

**Nottingham City Health and Wellbeing Board  
Commissioning Sub-Committee  
30 November 2022**

<b>Report Title:</b>	Better Care Fund 22-23 Better Care Fund Planning Requirements -retrospective approval
<b>Lead Officer(s) / Board Member(s):</b>	Sarah Fleming- Head of Joint Commissioning, NHS Nottingham and Nottinghamshire Integrated Care Board Katy Ball, Director of Commissioning and Partnerships, Nottingham City Council
<b>Report author and contact details:</b>	Naomi Robinson- Senior Joint Commissioning, NHS Nottingham and Nottinghamshire Integrated Care Board Naomi.Robinson2@nhs.net
<b>Other colleagues who have provided input:</b>	
<b>Subject to call-in:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> <b>No</b> (retrospective decision)
<b>Key Decision:</b>	<input type="checkbox"/> <b>Yes</b> <input checked="" type="checkbox"/> <b>No</b>
<b>Criteria for a Key Decision:</b>	
(a) <input checked="" type="checkbox"/> <b>Expenditure</b> <input type="checkbox"/> Income <input type="checkbox"/> Savings of £750,000 or more, taking account of the overall impact of the decision <b>and/or</b>	
(b) Significant impact on communities living or working in two or more wards in the City <input type="checkbox"/> Yes <input checked="" type="checkbox"/> <b>No</b>	
<b>Type of expenditure:</b>	<input checked="" type="checkbox"/> <b>Revenue</b> <input type="checkbox"/> Capital
<b>Total value of the decision:</b>	£46,902,740
<b>Executive Summary:</b>	
<ol style="list-style-type: none"> <li>1. The purpose of this paper is to approve the Nottingham City 2022-23 Better Care Fund planning requirements, which were submitted to NHS England on 23 September 2022.</li> <li>2. The paper provides an update to the Health and Wellbeing Board sub-committee on plans to undertake a collaborative commissioning review of the services in scope of the Better Care Fund.</li> </ol>	
<b>Information</b>	
<ol style="list-style-type: none"> <li>3. The Better Care Fund (BCF) Planning requirements 2022-23 were released on 19 July 2022. Following sign-off by Katy Ball (Director of Commissioning and Procurement, Nottingham City Council) and Amanda Sullivan (Accountable Officer, Nottingham and Nottinghamshire Integrated Care Board), the Better Care Fund 2022/23 Planning Template, BCF Narrative Plan and BCF Capacity and Demand Templates were submitted on 23 to NHS England in September 2022.</li> <li>4. For 2022-23, the BCF planning requirements include: <ol style="list-style-type: none"> <li>a) Nottingham City BCF Planning template (Appendix <b>1</b>)</li> <li>b) Nottingham and Nottinghamshire BCF Narrative Plan (Appendix <b>2</b>)</li> </ol> </li> </ol>	

- c) Nottingham City Intermediate care capacity and demand plan (Appendix 3)

5. The BCF National conditions remain in place for 2022-23:

- a) A jointly agreed plan from local health and social care commissioners signed off by the Health and Wellbeing Board
- b) Implementation of the BCF objectives
- c) NHS contribution to adult social care to be maintained in line with the uplift to ICB minimum contribution at a value of £14,931,691
- d) Invest in NHS commissioned out of hospital services meets the minimum contribution required of £7,823,667

6. The 2022-23 national BCF objectives have been updated to be more focused on addressing wider system and prevention outcomes through co-ordination of services. The 2022-23 BCF national objectives are:

- a) Enable people to stay well, safe, and independent at home for longer
- b) Provide the right care in the right place at the right time

7. **The 2022-23 BCF Planning Template** includes the updated national performance metrics with target setting rationale and plans to meet performance ambitions (Appendix 1 tab 6). The 2022-23 national BCF metrics are:

- a) Proportion of older people still at home 91 days after discharge from hospital into reablement or rehabilitation (effectiveness of reablement).
- b) Older adults whose long-term care needs are met by admission to residential or nursing care per 100,000 population (admissions to residential care homes).
- c) Unplanned hospitalisation for chronic ambulatory care sensitive conditions (avoidable admissions to hospital).
- d) Improving the proportion of people discharged home, based on data on discharge to their usual place of residence (discharge to usual place of residence).

