Better Care Fund 2021/22

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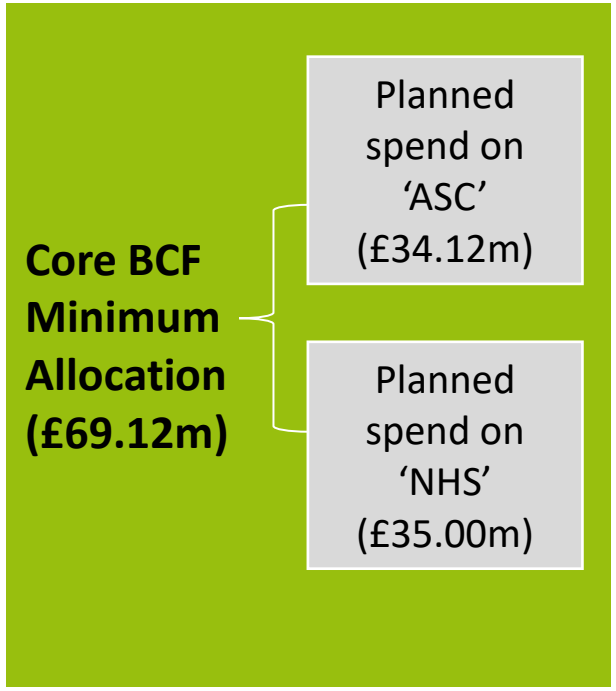
BCF Reminder



1. BCF has funded a wide range of services that benefit our population.
2. Services within the BCF largely aligned technically to current BCF aims.
3. Processes are in place to share openly the contents of the BCF, and good joint-working on its future is in place.
4. Health and care partners see the BCF as a key vehicle for delivering future joint working, including between health and care, work at Place and smoother financial processes that enable better integration.

Key opportunities for development:

1. Services within the BCF often account for only a small proportion of their total funding from commissioners – challenging any tie-back to directly attributable better outcomes.
2. Enable joint working and reflect the range of opportunity– particularly prevention, discharge and inequalities, and other integrated working where we know joint funding and commissioning discussions cause challenges.
3. The BCF is primarily system focused, rather than place-focused and needs to be re-baselined, as organisational changes have resulted in unidentified funding pots within the BCF.

BCF Reminder

Core BCF Minimum Allocation (£69.12m)

- Planned spend on 'ASC' (£34.12m)
- Planned spend on 'NHS' (£35.00m)

We agreed our approach to the BCF moving forward (incl. Health and Wellbeing Board):

1. Norfolk's BCF is reshaped with the following delivery priorities, that reflect key local strategic direction, including emerging Place-based priorities:

- Inequalities and support for wider factors of wellbeing
- Prevention
- Sustainable system (incl.. Admissions avoidance)
- Person-centred care and Discharge
- Cross-cutting & Housing

1. To align with this approach:

- The BCF has been rebaselined, to create a series of 'buckets' that contain the funding pots for services/projects based around the priorities. It now funds the whole cost of services, rather than part costs, helping us to better understand the impact we are having on the system.
- The BCF is developed to encompass both system and place priorities and processes.

3. The BCF will act as one of the tools to enable delegation to Place, and pooling budgets between health and social care (pooling with other ICS partners being explored as part of BCF legal framework)

What is the BCF?

The Better Care Fund is at its core a pooled fund which supports local systems to successfully deliver the integration of health and social care in a way that supports person-centred care, sustainability and better outcomes for people and carers. The CCG minimum contribution for Norfolk is £69,119,908.

There is a £38,453,693 improved Better Care Fund (iBCF) which is controlled by Norfolk County Council, and £9,157,782 in Disabled Facilities Grants, which is delivered by our District Councils.

Every year NHSE&I issue Planning Guidance and Requirements, which ask us to agree an integrated plan for the spend of this money, to meet the above integration aims and to describe how our plan will help Norfolk reach the metrics they have set out.

The Better Care Fund is governed in Norfolk by the Norfolk Health and Wellbeing Board, who will consider this plan at their meeting in December.

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What has already been agreed and what needs signing off?

Over the past year we have developed a set of priorities for the Better Care Fund, which Norfolk Health and Wellbeing Board have agreed.
These are:

- Prevention,
- Sustainable Systems inc. Admission Avoidance,
- Person Centred Care and Discharge,
- Inequalities and Support for Wider Factors of Wellbeing and
- Housing, DFGs, and overarching pieces of work.

We are looking for sign off of:

- Our narrative plan, describing our system approach to integration, prevention, discharge and health inequalities.
- Our excel template, describing the BCF income and expenditure, our planned performance against the five key metrics, and affirmation that we are meeting the national conditions as set out in the current BCF Planning Requirements.

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What are the main changes this year?

1. The BCF has been reprofiled to further enable joint health and care working and reflect the full range of opportunity for joint working – particularly prevention, discharge process and inequalities, and other significant areas of integrated working that sit outside BCF, where we know joint funding and commissioning discussions can cause challenges.
2. The BCF also funds the whole cost of services, rather than part costs, helping us to better understand the impact we are having on the system.
3. No services have been decommissioned as part of this work, but services have been moved to and from core funding for NCC and N&WCCG.
4. Locality views have also been taken into account, helping us to prepare for a more place based focus moving forward to an ICS.
5. The Prevention High Impact Change Model was published in 2021/22, which we have included in our BCF response.

What are the BCF metrics for 2021/22?

Avoidable admission: unplanned hospitalization for chronic ambulatory care sensitive conditions (NHS Outcome Framework Indicator 2.3i)

Length of Stay: Percentage of in patients, resident in the HWB, who have been an inpatients in an acute hospital for 14+ days and 21+days (SUS data)

Discharge to normal place of residence: Percentage of people, resident in the HWB, who are discharge from acute hospital to their normal place of residence (SUS data)

Residential Admissions: Long-term support needs of older people (age 65 and over) met by admission to residential and nursing care homes per 100,000 population.

Reablement: Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital in to reablement / rehabilitation services.

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