

## **BETTER CARE FUND - UPDATE**

### Report of the Director Integrated Adult Social Care.

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

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#### **1) Recommendation:**

1.1 The Board acknowledges the latest BCF performance against required metrics for Quarter 2 of 2024/25. (To note Cllr Bullivant in his capacity as Chair of the HWB approved the submission 31/10/24 to align with national timescales).

#### **2) Background / Introduction**

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.

This report:

1. Provides information about the BCF 2024/25 Q2 return for the Additional Discharge Fund, approved by Cllr Bullivant in his capacity as Chair of the HWB on 31/10/24 to align with national timescales
2. Asks the Board to note that the quarter 3 return is due 14 February, which will also fall outside of the HWB meeting schedule. The HWB chair will be asked to approve the return before submission, and it will be brought to a future HWB meeting for endorsement.

#### **3) Devon BCF 2024-25 Q2 report – Additional Discharge Fund**

##### **3.1 Governance**

Quarterly BCF reporting templates were issued in October for submission on 31 October. Quarter 2 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 31 October, 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 31/10/2024.

### 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>	<i>175.4</i>	<i>171.8</i>	<i>165.6</i>	<i>165.6</i>
<i>Actual</i>	<i>174.5</i>			

Latest available actual data indicates Devon's is on track to achieve its target. Clinical coding backlog is impacting on data reporting. Revised local data for Q1 indicates performance at 174.5.

Programmes have been established to focus on those people who are admitted frequently and where this could have been avoided (High Intensity Use). This includes looking at how the voluntary and community sector can help us in developing peer support groups. The following providers deliver HIU services within the Devon County Council footprint:

- British Redcross, South Devon and Torbay,
- Encompass SW, North Devon,
- Encompass SW and CoLab Exeter, East Devon
- FUSE, Plymouth and West Devon

A challenge in this area includes recruitment delays and differences in approach across localities.

#### 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>
<i>1684.4</i>	<i>1550.7</i>

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

Data indicates Devon is not on track to achieve its target.

Quarter 2 local performance data shows 433.4 admissions, whereas we would be looking for no more than 388 per quarter.

We have developed a cross-county approach to deliver evidence based Falls and Management Exercise programme (FaME), with further locality based developments linking into all three NHS trusts.

A challenge in this area is the different approaches to falls prevention across localities, and operational pressures and vacancies in intermediate care and community teams across health and social care. Work has started across ICS footprint to strategically plan a consistent approach to manage falls and frailty in the community.

### 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>	<i>92.8%</i>	<i>92.8%</i>	<i>92.8%</i>	<i>92.8%</i>
<i>Actual</i>	<i>93.26%</i>	<i>93.09%</i>		

Latest available actual data indicates Devon is currently on track to meet the target. Quarter 2 performance shows an actual of 93.09% for this metric and therefore above the target.

Our Hospital Discharge Transformation Programme focuses on market capacity to deliver the type of care needed, and making best use of reablement services rather than bed based care.

### 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.

<i>2023/24 Actual</i>	<i>2024/25 Plan</i>
556.8	533

Q1 24/25	Q2	Q3	Q4
553.8	573.9		

Devon is not in track to achieve its target for 2024/25. Quarter 2 local performance data shows 573.9 admissions.

Health and care commissioners and providers are working together to improve this performance, as we have seen an unintended impact on numbers of long-term admissions to care homes as a result of the programme.

Work includes a focus on increasing capacity to enable more people to be discharged home with the right support. We are also focusing on the sufficiency and effectiveness of the reablement / intermediate care support in care homes, to ensure people are supported to return home rather than end up as a long-term admission.

#### **4) Options/Alternatives**

None.

#### **5) Consultations/Representations/Technical Data**

None.

#### **6) Strategic Plans**

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

#### **7) Financial Considerations**

As a result of the BCF plan 2024/25 update being approved nationally, NHS England funding has been released for use. The Q2 return for the BCF 2024/25 is noted in this report.

#### **8) Legal Considerations**

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

## **9) 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.

## **10) 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.

## **11) Risk Management Considerations**

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

## **12) Summary**

The Health and Wellbeing Board has oversight of the BCF and is accountable for its delivery. This report provides and update on the Quarter 2 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:**

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