discharge fund.

2. Executive Summary

- 2.1 On 22 September 2022, the government announced its Plan for Patients. This plan committed £500 million for the rest of this financial year, to support timely and safe discharge from hospital into the community by reducing the number of people delayed in hospital awaiting social care. The focus is on a ‘home first’ approach and discharge to assess (D2A)
- 2.2 This funding has been distributed to both local authorities and integrated care boards (ICBs) to pool into the local BCF. In line with usual BCF requirements, the use of both elements of this funding needs to be agreed between local health and social care leaders
- 2.3 The funding has been distributed in 2 ways, with 40% of the money (£200 million) distributed as a section 31 grant to local authorities and the remainder (£300 million) to ICBs. This is a direct response to the significant challenges faced by local NHS services and local authorities in relation to winter pressures. To maximise the impact of the fund, the allocation to ICBs will be targeted at the areas with the most significant discharge challenges.
- 2.4 The allocation for the ICS is £4,716,000 and the allocation for West Northamptonshire Council is £1,212,512
- 2.5 West Northamptonshire submitted their proposed schemes to NHSE/I on the 16th December 2022 following the extraordinary Health and Wellbeing Board on the 8th December that gave agreed delegations to complete this to meet the national deadline.

3. Recommendations

- 3.1 It is recommended that the West Northamptonshire Health and Wellbeing Board:
- a) Formally approve the West Northamptonshire discharge fund submission following the agreed delegations at the extraordinary Health and Wellbeing Board on the 8th December 2022.

3.2 Reason for Recommendations

- 3.3 The discharge fund submission was approved by agreed delegations but has not been formally approved by the Health and Wellbeing Board
- 3.4 The Health and Wellbeing Board need to ensure through the BCF monitoring arrangements robust oversight of the use of this grant with particular focus on compliance with the conditions.

4. Report Background

4.1 Funding allocation

- 4.1.1 On 22 September 2022, the government announced its Plan for Patients. This plan committed £500 million for the rest of this financial year, to support timely and safe discharge from hospital into the community by reducing the number of people delayed in hospital awaiting social care. The focus is on a 'home first' approach and discharge to assess (D2A)
- 4.1.2 This funding has been distributed to both local authorities and integrated care boards (ICBs) to pool into the local BCF. In line with usual BCF requirements, the use of both elements of this funding needs to be agreed between local health and social care leaders
- 4.1.3 The allocation for the ICS is £4,716,000 and the allocation for West Northamptonshire Council is £1,212,512

4.2 Funding Conditions

- 4.2.1 Ministers have set specific conditions governing the use of this additional funding. The local authorities and ICB funding allocation should be pooled into local BCF section 75 agreements with plans for spend agreed by LA and ICB chief executives and signed off by the HWB under national condition 1 of the BCF
- 4.2.2 Funding allocated to ICBs should be pooled into HWB level BCF section 75 agreements. ICBs should agree the distribution of this funding with LAs in their area and confirm the agreed distribution to the BCF team (via the planning template)
- 4.2.3 Funding should only be used on permitted activities that reduce flow pressure on hospitals, including in mental health inpatient settings, by enabling more people to be discharged to an appropriate setting, with adequate and timely health and social care support as required
- 4.2.4 Funding should prioritise those approaches that are most effective in freeing up the maximum number of hospital beds and reducing the bed days lost within the funding available, including from mental health inpatient settings. Discharge to assess and

provision of homecare is recognised as an effective option for discharging more people in a safe and timely manner. Residential care to meet complex health and care needs may be more appropriate for people who have been waiting to be discharged for a long time

4.2.5 ICBs should ensure that support from the NHS for discharges into social care is available throughout the week, including at weekends

4.2.6 The Department for Health and Social Care (DHSC) and NHS England (NHSE) may follow up with local areas to understand and/or challenge the planning approach - this may happen:

- a) if plans do not clearly demonstrate prioritising activity to free up the maximum number of hospital beds and reduce the bed days lost.
- b) where it is evident that spending plans are in breach of other funding conditions
- c) where data shows that delayed discharges are significantly higher or increasing at a greater rate than national averages

4.2.7 A progress review across all areas will take place in January. Local areas will be expected to engage fully in this process

4.2.8 A completed spending template was submitted on the 16 December 2022, confirming planned use of the additional funding and that the use of the funding has been agreed by the ICB and local authority. Spend against the first tranche of money commenced as soon as plans were agreed locally. Allocation of the second tranche of funding will be contingent on having submitted the completed spending template and meeting of the funding conditions

4.2.9 Local areas should also submit fortnightly reports setting out what activities have been delivered in line with commitments in the spending plan

4.2.10 ICBs, hospital trusts and local authorities should work together to improve all existing NHSE and local authority discharge data collections including related situation reporting data and discharge data submitted as part of the commissioning data set

4.2.11 As a minimum social care providers must keep the required capacity tracker data updated in line with the Adult Social Care Provider Provisions statutory guidance, however it is acknowledged that more frequent updates to bed vacancy data is essential for operational purposes.

4.3 Reporting

4.3.1 An initial spending plan was submitted through the BCF programme on 16th December 2022. Thereafter, fortnightly activity reports should be submitted for each local authority footprint, detailing what activities have been delivered in line with commitments in the spending plan.

4.3.2 An end of year report should also be submitted (alongside the wider BCF end of year report), detailing total spend of this fund, by 2 May 2023.

4.4 Monitoring

4.4.1 Along with returns on the number of care packages purchased, the Fund will be monitored using the following metrics:

- a) the number of care packages purchased for care homes, domiciliary care and intermediate care

- b) the number of people discharged to their usual place of residence (existing BCF metric)
- c) the absolute number of people 'not meeting criteria to reside' (and who have not been discharged)
- d) the number of 'Bed days lost' to delayed discharge by trust (from the weekly acute sitrep)
- e) the proportion (%) of the bed base occupied by patients who do not meet the criteria to reside, by trust.

5. Issues and Choices

- 5.1 To access the fund the full conditions set out in the guidance need to be complied with
- 5.2 The schemes that were submitted on the 16th December were put forward following system discussions to determine the maximum benefit for the people of West Northamptonshire and Integrated Care Northamptonshire (Appendix 1)

6 Implications (including financial implications)

6.1 Resources and Financial

- 6.1.1 This is significant additional investment to support with the challenges faced by Health and Social Care during winter 2022/23.
- 6.1.2 The Health and Wellbeing Board need to ensure through the BCF monitoring arrangements robust oversight of the use of this grant with particular focus on compliance with the conditions.

6.2 Legal

- 6.2.1 Decisions in relation to the agreed submission have been taken in line with the council constitution.

6.3 Risk

- 6.3.1 Due to the tight timescales and gaps between Health and Wellbeing Board it was necessary to ensure that delegated responsibility is given to the relevant leads to comply with the deadlines and associated conditions.

6.4 Consultation

- 6.4.1 No consultation is required outside of the requirements of the grant conditions

6.5 Consideration by Scrutiny

- 6.5.1 This report has not been considered by scrutiny.

6.6 Climate Impact

- 6.6.1 There are no known direct impacts on the climate because of the matters referenced in this report.

6.7 Community Impact

- 6.7.1 It is envisaged that schemes funded by the grant will ensure better outcomes for people that require health and social care support following discharge from an acute setting.

7 Background Papers

Appendix 1 – West Northamptonshire submission

