

BETTER CARE FUND - UPDATE

Report of the Director Integrated Adult Social Care.

Please note that the following recommendations are subject to consideration and determination by the Board before taking effect.

1) Recommendation:

The Board acknowledges the latest BCF performance against required metrics for Quarter 3 of 2024/25. (To note Cllr Bullivant in his capacity as Chair of the Health and Wellbeing Board (HWBB) approved the submission 13/02/25 to align with national timescales).

2) Background / Introduction

2.1 The Better Care Fund (BCF) is the mandatory policy to facilitate integration between Health and Social Care, providing a framework for joint planning and commissioning. The BCF brings together ring-fenced budgets from NHS allocations, ring-fenced BCF grants from Government, the Disabled Facilities Grant and voluntary contributions from local government budgets, including the Adult Social Care Discharge Fund. The Health and Wellbeing Board has oversight of the BCF and is accountable for its delivery.

2.2 This report:

- a) Provides information about the BCF 2024/25 Q3 return for the Better Care Fund, approved by Cllr Bullivant in his capacity as Chair of the HWBB on 13 February 25 to align with national timescales. Detail is included in section 3 of this report.
- b) Asks the Board to note that the BCF End of Year (EOY) return is due 30 May 2025, which will fall outside of the HWBB meeting schedule. The HWBB chair will be asked to approve the return before submission, and it will be brought to a future HWB meeting for endorsement.
- c) Asks the Board to note that on 31 January notification of changes to the BCF policy framework for 2025/26 were received, and that the submission of Devon ICB plans are due 31 March. The HWBB chair will be asked to approve the 2025/6 prior to submission, and it will be brought to a future HWBB meeting for endorsement.

3) Devon BCF 2024-25 Q3 report

3.1 Governance

Quarterly BCF reporting templates were issued in October for submission on 14 February 2025. Quarter 3 required reports on progress toward our agreed plans for avoidable admissions, falls, discharge to usual place of residence, and residential admissions for both DCC and NHS Devon ICB.

The due date was 14 February, falling outside of the HWB meeting date. The Chair exercised their delegated authority to sign on behalf of the board, with the decision noted at this meeting, being the next available Board. Cllr Bullivant in his capacity as Chair of the HWB approved the submission 13/02/2025.

3.2 Metric Targets (N.B. for 2024/25 only)

3.2.1 Avoidable Admissions

Definition: Unplanned hospitalisation for chronic ambulatory care sensitive conditions rate per 100,000 population.

We measure this as we would expect to be able to manage these conditions without the need for hospital admission.

Plan for 2024/25:

	<i>Quarter 1</i>	<i>Quarter 2</i>	<i>Quarter 3</i>	<i>Quarter 4</i>
<i>Target</i>	175.4	171.8	165.6	165.6
<i>Actual</i>	174.5	136.0	150 (est)	

Latest available actual data indicates Devon continues to be on track to achieve its target. Clinical coding backlog continues to impact data reporting.

Significant progress has been made in establishing a robust and effective High Intensity Use (HIU) offer as a part of the wider health and care system through locality based and county wide arrangements.

Programmes established continue to focus on those people who are admitted frequently and where this could have been avoided through care coordination, virtual wards, VSCE group funding, and operational UCR. There are a few locality based challenges to note including delays to data sharing agreements; backfill arrangements delays, care home awareness of the offer; and Emergency Departments understanding patients more complex presentations.

3.2.2 Falls

Definition: Emergency hospital admissions due to falls in people aged 65 & over, directly standardised rate per 100,000.

We measure this as we would aim to prevent and mitigate falls in older people.

<i>2023/24 Actual</i>	<i>2024/25 Plan</i>
1684.4	1550.7

2024/25	Q1	Q2	Q3	Q4
Target (maximum)	388	388	388	388
Actual	433.4	450	376.9 (est)	

Data indicates Devon is showing an improved trajectory to achieve its target with Quarter 3 local performance data showing 376.9 admissions, which is under our target of not more than 388 per quarter.

Our cross-county approach to deliver evidence-based Falls and Management Exercise programme (FaME) continues with positive impacts, as does the Urgent Community Response (UCR) offer. Our support to the care home sector has been positively received and a dedicated specialist dementia trainer is delivering dementia and frailty awareness education packages and tailored/bespoke advice in nursing and care home settings.

