

Better Care Fund 2021-22 Annual Report

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23 June 2022

The Better Care Fund



Better Care Fund

What is the Better Care Fund?

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- The better care fund is a national programme that requires Local Authorities and CCGs to pool defined budgets through a section 75 arrangement to support the integration of care.
 - In Sheffield our Better Care Fund goes beyond the minimum contributions and our programmes extend to include many other areas of work that benefit from joint decision making and are commissioned through integrated and pooled budgets.



Sheffield Better Care Fund Plan

The Sheffield Better Care Fund Narrative Plan, described how Sheffield commissioners work towards a single budget for health and social care.

Ambitions of the Sheffield Better Care Fund

- Ensure service users have a seamless, integrated experience of care, recognising that separate commissioning can be a block to providers establishing integrated services;
- Achieve greater efficiency in the delivery of care by removing duplication in current services;
- Be able to redesign the health and social care system, reducing reliance on hospital and long-term care so that we can continue to provide the support people need within a reducing total budget for health and social care.

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Next steps

- Building on the 2017-2019 narrative plan, the Joint Commissioning Committee will continue to drive forward the development and delivery of the Joint Commissioning plan and Joint Commissioning Intentions.
- Update the governance arrangements and TOR to account for the change to committee structure at SCC and the ending of the CCG and the implementation of the ICB Sheffield Place.
- Strengthen the BCF programmes and realign for post Covid-19 health and social care priorities.
- Recruit to the vacancies within the Joint Commissioning Office to strengthen the support to the Joint Commissioning Committee Executive Management Group, Executive Management Group Working Party and the BCF Programmes.
- Understand the requirements of the BCF guidance when released by NHSE.

What we achieved in 2021-22

- Continued to support our statutory, voluntary sector and independent sector providers through the COVID-19 pandemic, with particular emphasis upon prevention of admission and timely discharge.
- Supported the delivery of the changing infection control, discharge and Covid-19 guidance, enabled prevention of inappropriate admissions to hospital, ensured people remained at home 91 days after discharge and minimised the number of people admitted permanently into residential care.
- Worked together to improve our community equipment and adaptations service, to ensure more people receive equipment they need in a timely manner to remain as independent as possible in their usual residence. In year adaptations, funded via the DFG, exceeded the planned volume as the backlog created by social distancing and shielding was targeted.
- Worked with partner organisations to deliver joined up services for people with Mental Health needs, including crisis cafes and alternatives to A&E for 16–17-year-olds in crisis.
- Increased Mental Health services supporting Minority Ethnic Groups and those experiencing health inequalities across the city, achieving higher than target levels of integration between primary and community services.
- Streamlined our joint assessment and review process to ensure those with ongoing care needs have their needs met and are then reviewed in a timely manner. This has been challenging due to the backlog created during the Covid-19 pandemic, but plans are now in place to ensure all outstanding reviews are completed.
- Worked with partners and Provider organisations to develop recruitment and retention plans designed to stabilise the workforce challenges within the sector.
- Maintained people in a safe location during unprecedented times.

2021/2022 Outturn

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NHS Sheffield Clinical Commissioning Group/Sheffield City Council Finance Report 2021/22- Financial Position for Period Ending 31st March 2022				
Memorandum: Section 75 - Better Care Fund				
Theme	Year to Date: March			
	Budget	Expenditure	Variance	
			Over (+)/ Under(-)	
	£'000s	£'000s	£'000s	%
Citywide Position				
People Keeping Well in their local community	7,820	7,055	(766)	(9.8%)
Active Support & Recovery	54,383	54,383	0	0.0%
Independent Living Solutions	5,297	5,429	132	2.5%
Ongoing Care	177,383	182,846	5,464	3.1%
Emergency Medical Admissions - STH	70,927	70,927	0	0.0%
Mental Health	121,268	129,495	8,228	6.8%
Capital Grants	5,853	6,451	598	10.2%
TOTAL EXPENDITURE	442,929	456,585	13,656	3.1%

The current agreed risk share arrangements state that each organisation is responsible for any financial variances on their individual budget areas. The final year end position shows a £13.656m overspend (CCG £2.476m, SCC £11.180m).

Costs within this report have been adjusted to take into account the spend and funding related to the Hospital Discharge Fund during the Covid-19 pandemic where the costs incurred fall within the scope of the Better Care Fund.

Performance Measures

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Metric	Definition	Target		Outturn
Avoidable admissions	Unplanned hospitalisation for chronic ambulatory care sensitive conditions (NHS Outcome Framework indicator 2.3i)	1,052.3		764.7
Length of Stay	Proportion of inpatients resident for: i) 14 days or more ii) 21 days or more	14 days or more (Q4)	21 days or more (Q4)	14 days = 13.6% 21 days = 8.21%
		13.9%	7.6%	
Discharge to normal place of residence	Percentage of people who are discharged from acute hospital to their normal place of residence	96.6%		97.6%
Res Admissions*	Rate of permanent admissions to residential care per 100,000 population (65+)	767.6		661.0
Reablement	Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services	80.0%		80.5%

Summary of 2021/22 BCF Plan

- 2021/22 continued to be challenging with the ongoing Covid-19 pandemic requirements and the restarting of elective and preventative services.
- The S75 mechanism was used as a way of ensuring cross system working and best use of the resources to maximise outcomes, including from any non-recurrent Covid-19 support funding.
- The finance minimum NHS contribution to community services and social care was retained as requirement and for Sheffield this equated to £45 million of the total Better Care Fund of £443 million closing budget.
- The BCF KPIs were met apart from the 21 days in hospital target that was missed during the 2nd half of March 2022.
- The submission was approved by Dr Terry Hudson, CCG Governing Body Chair, on behalf the H&WB Board, on 24 May 2022.

2022/23 Financial Planning

- Better Care Fund Planning guidance to be expected in Summer 2022 to clarify scope of the Programme and associated KPIs.
- Reporting focus anticipated to be the reduction of health inequalities across the system.
- NHS funding is being allocated in Q1 to the CCG and Q2 onwards to the Sheffield Place as part of the ICB.
- Minimum funding has been confirmed as: £81.082m
 - NHS Minimum Contribution £47.545m
 - IBCF £28.429m
 - DFG £5.108m
- Additional contributions to the Sheffield BCF: £373.813m.
 - Additional SCC: £114.277m
 - Additional NHS: £259.536m
- **Total Sheffield BCF for 2022/23: £454.895m**



Joint Commissioning Update

- A set of joint commissioning intentions has been finalised and is being developed into an overall strategy plan and delivery programmes.
- Work is underway to co-produce the outcomes framework that will underpin the programme of delivery.
- The S75 agreement is being updated to expand to include the services within the scope of the joint commissioning intentions. For example, inclusion of children's and community services to allow pathways to be redesigned to be all age and multi-organisational.

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