

**Wiltshire Council**

**Health and Wellbeing Board**

**Thursday, 28 January 2021**

---

**Subject: Better Care Fund Review of 2019/20 and 2020/21**

---

### **Executive Summary**

This report provides a summary of the BCF in 2019/20 and 2020/21, including a review of the operation of the Better Care Fund and programme in 2019/20.

The report also sets out the financial out-turn position statement of the Better Care Fund (BCF) for 2019/20 and the 2020/21 funding position.

The BCF:

- Is a mechanism for joint health, housing and social care planning and commissioning using Section 75 agreements to establish and maintain pooled funds
- Brings together ring-fenced budgets from CCG allocations and funding paid directly to local government, including the disabled facilities grant (DFG), the improved BCF (iBCF) and winter pressures grant
- The DFG, iBCF and winter pressures grant monies have specific grant conditions, including a requirement that the funding is pooled in the BCF
- Has four national conditions:
  - A BCF plan signed off by the Health & Wellbeing Board and by the constituent Local Authority and CCG
  - Demonstrate how the area will maintain the level of spending on social care services from the CCG minimum contribution in line with the uplift to the CCG's min contribution
  - A specific proportion of the area's allocation is invested in NHS-commissioning out-of-hospital services which may include 7-day services and adult social care
  - A clear plan on managing transfers of care and reducing delayed transfers of care
- Has the requirement to deliver improvements in the four national metrics:
  - Non-elective admissions
  - Admissions to residential & care homes
  - Effectiveness of reablement
  - Delayed transfers of care (DToC)

### **Proposal(s)**

It is recommended that the Board:

1. Notes the report, including the impact of the Better Care programme both in supporting continuing operations and during the COVID pandemic.
2. Notes the out-turn position of the Better Care Fund for 2019/20 and the 2020/21 funding position.

### **Reason for Proposal**

This is an annual review of the previous year's BCF, which remains an essential component in transformation and integration of health and social care commissioning in Wiltshire.

The BCF operated efficiently during 2019/20 and remained within budget, reporting a capital underspend of a little over £1m, which was carried forward to 2020/21 and a revenue underspend of just over £1m which has also been carried forward to 2020/21.

The BCF has become more able to respond to changing circumstances with robust co-operation and alignment of strategic outcomes across partners, as has been demonstrated in the COVID pandemic.

## Wiltshire Council

### Health and Wellbeing Board

Thursday, 28 January 2021

---

**Subject: Better Care Fund: Review of 2019/20 and 2020/21**

---

#### Purpose of Report

1. To review the operation of the Better Care Fund and in 2019/20 and to note progress in 2020/21.
2. To receive the financial out-turn position statement of the Better Care Fund (BCF) for 2019/20 and the financial plan for 2020/21.

#### Background

3. The funding for 2019/20 and 2020/21 is set out in Table 1 below. This shows total funding of £51.56m in 2019/20, of which £33.02m was contributed by the CCG and £18.56m by the Council, and £54.07m of funding in 2020/21, of which £34.54m was contributed by the CCG and £19.53m by the Council. £1.24m of the 2020/21 funding is carried forward underspend from 2019/20.

Table 1: Funding in 2019/20 and 2020/21

<b>Funding</b>	<b>19/20 £</b>	<b>20/21 £</b>
DFG	3,273,126	3,273,127
Minimum CCG Contribution	30,630,734	32,438,000
iBCF	8,117,936	9,941,000
Winter Pressures Grant	1,823,064	-
Additional LA Contribution	5,347,525	5,080,155
Additional CCG Contribution	1,772,667	2,102,000
Additional In Year CCG Contribution	613,000	-
Under Spend 19/20	-	1,240,461
<b>Total Funding</b>	<b>51,578,052</b>	<b>54,074,743</b>
<b>Total CCG Contribution</b>	<b>33,016,401</b>	<b>34,540,000</b>

4. Tables 2 and 3 below show how the funding analysed in Table 1 above was applied in 2019/20. Table 2 analyses expenditure by areas of spend and Table 3 by individual workstream. Both show an underspend of £2.98m.
5. Within the Partnership Agreement it is specified that underspends are retained by the pooled fund, with the exceptions of the Disabled Facilities Grant and the Integrated Community Equipment Service, where under or overspends are returned to the relevant organisation. Subtracting these from the overall total leads to an underspend within the pool of £1.24m, which is carried forward into the 2020/21 financial year.