8. Commissioners from Nottingham City Council and the ICB jointly reviewed the target setting for 2022-23 BCF metrics. The rationale for target setting used national benchmarking and applied local improvement plans such as implementation of the anticipatory care model framework and the system agreement to increased funding to resource 'pathway 1' reablement activity. A local ICS BCF performance dashboard has been created to enable shared oversight of progress to reach targets.

9. The BCF Planning template (Appendix 1, tab 5) provides detailed breakdown of expenditure against service areas. The labelling of schemes was reviewed in 2022-23 to provide further clarity about how BCF schemes relate to current commissioned services

10. **The Nottingham and Nottinghamshire BCF Narrative Plan** (Appendix 2) describes how these services are commissioned and delivered to meet these objectives. The BCF narrative provides the ICS overview of the BCF plan, including how BCF programme align to our system priorities, transformation programmes and our approach to integration and a summary of the locally developed Collaborative Planning and Commissioning Framework.

11. The narrative has been updated to reflect the outputs of the joint BCF Plan review (see point 15), which includes a refreshed local BCF ambition statement and themes our BCF plans and services across three priority areas:
- a) **Prevention and early intervention services:** e.g., healthy lifestyle support, single point of access, social prescribing.
  - b) **Anticipatory Care Services** e.g., care co-ordination and navigation, urgent care / crisis response, assistive technology, primary care enhances services.
  - c) **Discharge to assess services:** integrated discharge team, community beds, interim placements, reablement, housing support schemes concluded in August 2022 (see point 16).
12. **The Nottingham City BCF Capacity and Demand Template** (Appendix 3) is a new a planning requirement for 2022-23. This required joint review by health and social care of existing data to consider the full spectrum of care supporting recovery, reablement and rehabilitation and to estimate demand and capacity for both hospital discharge and admission avoidance.
13. The capacity and demand template was submitted alongside BCF plans but is not subject to BCF assurance. Locally we have worked closely with the NHSEI regional BCF team to understand the new data requirement and to complete as fully as possible using available local data. This highlighted a need for longer term development of collaborative demand modelling, and this will be factored into future BCF planning approaches.
14. The Health and Wellbeing Board sub-committee is now asked to formally approve the submitted planning templates and narrative plan in line with the statutory Better Care Fund governance requirements.

### **BCF Review**

15. A collective strategic review of the existing BCF plans was undertaken by the ICB and Local Authorities between May and August 2022. The aim of the review was to ensure all BCF schemes are clearly defined with a shared understanding of their intended outcomes; align schemes to current ICS plans; and develop a shared understanding of opportunities for greater alignment in commissioning and delivery of services.
16. The key findings of the BCF review were:
- a) **BCF schemes are evidence based and are regularly reviewed through individual organisation's commissioning approaches.** The original BCF planning guidance included a suite of self-assessments and evidence-based interventions. Our initial BCF plans included many of these as pilot services or funded new ways of working. BCF schemes are well evidenced and over time have been reviewed, re-commissioned and are now considered 'core' out-of-hospital, discharge to assess or prevention services.
  - b) **Approaches for joint planning/commissioning and pooled budgets have declined over time with little evidence of aligned approaches.** As the BCF funded pilots and services became "core" services, pooled arrangements decreased. Commissioning decision making is now within individual organisation's for the majority of schemes and there is no longer a collective strategic understanding of how all the schemes align.

17. The BCF review found significant opportunity to maximise the potential for BCF to be a mechanism for integrated care. The review made the following recommendations:

- a) **Recommendation 1:** Undertake root and branch reviews for the BCF priority areas to maximise opportunities for collaborative commissioning, pooled resources, and the delivery of integrated services to improve outcomes for the population and achieve best value for money. The reviews will focus on the three BCF priorities, which are prevention and early intervention, anticipatory care services and discharge to assess.
- b) **Recommendation 2:** Understand and scope the opportunities to use the BCF as a tool to achieve integrated delivery at Place.
- c) **Recommendation 3:** Realise benefit of BCF governance via Health and Wellbeing Boards to ensure a focus on wider determinants and wellbeing

18. The Collaborative Commissioning Oversight Group will provide the leadership for delivery of these BCF recommendations and will develop a timeline and programme approach. It is recognised that there will need to be considerable stakeholder engagement across Health and Wellbeing Board members, commissioning and provider organisations in order to undertake the root and branch reviews.

