

The report of the Better Care Fund of Bradford Metropolitan District Council (Document “A”) to the meeting of Health and Wellbeing Board to be held on 13th June 2023

A

Subject:

Better Care Fund 2022-23 Year-end report

Summary statement:

1. To inform the Health and Wellbeing Board on the end of year position and spend for BCF 2022-23.
2. To provide assurance that the Better Care Fund Plan has met the National Policies and requirements for 2022/23

EQUALITY & DIVERSITY:

The BCF is strongly underpinned with the ambition to tackle inequalities and promote the aims of the District Plan which include upholding the District’s Equality objectives.

The BCF has set tackling inequality in health, wellbeing, outcomes, and access as the shared purpose because less equal societies fare worse than more equal ones, across everything from education to life expectancy. Health inequalities can only be mitigated through working in partnership, developing new integrated service offers between health and care at every interface that reflect the fundamentally changing nature of our population in coming years.

Councillor Susan Hinchcliffe
Chair, Bradford and Airedale Health and Wellbeing Board

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Portfolio:

Health and Wellbeing

Overview & Scrutiny Area:

Health and Wellbeing

1. SUMMARY

The BCF Plans for 22/23 were submitted in September 2022. A letter of approval was issued on the 6th Jan 2023 to confirm we have complied with the national policies and requirements. The final expectation relates to an end of year report that is submitted to provide a summary of the performance throughout 22-23.

Quarterly reports on the BCF have been submitted to monitor performance against the national conditions and metrics. Q4 is required to be signed off by the Health and Wellbeing Board and summarises performance in 22/23.

The Adult Social Care Discharge fund was announced in September 2022 and an additional £5.67m was pooled in to the BCF 22/23. Reports were submitted Fortnightly to the BCF national team which identified; the number of hospital discharges by service, the total packages of care booked and a supporting narrative to highlight the progress made through the funding. These reports are collated by the BCF team but goes directly to the Department of Health and Social Care.

2. BACKGROUND

The Better Care fund was introduced in 2015 and requires Local Authorities and the NHS to enter into pooled budget arrangements and develop a joint spending plan.

The BCF Policy Statement for 22/23 continued with similar expectations from the previous year. There are 4 key conditions which the plans for the BCF plans must meet:

- **A jointly agreed plan** - All mandatory funding contributions were agreed and signed off by HWBB and the minimum contributions were pooled in to a section 75 agreement (Appendix 2)
- **NHS minimum contribution to social care is maintained** - The contribution to social care from the NHS via the BCF was agreed and exceeded the minimum expectation
- **Investment in out of hospital services is maintained** - Spend on NHS commissioned out of hospital services (which can include social care) exceeded the minimum ring-fence.
- **Implementing the BCF Policy Objectives** – The BCF plan was created to meet its objective (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). These 2 metrics were achieved by the BCF plan.

The plan was discussed in detail at the Planning and Commissioning Forum and was assured by the Partnership and Leadership Executive and the BDC Partnership Board prior to sign off.

Since the Approval of the BCF plans, the government announced a further £500m to tackle the delays to discharging people from hospital who do not meet the criteria to reside. The funding was announced in September 2022 with Guidance being released in November. Areas were expected to agree and implement a plan by January 2023. The funding was split between Local Authorities and ICBs. A plan for the funding was agreed and submitted within the expected time scale (Appendix 1). The funding ended on 31st March and will be re-established in the 23-25 BCF plans.

3. OTHER CONSIDERATIONS

Please refer to the appendix documents.

4. FINANCIAL & RESOURCE APPRAISAL

Financial requirement is detailed within the body of the appendix documents.

5. RISK MANAGEMENT AND GOVERNANCE ISSUES

The governance for the BCF is provided by Health and Wellbeing Board.

6. LEGAL APPRAISAL

The Health and Care Act 2022 required the establishment of integrated care boards (ICBs) and the creation of integrated care partnerships (ICPs). Integrated care partnerships bring together health, social care public health and wider voluntary, community, and social enterprise representatives.

7. OTHER IMPLICATIONS

7.1 SUSTAINABILITY IMPLICATIONS

No Direct implications

7.2 GREENHOUSE GAS EMISSIONS IMPACTS

No Direct implications

7.3 COMMUNITY SAFETY IMPLICATIONS

No Direct implications

7.4 HUMAN RIGHTS ACT

No Direct implications

7.5 TRADE UNION

No Direct implications

7.6 WARD IMPLICATIONS

No Direct implications

7.7 AREA COMMITTEE ACTION PLAN IMPLICATIONS (for reports to Area Committees only)

N/A

7.8 IMPLICATIONS FOR CHILDREN AND YOUNG PEOPLE

N/A

7.9 ISSUES ARISING FROM PRIVACY IMPACT ASSESMENT

N/A

8. NOT FOR PUBLICATION DOCUMENTS

None

9. OPTIONS

No Options Provided

10. RECOMMENDATIONS

The Health and Wellbeing Board to note the receipt of the BCF 2022-23 year-end report.

11. APPENDICES

1. BCF 22-23 Year-end report



BCF 2022-23
Year-end report.xlsx

2. Section 75 Better Care Fund



Schedule 1J BCF
2022-23.docx

12. BACKGROUND DOCUMENTS

1. BCF 2022-23 Planning Template (Full)



BRADFORD HWBB
BCF 2022-23 Planning

2. BCF 2022-23 Narrative (Full)



BRADFORD HWBB
BCF Narrative 2022_2