Table 2: Areas of spend 2019/20

Areas of Spend	Plan £	Actual £	Variance £
Acute	1,540,660	1,501,525	-39,135
Community Health	18,084,777	17,683,208	-401,569
Continuing Care	300,000	227,000	-73,000
Mental Health	218,591	218,588	-3
Other	4,288,671	2,400,637	-1,888,034
Primary Care	406,200	430,158	23,958
Social Care	26,739,153	26,133,192	-605,961
<b>Total Funding</b>	<b>51,578,052</b>	<b>48,594,308</b>	<b>-2,983,744</b>

Table 3: Spend by Workstream 2019//20

Workstream	Plan £	Actual £	Variance £
iBCF	8,117,936	7,907,043	-210,893
Intermediate Care	14,210,733	14,239,742	29,009
Access, Rapid Response, 7-day working	3,597,452	3,737,795	140,343
Self-Care, Self-Support (Prevention)	1,687,363	1,449,103	-238,260
Care Act	2,500,000	2,500,000	0
Protecting Social Care	9,183,000	9,183,000	0
Disabled Facility Grant	3,273,126	1,917,480	-1,355,646
Winter Pressure Grant	2,311,064	1,822,992	-488,072
Management & Administration	551,836	483,157	-68,679
Integrated Community Equipment	5,741,633	5,353,996	-387,637
Previous Year Adjustments & Unallocated	403,909	0	-403,909
<b>Grand Total</b>	<b>51,578,052</b>	<b>48,594,308</b>	<b>-2,983,744</b>
Disabled Facility Grant	3,273,126	1,917,480	-1,355,646
Integrated Community Equipment	5,741,633	5,353,996	-387,637
<b>Adjusted Total</b>	<b>42,563,293</b>	<b>41,322,832</b>	<b>-1,240,461</b>

## Progress in 2019/20 and 2020/21

6. The 2019/20 BCF Plan Submission was agreed by the Health and Wellbeing Board on 27 September 2019 and submitted for a local NHSEI validation process the same day. Following this, the plan was recommended to the National BCF Team for approval without conditions, the first time that this had happened in Wiltshire since the BCF had been launched. The Plan was approved without conditions by the national review process chaired by Neil Permain, the NHS Director of Operations & Delivery and SRO for the Better Care Fund. This was formally confirmed by letter on 8 January 2020 and was a significant recognition of Wiltshire's approach to integration and transformation through the BCF.
7. The composition of BCF schemes had been significantly the same in recent iterations of the plan with an overwhelming focus on services for older people and limited scope for supporting children, mental health, learning difficulties and autism. Consequently, it was generally acknowledged within the Wiltshire system that the Better Care Plan (BCP) was not always as flexible in promoting the transformational changes in the system that it had been originally intended to deliver. Some components of the BCP cannot be changed as they fund core services and contracts e.g. the Integrated Community Equipment Service (ICES) and Telecare services, provide support to adult social care services or contributions to the community health contract. These block allocation schemes represented a combined total £27.6m or 67% of the entire 2019/20 BCF. Where there has been the potential to review schemes, officers have sought to make BCF more responsive to the needs of all Wiltshire residents and to the transformation agenda for the health and social care system.
8. The review of BCF funding for 2020/21 took place within the new emerging Wiltshire Alliance framework and against the backdrop of the COVID pandemic.
9. Several services related to hospital discharge services are funded by the BCF and these were all realigned under the Alliance's COVID response planning in this area. The intermediate care beds were retendered, but the new contracts were immediately re-purposed with additional beds also made available on a short-term basis until October 2021 to support the COVID surge. The size of the bed base will be reviewed before October 2021. At present, the system has 105 beds-60 for Intensive Rehabilitation, 40 for social care Discharge to Assess (D2A) and 5 for complex discharge. These beds seek to ensure that long term decisions about care do not take place in an acute setting and that Wiltshire residents have every opportunity to have rehabilitative support to enable them to return where it is safe to do so. Wiltshire implemented a health and care D2A at the early stages of the pandemic, and officers will review its impact in 2021/22 before developing a longer-term community bed model.
10. The work of the intermediate care therapy support service from Wiltshire Health & Care (WH&C) and the intermediate care and hospital social work teams, both also funded through the BCF, were re-aligned to the new Discharge to Assess' (D2A) model and linked to a set of outcomes for

discharge as a whole as opposed to individual service lines. These services continued to be needed to support discharge, particularly in support of the D2A model.

