Lancashire Better Care Fund The Integration and Better Care Fund Operating Guidance For 2017-19

The Integration and Better Care Fund Operating Guidance For 2017-19 was published on 18th July 2018.

It is available in full here: Operating guidance

This should be read along with an accompanying letter (attached) from Neil Permain, Director of NHS Operations and Delivery and SRO for the Better Care Fund and the extract of Lancashire data from the Provisional DToC ambitions spreadsheet. (attached).

The document:

- …is for local partners that agree and administer Better Care Fund 2017-19 plans Clinical Commissioning Groups (CCGs), local authorities (LAs) and Health and Wellbeing Boards (HWBs).
- ... sets out refreshed operating guidance for approved Better Care Fund (BCF) plans for 2017-19.
- ...sets out:
 - accountability structures and funding flows for 2017-19 plans
 - refreshed metric plans for 2018-19
 - guidance on amending BCF plans
 - guidance on reporting on and continued compliance with BCF 2017-19 conditions
 - the support, intervention and escalation process
 - the legislation that underpins the BCF

Summary

- 1. HWBs are expected to continue to oversee the strategic direction of the BCF and the delivery of better integrated care, as part of their statutory duty to encourage integrated working between commissioners.
- 2. Arrangements for monitoring delivery, accounting and audit should be governed by the local s.75 agreement.
- 3. Where a risk sharing arrangement linked to the Non-Elective Admissions (NEA) activity is put in place by the HWB through the planning process for 2017-19, local areas should ensure that arrangements for this are clear and there is a process in place for monitoring this locally.
- 4. For the purposes of the BCF, there should be a partnership board with minimum representation across the relevant CCG(s) and LA(s). This needn't be solely to manage the BCF.
- 5. The conditions for approval of BCF plans remain the same:
- 6. The four national metrics remain the same.
 - For NEAs and Residential admissions' and 'Reablement' metrics there is an **option** to revise the targets.

Non Elective Admissions (NEAs)

For 2018-19, areas can consider and submit revisions to these additional reductions or apply additional reductions where none are in place currently.

For the 'Residential admissions' and 'Reablement' metrics, local areas can submit revisions to the planned metrics for 2018-19 on their planning templates with an accompanying note summarising the rationale for this revision.

Delayed Transfers of Care (DToC)

The Government's mandate to the NHS for 2018-19 has set an overall ambition for reducing delays to around 4,000 hospital beds occupied by patients delayed without discharge by September 2018.

There are centrally set expectations for DToC performance based upon this ambition and local performance as at Q3 2017/18.

The baseline used is Q3 DToC metric data. Any dispute with the use of or accuracy of the baseline used must be submitted to the BCST by 3rd August. The baseline used does match the actual Q3 reported internally by the Lancashire BCF so there is no case for dispute. However, partners need to consider this

Areas will be expected to *agree* a DToC metric for 2018-19 that meets the nationally set HWB level expectations for 2018-19. The document refers to adopting the level set in the expectations and there is a clear assumption that this will happen.

Areas should plan based on the assumption that the expectation will be met from September and that this level will be maintained or exceeded thereafter.

A revised guide on counting DToC will be published in the coming months for implementation in October 2018. The guidance will provide greater clarity on the process for recording and attributing delayed transfers, with a view to reducing the degree of variation in recording that currently exists across the country.

NB As a system can we agree the whole Lancashire target / trajectory for 2018/19 Attached is a spreadsheet setting out a graphic interpretation of Lancashire 2018/19 DToC expectations and a comparison of these against published monthly DToC bed days for NHS, Social Care, Joint and Total.

This appears to show that, bearing in mind the assumption that the expectation will be met from September:

- NHS attributable is close
- Social Care is there now
- Joint is already much better
- Total is there already

However, we need to be confident in these assumptions and agree that the expected trajectory is accepted by all partners.

It should also be borne in mind that this is a whole HWB position.

This can be broken down to an AEDB level for AEDBs to decide / agree what proportion of improvement should be allocated to them. This will support local planning and enable local monitoring and reporting.

Attached is a AEDB/Provider breakdown of expectations based upon AEDB breakdown of the Q3 baseline. This will require local consideration.

7. Amending BCF plans

Better Care Fund plans were agreed for two years (2017-18 and 2018-19). Places are **not**, therefore, required to revise their plans for 2018-19 other than in relation to metrics for DToC as set out above. Places can, if they wish, amend plans to:

- Modify or decommission schemes.
- Increase investment, including new schemes.

Any changes to plans that impact on schemes or spending in the assured BCF planning template must be jointly agreed between the LA and the CCGs that are signatory to the plan and be accompanied with an updated Planning Template and brief rationale. Amended plans must continue to meet all planning requirements and conditions. Amended plans should be submitted by 24 August 2018.

8. Reducing Length of Stay

NHS England and NHS Improvement have recently set out their ambition for reducing long stays in hospital by 25% to reduce patient harm and bed occupancy. NHS England and NHS Improvement have asked trusts and CCGs to work with local government partners to agree local sectoral ambitions to achieve this reduction.

BCF plans will support delivery of this reduction through the continuing focus on delivery of the local DToC expectations and through the implementation of national condition four – the High Impact Change model. Particular focus in relation to length of stay should be given to the implementation of the HICM in relation to systems to monitor patient flow, seven day services and trusted assessors (changes two, five and seven).

National partners will consider applying additional requirements for 2019/20, including through the BCF where appropriate, for local areas and NHS bodies that have made insufficient progress in reducing the number of people experiencing long stays in hospital during 2018/19.

There is no stated requirement for BCF reporting of LoS or additional BCF actions. LoS will though be built into BCF metric reporting and expected to be referenced in scheme planning and progress monitoring.

Actions required:	By who	By when
BCF Partners to agree whether any change to NEA, Residential and Nursing Care Admissions and Reablement targets is required for 2018/19	BCF steering and programme managers group members	17 th August
BCF partners to agree or dispute the 2017/18 Q3 baseline used to set DToC expectations is correct/ acceptable. Any objection to be lodged by 3 rd August.	BCF steering and programme managers group members	3 rd August
BCF partners to agree or dispute the DToC expectations set for Lancashire 2018/19. *	BCF steering and programme managers group members	17th August
BCF partners and AEDB to agree or dispute the DToC expectations set at AEDB level *	BCF steering and programme managers group members / AEDB	ТВС
To identify any amendments to BCF/iBCF plans for 2018/19 i.e. for changes to schemes and/ or spending plans	BCF programme managers /PR	17th August
Any amendments to be considered and agreed by BCF steering group and submitted for approval by Health and Well-Being Board under chair's delegated powers.	BCF steering group/ PR	24th August

Appendix A Lancashire Better Care Fund

Amended plans to be included in an updated BCF Planning Template along with a brief rationale and submitted to the Better Care Support Team by 24th August.	BCF steering group / PR	24 th August
Final position / agreement of Lancashire DToC expectations for confirmation with BCST	BCF steering group /PR	24 th August

^{*} There is no specified timescale for agreeing or disputing the DToC trajectory expectations, but it seems reasonable that the final date for this should be 24th August hence the earlier deadlines set for local agreement /dispute.

The actions above are only those that immediately fall out of the guidance requirements. Full requirements will be built into ongoing planning.