

Report title	Better Care Fund (BCF) Update Report	
Cabinet member with lead responsibility	Cllr Roger Lawrence Leader of the Council	
Key decision	Yes	
In forward plan	Yes	
Wards affected	All wards	
Accountable director	David Watts, Director of Adult Services (City of Wolverhampton Council)	
	Steven Marshall, Transformation and Strategy Director (Wolverhampton Clinical Commissioning Group)	
Originating service	People	
Accountable employee(s)	Sarah Smith	Head of Strategic Commissioning - People City of Wolverhampton Council
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Report has been considered by	Commissioning Management Team	4 June 2018
	People Leadership Team	11 June 2018
	Strategic Executive Board	26 June 2018

Recommendations for noting:

1. The Health and Wellbeing Board is asked to note progress made towards the delivery of the Better Care Fund.

2.0 Purpose

2.1 To advise the Health and Wellbeing Board on the progress made towards the delivery of the Better Care Fund and Improved Better Care Fund.

3.0 Overview

3.1 Better Care Fund is a programme spanning both the NHS and local government which seeks to join up health and care services so that people can manage their own health and wellbeing and live independently in their communities for as long as possible.

4.0 Background and context

4.1 Wolverhampton continues to work closely in partnership towards the successful delivery of the Better Care Fund Plan and vision for integration in the City.

4.2 Robust partnership governance arrangements continue and keep the plan on track and an ethos of working together to tackle the on-going challenges and complexity that this work presents strategically and operationally on a daily basis.

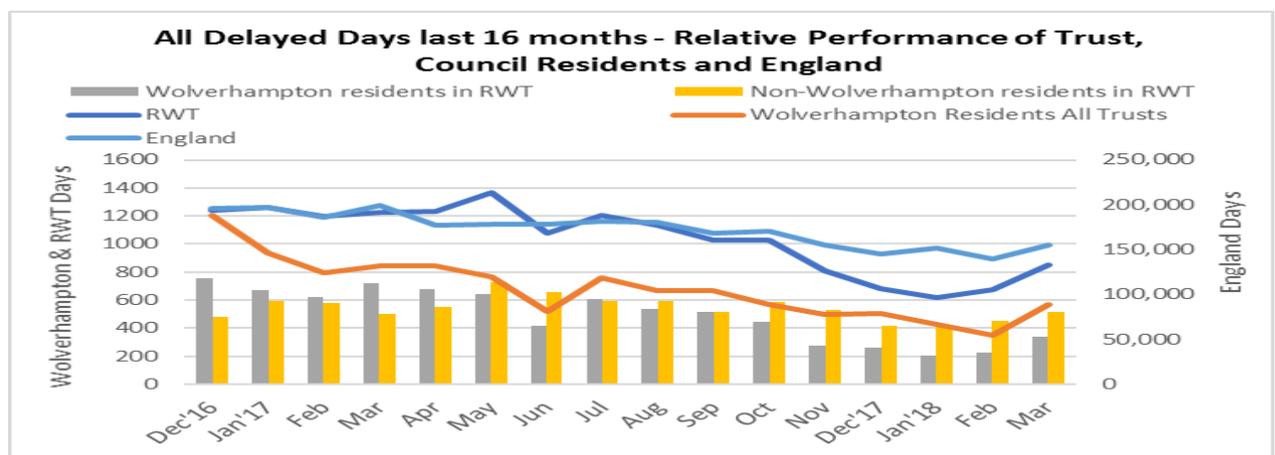
4.3 National Performance Metrics are reported in the following areas:

- Delayed Transfers of Care (DToC)
- Non-elective admissions
- Admissions to residential and care homes
- Effectiveness of reablement

5.0 Performance against metrics

5.1 Wolverhampton improved and exceeded NHSE expectations for 2017-2018. The overall reduction between December 2016 and the latest DToC figures published for March 2018 show a reduction of 53% for Wolverhampton residents and 31.3% for Royal Wolverhampton Trust. In comparison, the national reduction is 20.9%. February's DToC daily delays rate (per 100,000 population) saw the City's position move up to 43rd out of the 151 Local Authorities included in the published data.

