



HEALTH AND WELLBEING BOARD

Date: 9th November 2023

ITEM 06

Report sponsor: Andy Smith, Strategic Director of People Services

Report author: Kirsty McMillan, Director, NHS Integration & Prevention

Better Care Fund Review

Purpose

- 1.1 To provide the Health and Wellbeing Board with details about a proposed plan to review the Derby Better Care Fund (BCF).

Recommendation(s)

- 2.1 To approve a review of local Better Care Fund processes and arrangements to ensure it matches with local health, social care and housing system priorities.
- 2.2 To agree that this review will be overseen by the BCF Programme Board on behalf of the Health and Wellbeing Board, and that any proposals following the review will return for consideration. This will include an interim report ahead of final recommendations

Reason(s)

- 3.1 The Health and Wellbeing Board (HWB) is the statutory body responsible for the Better Care Fund (BCF).

Supporting information

- 4.1 At its meeting in July, the Health and Well Being Board approved the City's Better Care Fund (BCF) plan for 23-25. Since then, the NHSE led Assurance process has concluded and the plan for Derby City has been approved.
- 4.2 **Proposed Review** – The BCF was established as a nationally mandated pooled budget and partnership agreement between the NHS and Local Authorities. In 2015, a partnership agreement was entered into between Derby City Council and what at that time was called the NHS Southern Derbyshire Clinical Commissioning Group. This partnership was focused around joint working and health and care integration and it also created the pooled budget using the powers of s75 of the NHS Act 2006. At that point, the arrangement was designed to ensure that NHS Clinical Commissioning Groups, Local Authorities and Health and Wellbeing Boards worked together to agree a joint area plan that would bring health and care services more closely together, and this was a condition of being able to access BCF income. Some of the original budget included elements of funding that had previously been provided by the NHS for social care, as well as joint areas of responsibility from pre-existing separate funding

streams and also some new funding without prior commitments.

- 4.3 Since 2015, there has been several changes associated with reporting mechanisms and the national funding priorities and allocations. In Derby, the fund was £17.4 million per year in 2015, but this has risen to £39.2m due to additional funding streams and priorities being incorporated within the BCF, and inflationary uplifts.
- 4.4 The BCF programme in both Derbyshire and Derby City has been subject to joint oversight by way of a BCF Programme Board as a sub group of both Health and Wellbeing Boards since 2015. Investment in key service delivery across the County and City has therefore been maintained and made in both community health provision, social work, care provision, housing and voluntary sector services. Many of the services and activity being funded are assisting the NHS and Local Authorities to deliver and underpin their core statutory requirements and duties.
- 4.5 Given the formation of the **Integrated Care System** under the Health and Care Act 2022, there is a renewed national and legislative emphasis on delivering integrated care to improve the support available for local people, and this legislation is designed to enable partners to plan and work together differently. Whilst the Health & Wellbeing Board continues to hold the responsibility for the BCF, there may be opportunities within the new arrangements to align the intentions for the BCF to the objectives of the new Integrated Care Strategy.
- 4.4 It is therefore proposed that the Health and Wellbeing Board agree to a review of the BCF, with the Appendix to this report stating the proposed approach. This would involve asking the national NHSE BCF support team for some assistance with undertaking the review to help with identifying further opportunities for supporting the objectives of the Integrated Care Strategy and other areas where partners are / or aim to, work collaboratively.

It is proposed that the sub group of the Health and Wellbeing Board (the BCF Programme Board) oversees the review and ensures that Health and Wellbeing Board members and members of the newly formed Integrated Care Partnership / Integrated Place Executive are engaged and involved. As the statutory body responsible for the BCF, any proposed change to how the current pooled budget is spent and prioritised would need to come back to the Health and Wellbeing Board for consideration and approval.

Public/stakeholder engagement

- 5.1 Social Care, Housing, the Voluntary, Community and Social Enterprise sector and NHS providers who are recipients of funding via the Better Care Fund will be engaged in the review. It is proposed that members of the Integrated Care Partnership and the Integrated Place Executive should be involved in the review which will also therefore bring in wider partners outside of the Health and Wellbeing Board. These boards have elected Member representation, Primary care and Acute care colleagues as members and participants of these groups.

Other options

- 6.1 The Health and Wellbeing Board could determine that a review is not necessary at this time, given the capacity it will take from partner organisations, and given the current 23-25 plan has been assured by the recent DHSC BCF Planning round.

