

RUTLAND HEALTH AND WELLBEING BOARD

11 October 2022

BETTER CARE FUND PROGRAMME – 2022-2023 PLAN SUBMISSION

Report of the Portfolio Holder for Health, Wellbeing and Adult Care

Strategic Aim:	All	
Exempt Information	No	
Cabinet Member(s) Responsible:	Cllr S Harvey, Portfolio Holder for Health, Wellbeing and Adult Care	
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Ward Councillors	NA	

DECISION RECOMMENDATIONS

That the Committee:

1. Notes the content of the report
2. Notes the Rutland 2022-23 Better Care Fund plan, submission of which to the BCF national team on 26 September 2022 was signed off by the Chair of the Health and Wellbeing Board.

1 PURPOSE OF THE REPORT

- 1.1 The purpose of this report is to brief the Health and Wellbeing Board (HWB) on the 2022-23 Better Care Fund (BCF) Programme Plan.

2 BACKGROUND AND MAIN CONSIDERATIONS

- 2.1 The **end of year report for the Rutland BCF programme for 2021-22** was signed off by the HWB chair and was submitted to the national BCF team on 27 May 2022
- 2.2 The Programme Plan for 2022 -23 was submitted to the national BCF team on 26 September 2022. It includes:

- A Narrative providing a summary of how the budget is being spent and how it is planned to be spent for each area of expenditure
- A Planning Template detailing
 - Planned Expenditure
 - Confirmation that the National conditions of the BCF have been met
 - Ambitions and plans for performance against BCF national metrics
 - Any additional contributions to BCF section 75 agreements
- A completed intermediate care capacity and demand plan submitted alongside the BCF plan (not subject to assurance)

2.3 BCF National condition 4: implementing the BCF objectives. This national condition requires areas to agree a joint plan to deliver health and social care services that support improvement in outcomes against the fund's 2 policy objectives. These are: enable people to stay well, safe and independent at home for longer; people have the right care at the right place at the right time.

In meeting these objectives, commissioners should agree how services will continue to promote the independence and address the needs of people who are at risk of losing independence including admission to residential care or hospital. They should continue to focus on ensuring people are discharged in a way that maximises independence and leads to the best possible outcomes.

2.4 The plan encompasses a range of schemes aligned with Rutland's priorities of Unified Prevention, Holistic health management in the community, Hospital flows and Enablers. Services include the Community Wellbeing Service which provides advice and support and includes Citizens' Advice; Social Prescribing including joint GP and RCC RISE Team. Integrated care services support people with long term conditions and frailty which includes physiotherapy; Disabled Facilities Grants help to finance adaptations and equipment to enable people to live in their homes for longer. The plan includes Carers support workers including Admiral Nurses who provide support and advice for the carers of people living with dementia. Regarding hospital flows, the plan assists to fund staffing to support Reablement and timely discharge from hospital, plus crisis management to avoid hospital admissions.

2.5 High Impact Change Model for Transfers of Care

These are approaches identified as having a high impact on supporting timely and effective discharges through joint working across the social care and health system. This is a significant area for the BCF, with 31% of the budget being allotted to this area. It includes approaches such as improved discharge to care homes and multi-disciplinary teams supporting discharge. A summary of a self-assessment in this area was included in the plan.

See appendix A for the Narrative document for full details.

2.6 **Income:**

Funding for 2022-23 is set out in Table 1. Showing the minimum NHS funding contributions to the Better Care Fund, channelled via the integrated care boards

(formerly via the Clinical Commissioning Groups) A uniform 5.66% increment has been awarded to all Health and Wellbeing Board areas. The Disabled Facilities Grant had an uplift of 3%

Table 1: BCF budget for 2022-23

Funds	(£)
NHS Minimum contribution	2,634,018
Improved BCF	281,818
Disabled Facilities Grant	270,255
Additional contributions (prior years' underspend) RCC	45,000
Additional contributions (prior years' underspend) ICB	21,000
Total	3,189,091

2.7 Expenditure:

Spend on the programme including the 2021-22 BCF, Improved BCF, and Disabled Facilities Grant allocations and previous underspend built into the programme totalled £3,123,091.

2.8 Metrics:

Performance is good against the key indicators:

- **Avoidable admissions**
These continue to be low. This is supported by coordinated crisis response services which avoid conveyance to hospital.
- **Discharge to usual place of residence**
The Percentage of people discharged from hospital to their usual place of residence remains over 90%, despite challenges of domiciliary care capacity.
- **Residential admissions**
Supported by services such as falls prevention, carer support and crisis response, the numbers have dropped to the usual low level for Rutland following the pandemic.
- **Reablement**
Successful Reablement is delivered through the therapy service and the inhouse domiciliary care provider MiCare. The target is set at 90% for 2022-23, having reached an estimated success rate of 96.3% for 2021-22.

2.9 Rutland's 2022-23 plan was approved by John Morley on behalf of the Council, while all three LLR returns went to the LLR CCG Executive Management Team on 26/9/22 for IBC approval. Finally, the HWB Chair approved the Rutland return on behalf of the Rutland Health and Wellbeing Board prior to its submission on 26/9/22.

3 CONSULTATION

3.1 Not applicable at this time.

4 ALTERNATIVE OPTIONS

4.1 Not applicable at this time.

5 FINANCIAL IMPLICATIONS

- 5.1 As in previous years, local partners have proceeded to deliver the current year's BCF programme 'on trust', based on consensus across the Council and CCG/IBC, pending national publication of guidance.

6 LEGAL AND GOVERNANCE CONSIDERATIONS

- 6.1 The plans have been produced with involvement and input from ICB. The plans received sign off by the Executive Team at the ICB.

7 DATA PROTECTION IMPLICATIONS

- 7.1 There are no new Data Protection implications. The annual report contains only anonymised data.

8 EQUALITY IMPACT ASSESSMENT (MANDATORY)

- 8.1 Not applicable to the annual report.

9 COMMUNITY SAFETY IMPLICATIONS

- 9.1 There are no identified community safety implications from this report.

10 HEALTH AND WELLBEING IMPLICATIONS

- 10.1 The Better Care Fund programme is an important element of Rutland's response to enhancing the health and wellbeing of its population, representing more than £3m of ICB and LA funding to be used for integrated health and care interventions. This report sets out that Rutland continues to be committed to improving the outcomes of the population.

11 CONCLUSION AND SUMMARY OF REASONS FOR THE RECOMMENDATIONS (MANDATORY)

- 11.1 The Committee is recommended to note the Rutland 2022-23 Better Care Fund plan, submission of which to the BCF national team on 26 September 2022 was signed off by the Chair.

12 BACKGROUND PAPERS

- 12.1 There are no additional background papers to the report.

13 APPENDICES

- 13.1 Appendix A: Rutland 2022-23 BCF Programme Narrative Plan
13.2 Appendix B: Rutland 2022-23 BCF Plan Return: Key Sections

A Large Print or Braille Version of this Report is available upon request – Contact 01572 722577.