11. Additionally, the Acute Trust Liaison service provided by Medvivo was reviewed and staff within the service were reassigned to work with WH&C as part of the re-aligned discharge pathway.
12. Consideration was given to access arrangements for care services, currently provided by two separate services. Before COVID, the following arrangements were in place:
  - Pathway 1 referrals were made from wards to Medvivo Access to Care by telephone and sent through to the Patient Flow Hub
  - Pathway 2 referrals were made from acute trusts in written form, triaged by Medvivo Access to Care, and then sent through to the Patient Flow Hub for coordination
  - Pathway 3 referrals were made to Wiltshire Council and coordinated and monitored separately
  - The Patient Flow Hub was commissioned as a 5-day service, 9-5pm. Funding for seven-day operation was not substantive, but was made available as a 2019/20 winter scheme
  - A 'trusted assessment' form was in use for Pathway 2 referrals which was lengthy and time consuming. Liaison with nursing homes was split between the Hub (for intermediate care beds) and the Wiltshire Council brokerage team (for Discharge to Assess or placement)
13. National Guidance required Wiltshire to move to a single referral management service for all hospital discharge referrals. With this requirement the Wiltshire arrangements were rapidly reviewed and changed. Following the initial Covid-19 response phase, these arrangements were reviewed to ensure that there was enough alignment of access services alongside any future development of the WHC Patient Flow Hub (PFH). A Discharge Service Review working group recommended that the following service changes, which had improved and streamlined the process, were maintained:
  - Wiltshire PFH extended its hours 8am to 8pm, 7 days a week, handling all Wiltshire discharge requests
  - Change agreed to Medvivo SPA role which was absorbed into the Patient Flow Hub process
  - Integrated triage of discharge referrals between health and social care
  - Redesigned the acute process with a single discharge referral form
  - Maintained the ability for telephone referrals but encouraged Trusts to use the single referral form
  - Released social workers from hospitals so they were community based and supported individuals once they had left the acute hospitals

- For Pathway 1, three Locality discharge teams in the North, South, and West of the locality were set up managing those patients awaiting discharge home
- A single brokerage function managed by Wiltshire Council – supporting all placements and packages of care following hospital admission including end of life care
- Reviewed step up pathways and clarified process
- Acute Trust IDS Teams changed internal processes so that referrals only needed to be flagged as ‘Home’ or ‘Bed’ rather than precise pathway chosen

14. BCF funding supported brokerage for self-funding residents through a CCG contract with an organisation called CHS Healthcare. As an immediate response to COVID and the need to provide an integrated brokerage function across health and care for ASC funded customers and self-funders alike, the Council and CCG co-located the work of CHS with the Council’s brokerage team. This has provided all residents and professionals with a seamless brokerage function and with the ending of the CHS contract in November 2020, it was agreed that a single brokerage service would be permanently implemented. From the 1<sup>st</sup> December, the CCG brokerage function has been integrated within the Council’s brokerage team.

15. Additional funding (£1 million) has been invested in HomeFirst and Enablement services. At the heart of Wiltshire’s health and care system is the belief that people should be enabled and supported to live their lives in their own homes and the long-term ambition is to shift funding from bedded to community services.

16. In October 2020, BCF funding of £343,852 per annum was approved to fund an outreach enablement model for adults with needs associated with learning disabilities, mental health and/or autism spectrum conditions. The service will provide time-limited, community-based enabling support for people at risk of hospital admission and/or for people being discharged from acute psychiatric hospital and/or rehab. It will be provided by Wiltshire Council and will offer a bridge between statutory services and those delivered within the voluntary and community sector to which people using the service would step down and up again as appropriate. The service has been funded on a one-year, “proof of concept” basis, and recruitment is underway. Further funding will be agreed following an evaluation of the model.

17. Various schemes have also been identified for further review during 2020/21, as follows:

- End-of-Life Care (delivered through Dorothy House) as part of the discharge pathway will be reviewed as part of the broader end-of-life pathway.
- Mental health liaison services delivered by AWP that provides training to support people with dementia in care homes will be reviewed against overall support for the care home sector. One third of the total cost of this service is funded through the BCF and it

supports timely hospital discharges as well as preventing care home placement breakdowns. The rest of the funding is through the AWP block contract.

- Funding for complex care packages in learning disabilities will be reviewed to ensure that the funding continues to be focused on needs and supports the delivery of complex care in this area.
- Carer support funding comprises a block payment to Wiltshire Care Services to provide carer support services, including carer assessments, on behalf of the overall system. The budget also covers other carer-based services, including information, young carer support, advocacy, advice and guidance and publicity. As this scheme has not been reviewed fully for a number of years a review has started and will be completed in February to ensure continuing effectiveness and value for money of its outputs.