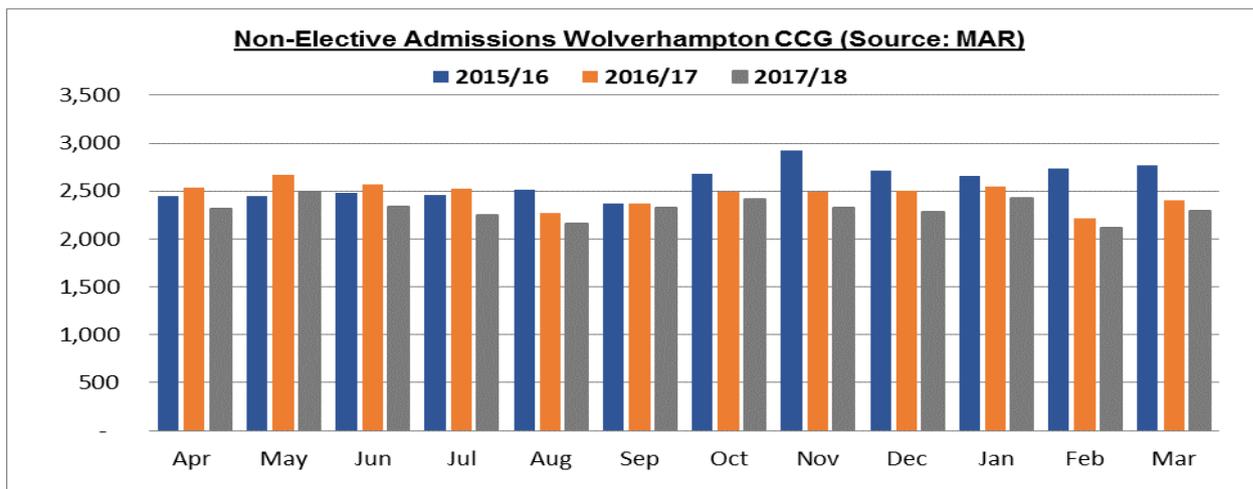
Delayed Transfers of Care (December 2016 - March 2018)



5.2 The delivery of the BCF Programme including the development of admission avoidance, redesign of community services, additional reablement services and step-up beds have contributed positively to the reduction of Non-Elective Admissions, as shown below.

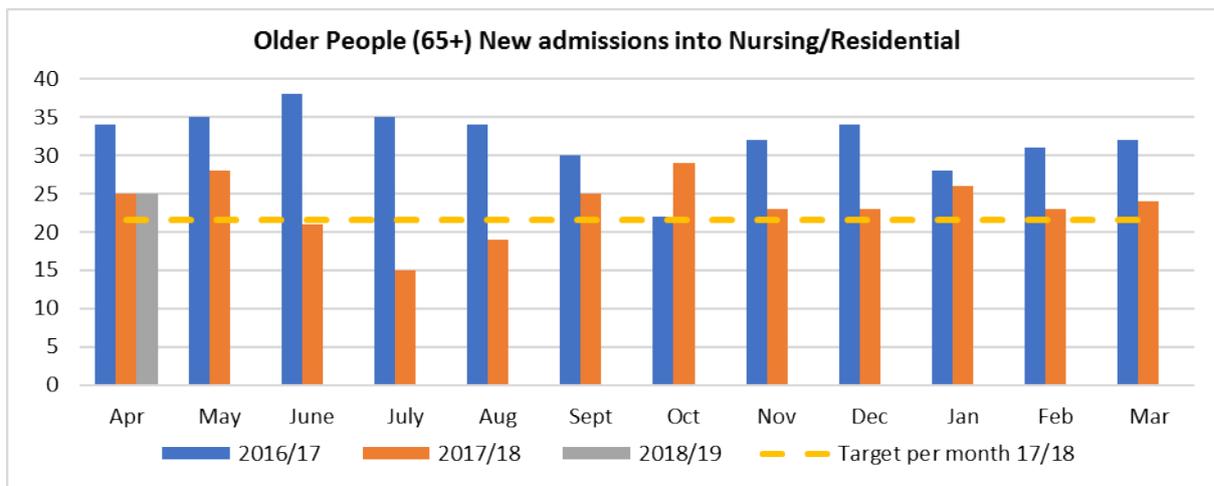
5.3 Wolverhampton also achieved a reduction of 1,593 Non-Elective Admissions (6.3%) against the same period in 2016-2017 as confirmed by the latest Monthly Activity Reports (MAR) published for March 2018.

Non-Elective Admissions (April 2015 - March 2018)



5.4 The performance target for permanent admissions to residential and nursing care has been set at 260 (597.2 per 100,000 population aged 65+) for 2017-2018 and 2018-2019. This is between 21 and 22 per month. A total of 281 placements were made during 2017-2018 (23.40 per month) and although slightly above target this represented a significant reduction of 104 admissions (27%) on the total figure for 2016-2017 of 385.

Permanent Admissions into Nursing / Residential Care (April 2016 - March 2018)



5.5 The published target in the plan for the proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services is 85.7% and carries forward into the current financial year.

