

From: Anne Tidmarsh, Director of Partnerships, Adult Social Care and Health

To: Kent Health and Wellbeing Board – 7 February 2019

Subject: **Kent Better Care Fund Annual Report**

Classification: **Unrestricted**

Summary:

This paper provides an annual update on the progress of the Kent Better Care Fund.

Recommendation:

The Kent Health and Wellbeing Board is asked to note this report and if any further submission is required for the extension of the BCF plan to delegate sign-off responsibilities to the Chairman.

1. Introduction

1.1 The Better Care Fund (BCF) has been in place since April 2014. The current plan was submitted in 2017 and was a two-year plan to run until 2019. The BCF is made up of money identified by the CCGs, KCC and grants for Districts and the Disabled Facilities Grant. In addition, the iBCF was launched in 2017 for 3 years (to 2020) to focus on High Impact Changes to reduce DTOC. This money is a central allocation that goes direct to social care.

1.2 This paper provides an annual update on the progress of the BCF.

2. Financial Implications

2.1 The financial schedule submitted for the Kent BCF was as follows:

Local Authority Contributions exc iBCF		
Disabled Facilities Grant (DFG)	2017/18 Gross Contribution	2018/19 Gross Contribution
Kent	£14,387,024	£15,645,644
Lower Tier DFG Breakdown (for applicable two-tier authorities)		
Ashford	£775,304	£842,979
Canterbury	£1,017,727	£1,101,325
Dartford	£513,627	£558,301
Dover	£1,113,133	£1,203,366
Gravesham	£882,691	£961,866
Maidstone	£1,131,348	£1,230,870
Sevenoaks	£976,757	£1,064,336
Shepway	£1,138,882	£1,229,558
Swale	£2,182,185	£2,382,555
Thanet	£2,568,686	£2,794,932
Tonbridge and Malling	£1,007,235	£1,097,910
Tunbridge Wells	£1,079,451	£1,177,645

Total Minimum LA Contribution exc iBCF	£14,387,024	£15,645,644
Local Authority Additional Contribution	2017/18 Gross Contribution	2018/19 Gross Contribution
Total Local Authority Contribution	£14,387,024	£15,645,644

iBCF Contribution	2017/18 Gross Contribution	2018/19 Gross Contribution
Kent	£26,392,010	£35,018,901
Total iBCF Contribution	£26,392,010	£35,018,901

CCG Minimum Contribution	2017/18 Gross Contribution	2018/19 Gross Contribution
NHS Ashford CCG	£7,324,821	£7,463,993
NHS Canterbury and Coastal CCG	£12,861,063	£13,105,423
NHS Dartford, Gravesham and Swanley CCG	£15,566,069	£15,861,824
NHS South Kent Coast CCG	£13,451,140	£13,706,711
NHS Swale CCG	£6,936,651	£7,068,448
NHS Thanet CCG	£9,810,694	£9,997,097
NHS West Kent CCG	£27,870,714	£28,400,258
Total Minimum CCG Contribution	£93,821,153	£95,603,755

Additional CCG Contribution	2017/18 Gross Contribution	2018/19 Gross Contribution
Total Additional CCG Contribution	£0	£0

	2017/18	2018/19
Total BCF pooled budget	£134,600,188	£146,268,300

3. Policy Framework

3.1 The NHS Long Term Plan and the forthcoming Green Paper on Older people will both focus on better integration of health and social care, so that care is seamless when patients are moved between systems. The Long Term Plan confirms an audit is taking place of the BCF, but it will be extended for a further year, to bring the BCF and iBCF in line.

3.2 The Kent and Medway Sustainability and Transformation Partnership outlines the vision “Quality of Life, Quality of Care” with an intention the Kent and Medway health and care system will deliver an integrated health and social care model that focuses on delivering high quality, outcome focused, person centred, coordinated care that is easy to access and enables people to stay well and live independently and for as long as possible in their home setting.

Work has taken place to align the objectives of the BCF with the implementation plans for Local Care and ensure that all schemes are focused on delivering the same outcomes.

4. Better Care Fund Annual Update

- 4.1 Each quarter Kent provides an update position against the national metrics:
- Reduction in non-elective admissions
 - Residential Admissions - rate of permanent admissions to residential care per 100,000 population (65+)
 - Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services
 - Delayed Transfers of Care (delayed days)

The latest return indicates we are on track to meet most targets, but further work required regarding some areas.

- 4.2 In addition to the quarterly returns it is recommended that the monitoring of the impact of the BCF be brought in line with Local Care governance and the new Local Care Executive Board, supported by the Local Care Delivery Framework. This will ensure the BCF is focussed on delivering the same aims and objectives of Local Care.
- 4.3 A review of the BCF plan has taken place with all leads across CCGs and Kent County Council which agreed to bring together all existing spend on BCF and joint health and social care schemes to review if any changes should be made. A verbal update on this will be provided at the meeting.

5. Conclusion

- 5.1 Following the review of the existing BCF and the outcomes of the planning guidance and any update on BCF requirements it is recommended that a one-off meeting of the CCG Clinical Chairs and relevant Local Authority staff review the outcomes and collectively agree a shared strategy for going forward.
- 5.2 If any further submission is required for the extension of the BCF plan the Health and Wellbeing Board are asked to delegate sign-off responsibilities to the Chairman.

6. Recommendation

The Kent Health and Wellbeing Board is asked to note this report and if any further submission is required for the extension of the BCF plan to delegate sign-off responsibilities to the Chairman.

7. Contact details

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