**Does this report contain any information that is exempt from publication?**

No

**Recommendation(s):** The Committee is asked to:

Approve the 2022-23 Better Care Fund Planning Requirements

### The Joint Health and Wellbeing Strategy

Aims and Priorities	How the recommendation(s) contribute to meeting the Aims and Priorities:
<p><b>Aim 1:</b> To increase healthy life expectancy in Nottingham through addressing the wider determinants of health and enabling people to make healthy decisions</p>	<p>The priorities for 2022-23 build on our progress to date and reflecting system transformation priorities.</p>
<p><b>Aim 2:</b> To reduce health inequalities by having a proportionately greater focus where change is most needed</p>	<p>The BCF continues to support a joined-up approach to integration across health, care, housing and other agencies such as the voluntary sector to support people to live independently at home.</p>
<p><b>Priority 1:</b> Smoking and Tobacco Control</p>	<p>The BCF funding has been used to deliver a wide range of services and new functionality that support integrated approaches e.g. integrated care teams, sharing data across organisational boundaries, integrated approaches to hospital discharge.</p>
<p><b>Priority 2:</b> Eating and Moving for Good Health</p>	
<p><b>Priority 3:</b> Severe Multiple Disadvantage</p>	
<p><b>Priority 4:</b> Financial Wellbeing</p>	
<p>The development our Collaborative Commissioning and Planning Framework</p>	

	<p>have underpinned the view that the BCF will become a key driver for transformation and integration. During 2022/23 we will undertake a 'root and branch' commissioning review of the services and contracts that form our BCF plans. This will consider how future BCF plans and approaches to commissioning can better enable Place Based Partnerships and Neighbourhoods to develop and deliver community-facing integrated care, joining up community services across sectors and working with community leaders.</p>
<p><b>How mental health and wellbeing is being championed in line with the Board's aspiration to give equal value to mental and physical health:</b></p> <p>The schemes and services that form the Better Care Fund plan include care coordination and multi-disciplinary health and care planning. This should include meeting mental health needs as part of proactive care pathways and hospital discharge planning.</p> <p>This has been strengthened by the maturing Place Based Partnership (PBP) in its ability to build further integration and joined up system working and delivery of holistic health and care.</p>	

## 1. Reasons for the decision

- 1.1 The report template was agreed for submission to NHSE by the following, subject to formal ratification at the Nottingham City Health and Wellbeing Board on the 23 September 2022.
- 1.2 Subsequently, the Nottingham City Health and Wellbeing Board Sub-committee are asked to formally ratify the templates. The Nottingham City 2022-23 Better Care Fund planning template submission is shown in full at **Appendix 1**.

## 2. Other options considered and rejected

2.1 N/A

## 3. Risk implications

3.1 N/A

## 4. Financial implications

4.1 There is minimal financial changes as result of the plan, schemes and commissioning are largely continuation of the previous years.

## 5. Procurement implications

5.1 N/A

## 6. Equalities implications

6.1 **Equality Impact Assessments are completed by the appropriate commissioning organisation as part of the implementation of new services or significant changes to existing services. The 2022/23 BCF Narrative Plan (Appendix 2) includes further information about the approach to equality and addressing health inequalities.**

7. **Any further implications**

7.1 N/A

8. **List of background papers relied upon in writing this report (not including published documents or confidential or exempt information)**

8.1 [B1296-Better-Care-Fund-planning-requirements-2022-23.pdf \(england.nhs.uk\)](#)

9. **Published documents referred to in this report**

9.1 [B1296-Better-Care-Fund-planning-requirements-2022-23.pdf \(england.nhs.uk\)](#)