6.0 Progress against plan

- 6.1 Success can be celebrated across the programme as health and social care agencies in Wolverhampton continue to work closely in partnership to minimise delayed transfers of care.
- 6.2 Wolverhampton continues to implement the High Impact Change Model for Managing Transfers of Care (which includes the Discharge to Assess process) for Wolverhampton patients admitted to the Royal Wolverhampton Trust and Black Country Partnership Foundation Trust.
- 6.3 Significant progress has been made around the further integration of health and social care data. Using Fibonacci software front line professionals involved in the direct care of individuals can now access key health, social care and mental health data (using the NHS number). A pilot providing GP access has recently gone live.
- 6.4 Partners have also reached agreement to co-locate health and social care staff operating in the North East locality at the Science Park by the end of the calendar year. Options for longer-term hub solutions across the city are being developed.
- 6.5 The community Rapid Intervention Team has won a prestigious nursing award for their success in reducing A&E attendances. The service won the Burdett Nursing 'Who Cares, Wins Award' for their success in caring for acutely unwell patients at home, preventing hospital admissions. The service has improved patient choice, control and quality of life and sustained avoidance rates at 90%.
- 6.6 Developing integration with other community services has progressed, including housing services, this has helped to facilitate discharges and has resulted in improved living conditions for some individuals and enabled better management of their health conditions. In addition, an integrated piece of work to target specific cohorts who are at risk of falls has been identified with housing.
- 6.7 Wolverhampton celebrated and demonstrated its progress with the wider Better Care community by presenting at the February 2018 Regional Integration Event in Birmingham which sparked wider interest and a desire by the Better Care Team to visit the Council's programme and see the work in practice.
- 6.8 A draft mental health strategy has been produced. The need for resilient individuals, families and communities is placed at the heart of the strategy. The mental health stakeholder forum is being relaunched at the end of June 2018 and will promote better co-production of the final strategy. Discussions are ongoing for Approved Mental Health Professionals to co-locate with the Black Country Partnership Foundation Trust.
- 6.9 The City of Wolverhampton has been awarded Dementia Friendly Community status to December 2018 by the Alzheimer's Society. The Wolverhampton Dementia Action Alliance, supported by the City of Wolverhampton Council, has successfully brought together dozens of local organisations that want to become more dementia friendly, including retailers, businesses, the emergency services, religious groups, and education providers. Dementia Action Week took place between 21–27 May and over 15 separate

activities were planned over the week. A flagship information event took place on 22 May attracting over 65 people followed by a grand Dementia Friends session held at the Grand Theatre. At this session 120 people became Dementia Friends with BBC WM in attendance and live interviews took place with Councillor Sandra Samuels OBE and carers. Arrangements are also in place to develop the dementia strategy for the City of Wolverhampton and the draft will be shared later in the year. The intention is to retain the status through self-assessment each year and the Better Care Programme will be a vehicle to support this.

7.0 Improved Better Care Fund

7.1 The iBCF plan exists of five main programmes:

- Home First – Discharge to Assess Plus Home First – Discharge to Assess Plus
- Home First – Reablement
- Demand Management
- Minimum Adult Social Care Funding Level / Stabilisation of the Social Care Market
- Increasing Choice and Control for People

7.2 A number of additional schemes have been successfully rolled out and have contributed to improved health and social care outcomes for Wolverhampton's population and include:

- Six reablement step-down flats at Showell Court Extra Care Scheme
- Rapid response service
- Admission avoidance/step-down service
- Community reablement service (additional capacity)

7.3 The additional schemes are currently being evaluated and this will inform decisions regarding the continuation or expansion of those schemes, or commissioning of alternative schemes.

8.0 Financial implications

8.1 The pooled revenue budget for 2017-2018 totalled £66.8 million, of which £29.3 million was a contribution from Council resources and £37.5 million from the CCG. The Council's contribution included the improved Better Care Fund and the additional Adult Social Care monies announced in the Spring budget of which totalled £7.6 million. It should be noted that the fund included £6.5 million representing the NHS transfer to Social Care (S256). In addition to the revenue budget the fund included a capital grant of £2.7 million (Disabled Facilities Grant).

8.2 The Section 75 agreement details the risk sharing arrangements for both organisations for any over / under spend within the pooled fund. The risk sharing arrangements in relation to the iBCF monies is held 100% by the Council.

8.3 The reported overspend on the revenue pooled budget at year-end was £419,000. Based on the agreed risk share Wolverhampton CCG was responsible for £226,000 and the City of Wolverhampton Council £193,000.

[MI/13062018/N]

9.0 Legal implications

9.1 Cabinet Members for Adults, Public Health and Wellbeing and Resources in consultation with the Strategic Director, People and Director of Finance recently agreed to the final terms of the Better Care Fund Section 75 Agreement and authorised the Solicitor of the Council to complete the agreement along with any necessary ancillary agreements arising from the main agreement.

9.2 A Section 75 agreement is in place for the delivery of the BCF plan 2017-2018.

[RB/13062018/F]

10.0 Equalities implications

10.1 Each individual project within the workstreams has identified equality implications, and a full equality impact analysis has been carried at work stream level.

11.0 Environmental implications

11.1 Each individual project within the workstreams will identify environmental implications, such as the need to review estates for the co-location of teams and services.

12.0 Human resources (HR) implications

12.1 Each individual project within the workstreams will identify HR implications. HR departments from both Local Authority and Acute Providers are already engaged in discussions regarding potential HR issues such as integrated working and change of base for Employees.

13.0 Corporate Landlord implications

13.1 Corporate Landlord (Estates Valuation and Disposals) meets regularly with the Task and Finish Team and is working with the team to assist and evaluate if any of the assets within the existing NHS and Council Estate are suitable for reuse to support the BCF proposals. The BCF programme has an Estates Task and Finish Group in place to consider accommodation options on a city-wide basis.

14.0 Schedule of background papers

Better Care Fund Quarter 4 Submission 20 April 2018

Papers available on modern.gov as presented at following meetings:

People Leadership Team	9 April 2018
Strategic Executive Board	17 April 2018
Leaders Brief	23 April 2018