


<p>Non-Executive Report of the:</p> <p><b>Health and Wellbeing Board</b></p> <p>20<sup>th</sup> September 2022</p>	
<p><b>Report of:</b> Warwick Tomsett</p>	<p><b>Classification:</b></p> <p>Unrestricted</p>
<p><b>Better Care Fund Plan 2022-23</b></p>	

<p><b>Originating Officer(s)</b></p>	<p>Suki Kaur Deputy Director of Partnership Development</p>
<p><b>Wards affected</b></p>	<p>All wards</p>

## Executive Summary

The Better Care Fund (BCF) is aimed at bringing together health and social care organisations to plan, fund and commission integrated services.

The BCF Policy Framework sets out four national conditions that all BCF plans must meet to be approved. These are:

1. A jointly agreed plan between local health and social care commissioners and signed off by the Health and Wellbeing Board.
2. NHS contribution to adult social care to be maintained in line with the uplift to ICB minimum contribution.
3. Invest in NHS commissioned out-of-hospital services.
4. Plan for enabling people to stay well, safe and independent at home for longer and provide the right care in the right place at the right time.

This paper requests approval of our Better Care Fund Plan for 2022-23 as part of the NHS England Assurance process and in line with national condition 1.

## Recommendations:

The Health and Wellbeing Board is recommended to:

1. Approve the Better Care Fund Plan for 2022-23

## 1. REASONS FOR THE DECISIONS

The Health and Wellbeing Board has a statutory duty to approve local Better Care Fund Plans as set out in the national planning requirements.

## **2. ALTERNATIVE OPTIONS**

To not provide approval and request amendments. However note that due to the late issuing of guidance (19<sup>th</sup> July 2022) for a programme that began on 1<sup>st</sup> April 2022 there is limited scope to make amendments.

## **3. DETAILS OF THE REPORT**

Currently in its seventh year the aim of the Better Care Fund (BCF) is to deliver better outcomes and secure greater efficiency in health and social care services through increased integration of provision.

To receive BCF funding, a local BCF Plan and programme needs to be agreed jointly by the council and the ICB (used to be the CCG), endorsed by the Health and Well-Being Board (HWBB) and finally approved by NHS England (NHSE). The jointly agreed programme then needs to be incorporated into a formal agreement under Section 75 of the NHS Act 2006. BCF plans set out the local joint vision for, and approach to, integration, including how the activity in the BCF plan will complement the direction set in the NHS Long Term Plan and are also expected to take into account the wider context, including the development of Integrated Care Systems; the requirements of the Care Act, 2014, and wider local government transformation in the area covered by the plan - for example, programmes, such as Integrated Personal Commissioning.

The Health and Wellbeing Board are required to approve Borough plans which are due to be returned to NHS England on 26<sup>th</sup> September. Approval letters are expected by 30<sup>th</sup> November. If we gain approval then we will need to have in place a signed Section 75 by the 31<sup>st</sup> December 2022.

The BCF programme in 2022-23 totals £57.40m which is made up of ICB minimum contribution (£24.4m), the Disabled Facilities Grant (£2.3m) and the Improved Better Care Fund (£16.8m) which now includes the previously separate Winter Pressure funding. Both the ICB and Council make additional contributions to the pooled fund of £13m and £0.77m respectively. The 2022/23 BCF plan for Tower Hamlets has been rolled over from 2021/22, with an uplift of 5.6% applied by the ICB to the social care income. In 2021, we carried out a review of our schemes and set the plan to cover 2022/23 as well.

Note that the Better Care Fund is not additional funding to the council, instead it represents a continuation of existing funding to support the base budget spend on integrated services. A full list of services funded by the Better Care Fund in 2022-23 is included in the Better Care Fund Planning Template attached to this report.

Key national changes to the BCF plan are:

- National Condition 4 objectives have changed to the following on which the narrative plan is expected to cover:
  - ✓ Enable people to stay well, safe and independent at home for longer.
  - ✓ Provide the right care in the right place at the right time.
- Part of this change is for each area to submit plans for expected capacity and demand for intermediate care services in their area. Though this will not be a part of the assurance process.
- Metrics change - there will be no requirement to submit Length of Stay ambitions for this year, though the Policy framework is clear that reducing length of stay remains a priority of the BCF.

Attached to this report is the completed BCF 2022-23 Planning Template, BCF Narrative Plan and a new addition for this year – the Intermediate Care Capacity and Demand Template.

#### **4. EQUALITIES IMPLICATIONS**

The Better Care Fund is focussed on integrating health and social care services to better support people with a diverse range of illnesses and conditions. These include people with mental health problems, people at risk of being admitted to hospital and people being discharged from hospital with appropriate support. It also funds Reablement which supports people to learn or relearn skills necessary for daily living following ill-health or disability; the adaptation of the domestic accommodation of people with disabilities to enable them to live at home, and the training of staff in the use of assistive technology.

As the Better Care Fund is used to fund a number of schemes across health and social care, equalities issues are picked up within each of these individual schemes.

#### **5. OTHER STATUTORY IMPLICATIONS**

The Better Care Fund is concerned with achieving best value in the health and social care economy, by ensuring that services are provided most appropriately across the system and that the allocation of resources supports efficiency improvements, as well as better outcomes for service users. It also seeks to reduce the historic problem of financial savings in one sector being achieved at the expense of additional costs in the other, through better joint planning and shared priorities

#### **6. COMMENTS OF THE CHIEF FINANCE OFFICER**

#### **7. COMMENTS OF LEGAL SERVICES**

---

## **Linked Reports, Appendices and Background Documents**

### **Linked Report**

- None

### **Appendices**

- BCF 2022-23 Planning Template,
- BCF narrative plan and
- Capacity and Demand Template for Intermediate Care

### **Local Government Act, 1972 Section 100D (As amended)**

#### **List of “Background Papers” used in the preparation of this report**

List any background documents not already in the public domain including officer contact information.

- These must be sent to Democratic Services with the report
- State NONE if none.

#### **Officer contact details for documents:**

Suki Kaur  
Deputy Director of Partnership Development  
[suki.kaur1@nhs.net](mailto:suki.kaur1@nhs.net)