Financial and value for money issues

- 7.1 Details for the minimum contributions to the BCF for 2023 to 2025 are set out by government and include the minimum contributions that need to be made by the NHS to the pool. There has always been flexibility for local areas in how the funds are used against the national priorities, but any changes to that as a result of the proposed review would need consideration and approval by the Health and Wellbeing Board.

Legal implications

- 8.1 The Council and the NHS must enter into a section 75 agreement as part of the Planning expectations, under section 75 of the NHS Act 2006. This agreement remains in place and covers the BCF. There are components of the fund that includes direct grants to the Council, and these must also be separately reported to government via the Council's statutory s151 Officer. This review does not alter the legal requirements to continue with the BCF arrangements and pooled budget regardless of any recommendations about how the fund may be used differently.

Climate implications

- 9.1 There are no significant implications arising from this report.

Socio-Economic implications

- 10.1 There are no significant implications arising from this report although the Better Care Fund supports a number of services that will be contributing to an individual's health and wellbeing.

Other significant implications

- 11.1 The Better Care Fund supports the Council's and the ICB's overall budget as an income stream to allow delivery of key interventions, teams and services that support the overall health and care system in Derby. The loss of this fund would present a significant financial risk to the shared ambition and key performance measures designed to serve patients and citizens well.

This report has been approved by the following people:

Role	Name	Date of sign-off
Legal	Olu Idowu, Head of Legal and Insurance Service, Derby City Council	1 st Nov 2023
Finance	Janice Hadfield, Head of Finance, Derby City Council	1 st Nov 2023
Service Director(s)	Kirsty McMillan, Service Director – NHS Integration & Prevention, Derby City Council	1 st Nov 2023
	Kate Brown, Director of Joint Commissioning and Community Development, Derby and Derbyshire Integrated Care Board	1 st Nov 2023
Report sponsor	Andy Smith, Strategic Director – People's Services, Derby City Council	1 st Nov 2023
Other (s)	n/a	

Appendix 1 - Proposed Better Care Fund Review

Context:

- The formation of the Integrated Care System provides the opportunity for statutory partners to plan and work together differently.
- Health & Wellbeing Boards hold the responsibility for the BCF. With the support of those boards new partnership structures within the ICS provide the potential to assist with co-ordination and actioning HWB intentions.
- In Joined Up Care Derbyshire ICS the statutory partners have shared purpose and ambitions as demonstrated in our Integrated Care Strategy
- There are several pieces of work which include detailed analysis of the opportunities to improve care and efficiency through greater integration which may be progressed further via BCF
- Our Better Care Funds (Derby and Derbyshire) have been in existence since 2015 with very little refresh of content. Noting that this is because the funding is primarily linked to meeting partners statutory requirements and change is therefore limited without long term strategic planning.
- There is limited understanding of the BCF (and often misconceptions)

Aim:

Optimise the opportunities offered by the BCF s75 partnership flexibilities and pooled budget to deliver HWB and Joined up Care Derbyshire integrated health, social care and housing ambitions.

Proposed Approach:

- Review and refresh where applicable BCF processes and plans to ensure they are fit for purpose to:
 - Support delivery of shared objectives (such as the Integrated Care Strategy and other areas where partners are / or aim to, work collaboratively).
 - Explore opportunities for establishment of new oversight arrangements which may include consideration of utilising Integrated Care Partnership structure reporting to the HWB. Any proposals will not impact on the governance arrangements of the HWB.
 - Ensure that the ongoing component parts remain relevant to the partnership fund and the collective priorities that we now have.
 - Demonstrate value and impact.

Consider opportunities to expand inclusion within the BCF to bring together the resources that support integrated provision.

Increase knowledge of, and confidence in the BCF as a process to support collaborative commissioning and provision.

Identify the actions and timeframes necessary to deliver agreed improvements in BCF structure, content and governance.

Constraints

In approaching this work it is useful to identify what might get in the way of successful delivery. The following have been highlighted as potential issues.

- Capacity is a significant concern and partners need to recognise that this will take capacity from teams across organisations.
- There is recognition that all partners have vested interests and may need to become comfortable with ceding a level of control.
- There are significant competing demands that may not affect all partners equally such as the LA risk of inspection, NHSE requirements and planning and managing operational demands.
- Under operational pressure the default for individual organisations to retreat to their own solutions.

Principles that all Partners should commit to

- Openness to change.
- Transparency
- Recognise and respect the complex nature of partners' organisational challenges.
- Build the conditions for trust and confidence in the system and each other.

Support

It is proposed that we seek to access the national support offer to add value and help us to deliver our approach and feel that in the bespoke offer the focus would be on the people and organisational development areas of expertise.