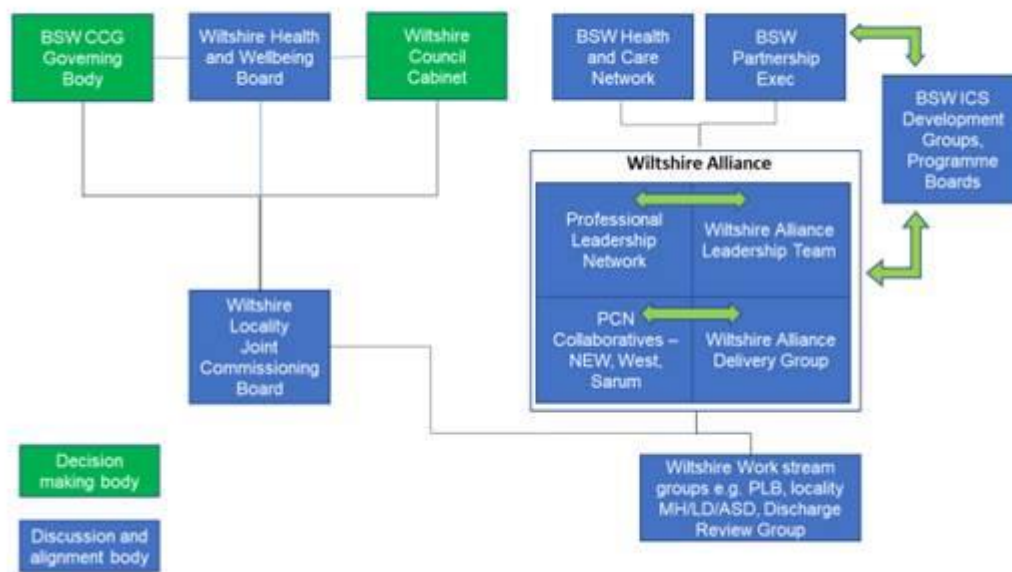
### **Planning and Finance 2020/21**

18. No national guidance has been published for 2020/21 and no reporting required locally or nationally for Q1 and Q2 of 2020/21. A national return was requested and submitted at the start of September 2020 concluding 2019/20 activity. The winter pressures grant has been incorporated into the iBCF government grant to the Council, but there is no additional funding for 2020/21 above the existing grant. A CCG uplift of 5.3% was agreed for 2020/21. New hospital discharge service requirements during 2020/21 replaced DToC definitions and monitoring with new criteria to reside definitions.
19. The resilience of the local system in the face of COVID has demonstrated that the BCF remains an essential component in managing a flexible and responsive commissioner-and-provider model across health and social care in Wiltshire.
20. In response to the pandemic, the governance of BCF changed to reflect the emerging integrated care alliance (ICA) arrangements across BSW CCG. Plans are monitored through the weekly alliance delivery group and key subgroups meet regularly to coordinate priority areas. Scheme leads are responsible for consistent monitoring of delivery and performance. A Locality Commissioning Group (LCG), co-chaired by the BSW CCG Chief Operating Officer and the Wiltshire Council Director of People, meets monthly to have officer oversight of the Section 75, BCF and the Hospital Discharge Funding as part of COVID. System wide strategic oversight is through the Health & Wellbeing Board.

The emerging Wiltshire Integrated Care Alliance (ICA) governance structure is detailed below:



## BSW and Wiltshire Locality Governance



3

21. The BCF budget for 2020/21 is outlined in the table below:

### BETTER CARE FUND - BUDGET 2020/21

1 - Funding Source	Full Year Budget 20/21	Projected Full Year Outturn	Projected Full Year Variance
Disabled Facilities Grant	3,273,126	3,273,126	0
Minimum CCG Contribution	32,435,930	32,435,930	0
Additional CCG Contribution	2,102,000	1,384,790	-717,210
Additional LA Contribution	5,080,155	5,080,155	0
Brought Forward Underspend from 19/20	1,240,461	0	-1,240,461
	<b>44,131,672</b>	<b>42,174,001</b>	<b>-1,957,671</b>

22. The Wiltshire Alliance Delivery Group – reviews priority areas for Hospital Discharge Programme (HDP) / BCF schemes.

23. Covid-19 has impacted on how we consider the use of the BCF to improve performance and outcomes in the coming 18 months. £5m Hospital Discharge Programme funding schemes for second six months 20/21 have been agreed. This included 40 Discharge to Assess beds, home first and rapid response. It is unknown if HDP funding will be recurrent therefore the locality commissioning group has agreed a 3-year strategy to enable recurrent funding for BCF/iBCF schemes.