3.2.3 Discharge to Usual Place of Residence

Definition: The percentage of people who are discharged from acute hospital to their normal place of residence.

We measure this as we aim to support people back to independence in their own homes, rather than on to further care settings.

	<i>Quarter 1</i>	<i>Quarter 2</i>	<i>Quarter 3</i>	<i>Quarter 4</i>
<i>Target</i>	92.8%	92.8%	92.8%	92.8%
<i>Actual</i>	93.26%	93.09%	93.3%	

Latest available actual data indicates Devon continues to be on track to meet the target. Quarter 3 performance shows an actual of 93.3% for this metric and therefore above the target.

Our Hospital Discharge Transformation Programme continues to focus on market capacity to deliver the type of care needed, and making best use of reablement

services rather than bed based care, with goal based planning at point of discharge planning having a positive impact.

3.2.4 Residential Admissions

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

We measure this as we aim to support people to remain independent in their own home and only those who absolutely need it would be admitted to care homes.

2023/24 Actual	2024/25 Plan
556.8	533

Q1 24/25	Q2	Q3	Q4
553.8	573.9	n/a	

Devon is not on track to achieve its target for 2024/25.

We continue to see too many people being discharged from a hospital setting into permanent long term care (Pathway 3) when they could be rehabilitated. We are also seeing a steady increase in the number of people needing complex placements who have a dementia. In January 2025, a new process to improve discharges to rehabilitation care and then to home (Pathway 2), has been place to address this. It includes changes to goal based planning in the ward at point of discharge planning.

4) Finance

The latest funding of Devon's BCF for 2024/25 is made up of the following contributions:

	<u>DCC</u>	<u>NHS</u>	<u>Total</u>
	£'000	£'000	£'000
Capital (Disabled Facilities Grants)	8,994		8,994
Hospital Discharge Grant	6,806	6,090	12,896
iBCF grant	29,127		29,127
Revenue	5,649	75,104	80,753
	<u>50,575</u>	<u>81,194</u>	<u>131,769</u>

Forecast spending at yearend based on the month 10 review (to end of January 2025) was reported at £135.302 million or £3.533 million over the funding available.

	£'000
Community Equipment Store	3,354
Carers Hospital scheme	629
Other	(450)
	<u>3,533</u>

Variation of actual spending at the end of the financial year is subject to a 'risk share' arrangement between the partner organisations, set at 50:50 (as stated within the S.75 agreement).

5) Options/Alternatives

None.

6) Consultations/Representations/Technical Data

None.

7) Strategic Plans

Plans for the BCF in Devon align with both DCC and ICB strategic intentions in respect of services to vulnerable adults.

8) Financial Considerations

As a result of the BCF plan 2024/25 update being approved nationally, NHS England funding has been released for use. The Q3 return for the BCF 2024/25 is noted in this report.

9) Legal Considerations

The lawful implications/consequences of the planned use of the BCF in Devon have been considered in the preparation of this report.

10) Environmental Impact Considerations (Including Climate Change)

There are no specific impacts on environment and environmental related issues. The majority of the BCF spend in Devon, has a socio-economic impact through the commissioning and provision of services to vulnerable people and employment of those providing those services.

11) Equality Considerations

The national planning requirements for the use of the BCF provide specific requirements for the delivery of the Public Sector Equality Duty. Regional and national

moderation and approval of plans provides additional assurance regarding the consideration of equalities in the plans.

12) Risk Management Considerations

This report has been assessed and all necessary safeguards or action have been taken / included to safeguard the Council's position

13) Summary

The Health and Wellbeing Board has oversight of the BCF and is accountable for its delivery. This report provides an update on the Quarter 3 return.

Tandra Forster

Director of Integrated Adult Social Care

Electoral Divisions: All

Local Government Act 1972: List of background papers

Background Paper: Nil

Date: Nil

File Reference: Nil

Contact for Enquiries:

Nicola Tribble (Senior Manager Commissioning – Markets)

Integrated Adult Social Care Commissioning

Email: Nicola.Tribble@devon.gov.uk

Room: The Annexe, County Hall