24. Monitoring is through the alliance delivery group - key sub groups meet regularly to coordinate the HDP and BCF plan grouped into Wiltshire priority area. Scheme leads are responsible for consistent monitoring of delivery and performance. The full BCF report will go to the Locality

Commissioning Group (LCG) quarterly, with bi-monthly brief updates. Each full report will cover the key items of finance, impact, performance data and development with a BCF Dashboard to be developed. At different points of the year the report would focus on different elements. At key points in the year there will be a coordinated meeting with leads across BSW to share good practice and learning.

25. Business cases for new investment are developed and taken through Alliance Delivery Group and sign off at Locality Commissioning Group
26. Next steps will be to review 3 year strategy for 21/22 budgets following the outcome of HDP scheme review (impact upon bed demand modelling) updated guidance and notification of BCF funding (minimum contribution and 5.3% uplift confirmed for 21/22 in line with Long Term Plan).
27. The scheme details are outlined below:

<b>Funding Source: Change Model</b>	<b>Final Budget</b>	<b>Projected Full Year Outturn</b>	<b>Projected Full Year Variance</b>
<b>Minimum CCG Contribution</b>	<b>32,435,930</b>	<b>32,435,930</b>	<b>0</b>
Discharge teams	757,125	757,125	-
Early Discharge Planning	902,574	902,574	-
Enhancing health in care homes	348,790	348,790	-
Focus on choice	359,800	359,800	-
Home first/discharge to assess	15,445,741	14,858,991	- 586,750
Preventative Services	1,811,364	1,811,364	-
Programme office, internal staff	350,000	350,000	-
Protecting Adult Social Care	10,454,280	10,922,163	467,883
Seven-Day services	238,081	238,081	-
Systems to manage patient flow	1,460,976	1,833,043	372,067
Trusted Assessors	54,000	54,000	-
Other	253,200		- 253,200

<b>Funding Source: Change Model</b>	<b>Final Budget</b>	<b>Projected Full Year Outturn</b>	<b>Projected Full Year Variance</b>
<b>Additional CCG Contribution</b>	<b>2,102,000</b>	<b>1,384,790</b>	<b>- 717,210</b>
Protecting Adult Social Care	1,776,106	1,384,790	- 391,316
Other	325,894		- 325,894
<b>Additional LA Contribution</b>	<b>5,080,155</b>	<b>5,080,155</b>	<b>-</b>
Carers - LA contribution to Pool	741,257	741,257	-
Home first/discharge to assess	2,505,898	2,505,898	-
Protecting Adult Social Care	1,833,000	1,833,000	-
<b>Brought Forward Underspend from 19/20</b>	<b>1,240,461</b>		<b>- 1,240,461</b>
Protecting Adult Social Care	1,240,461		- 1,240,461
<b>Disabled Facilities Grant</b>	<b>3,273,126</b>	<b>3,273,126</b>	<b>-</b>
DFG	3,273,126	3,273,126	-
<b>Grand Total</b>	<b>44,131,672</b>	<b>42,174,001</b>	<b>- 1,957,671</b>

28. The BCF 3-year funding plan is below:

1 - Funding Source	20/21		21/22		22/23	
	Rec	Non Rec	Rec	Non Rec	Rec	Non Rec
Disabled Facilities Grant	3,273,126		3,273,126		3,273,126	
Minimum CCG Contribution	32,435,930		32,435,930		32,435,930	
Additional CCG Contribution	2,102,000		2,102,000		2,102,000	
Additional LA Contribution	5,080,155		5,080,155		5,080,155	
Bfwd underspend		1,240,461		1,957,671		2,344,530
<b>Total Funding</b>	<b>42,891,211</b>	<b>1,240,461</b>	<b>42,891,211</b>	<b>1,957,671</b>	<b>42,891,211</b>	<b>2,344,530</b>
	20/21		21/22		22/23	
	Rec	Non Rec	Rec	Non Rec	Rec	Non Rec
<b>Total Planned spend</b>	<b>39,257,950</b>	<b>2,916,051</b>	<b>43,126,075</b>	<b>-621,723</b>	<b>43,057,575</b>	<b>1,997,852</b>
BCF funds available	3,633,261	-1,675,590	-234,864	2,579,394	-166,364	346,678
<b>Total BCF funds available</b>	<b>1,957,671</b>	<b></b>	<b>2,344,530</b>	<b></b>	<b>180,313</b>	<b></b>

### Recommendation

29. That the Board notes the report, the impact of the Better Care Programme both in supporting continuing operations and during the COVID pandemic.
30. That the Board notes the out-turn position of the Better Care Fund for 2019/20 and funding plan for 2020/21.

**Helen Jones-Director of Commissioning, Wiltshire Council**  
**Clare O'Farrell-Director of Locality Commissioning, BSW CCG**