

OXFORDSHIRE HEALTH & WELLBEING BOARD – 15 NOVEMBER 2018

Improved Better Care Fund

Report by the Director for Adult Services and the Chief Executive of Oxfordshire Clinical Commissioning Group

Summary

1. The Better Care Fund is a programme spanning the NHS and local government which seeks to join up health and care services, so that people can manage their own health & wellbeing, and live independently in their communities for as long as possible.
2. This includes the Improved Better Care Fund which is paid to local government for funding of local care services and reducing pressures on the NHS. In 2018/19 the Council was allocated £7.5m from the Improved Better Care Fund.
3. Currently under the Section 75 NHS Act, the Joint Management Group between the Council and Oxfordshire Clinical Commissioning Group manages the Better Care Fund and Improved Better Care Fund, and reports to the Health & Wellbeing Board. A specific update regarding the Improved Better Care Fund in 2017/18 was brought to the Health & Wellbeing Board and this paper brings an update regarding the 2018/19 allocation.

Outcomes from the Improved Better Care Fund

4. Oxfordshire health & social care partners agreed that the 2017/18 Improved Better Care Fund would be divided into four main areas: improving flow; market resilience; market capacity; and additional provision. Overall these workstreams focus on delivering a sustainable interface between health and social care, stabilising the market, and alleviating pathway blockages. Annex 1 shows the outcomes that have been recorded from the Improved Better Care Fund spend to date, recording and monitoring of these actions is ongoing and is overseen by the Better Care Fund Joint Management Group.
5. Improving flow
In 2017/18 it was agreed that £1.2m would be invested in social work capacity to support flow in the hospital system. This money was committed for all 3 years of the Improved Better Care Fund to enable the recruitment of permanent staff and staff were brought into the Rapid Response Reablement Outreach Team and the HUB team. These staff support the intermediate care system by improving flow and managing demand for long term care for people, the impact of this work is evidenced in the number of discharges that have been supported and admissions avoided.
6. Market resilience
The commitment to fund market resilience recognises the challenges particularly within the home care market which has seen limitations in capacity

and some unexpected provider failures. Consultation was undertaken with providers regarding how to support providers and funding was allocated to increase the lowest level fees which resulted in an uplift to 22% of placements funded by the Council in Care Homes and an increase in payments to 21 out of 34 contracted home support providers.

7. In summary, the social care market experienced less volatility in 2017-18 compared to 2016-17 with fewer providers unexpectedly exiting the market due to financial failure. This has reduced the costs associated with changing providers and the impact on people and families. However, whilst we did not see a contraction in the market, the County Council was not able to increase the number of hours homecare purchased throughout the year as had been achieved in 2016-17.
8. Market capacity
Funding allocated to develop market capacity has focused on both developing the capacity of existing services and introducing new approaches to service provision. This has included a pilot project to explore a different model of homecare and a pilot with video capable technology aimed at delivering care in a different way and increasing social cohesion. Due to the new and exploratory nature of these projects, outcomes are being measured over a longer time frame and will be reported to the Better Care Fund Joint Management Group.
9. Additional provision
In 2017/18 £1.9m was invested to provide additional provision to support hospital flow and to mitigate for under capacity in the Home Assessment & Reablement Team. This provision included 30 care home beds to support people requiring larger packages of support at home; 10 beds for people awaiting a care home placement; and additional community reablement packages delivered by Oxford Health Foundation Trust.

2018/19 use of the Improved Better Care Fund

10. In addition to the current four areas of focus for the iBCF, proposed funding for the remaining iBCF in 2018/19 must address the following additional priority areas:
 - Clear oversight of the system outcomes from improving flow spend
 - Alignment of spend to support discharge to assess and reablement pathway to ensure that any underperformance in current pathway is alleviated
 - Alignment with system work supporting people who fund their own care.
11. It is therefore proposed that iBCF is apportioned as follows:
 - a. Market Capacity £1.8 - £2.0m
 - This area of spend includes the extension of system pilot projects expanding the capacity and capability of providers, with a focus on home care capacity supporting all aspects of the pathway.

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- Funding to support the implementation of changes to delegated healthcare tasks through developing skills in the home care market. Funding was allocated for spend in 2017/18 but the project was paused whilst adjustments were made to the scope of the work and is on target to deliver changes in 2018/19.
 - Funding to support the implementation of the short stay bed review. This work is reviewing the scope and efficacy of short stay beds which are commissioned as an intermediate care service and to support the reablement pathway.
 - We are also undertaking work to specifically consider the support provided to people who fund their own care, which is an area identified during the Local System Review undertaken in 2017 by the Care Quality Commission. Ensuring that we have the right support in place to help people who are funding their own care is an important area in ensuring flow and capacity across the system.
- b. Market resilience £1.8m
In this area we propose to continue the commitment to provider inflation for home care providers to support ongoing stability in the marketplace and maintain capacity through the system.
- c. Additional provision £0.6m
Costs to maintain 30 short stay beds for 3 months specifically to support the reablement pathway. This provision has formed part of the system work to review the short stay bed provision in care homes, to develop the most efficient and effective model for purchasing beds and supporting people on a pathway through these beds.

Recommendations

12. The Board is RECOMMENDED to review and endorse the Improved Better Care Fund plan.
13. The Board is RECOMMENDED to critically appraise and endorse the performance measures that are proposed to be used to ensure confidence in the effectiveness of the spend.

Annex 1 iBCF spend & outcome measures

iBCF spend area		Amount	Measure	Outcomes 2017/18
Improving flow	Social work capacity to support flow in the hospital system	£1.2m	<ul style="list-style-type: none"> - Intermediate care flow (baseline 20 discharges Aug – Oct 17) - Reablement Outreach Team reviews ((baseline 26 reviews April 2017) - Weekend ED admissions avoided - HUB discharges facilitated (baseline 123 3 months pre team manager) 	<ul style="list-style-type: none"> - 36 discharges Oct 17 – Dec 17 - 42 reviews on average per month - 43 Oct 16 – Feb 18 - 159 (3 months post team manager)
Market Resilience	Increased funding to home care providers	£1.206m	<ul style="list-style-type: none"> - Reduction in unplanned market exit (baseline 7 in 2016/17) - OCC capacity to purchase home care 	<ul style="list-style-type: none"> - 2 unplanned market exits - Static in 2017/19
	Increased funding care home providers	£0.488m	<ul style="list-style-type: none"> - No unplanned market exits (baseline 0 in 2016/17) - OCC capacity to purchase care 	<ul style="list-style-type: none"> - 0 unplanned market exits - Care home market is expanding in Oxfordshire
	Provision for supported living market's obligations regarding sleep ins.	£1.206m	<i>Tbc</i>	
Market capacity	Start up funding for Wellbeing Team	£0.1m	<ul style="list-style-type: none"> - Number of staff recruited from outside the sector - Number of pick ups from back door of HART - Number of packages delivered 	<i>Outcomes available from Q2 18/19 onwards</i>

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	COACH (video capable technology)	£0.05m	- Homecare hours avoided	<i>Outcomes available in 18/19</i>
	Recruitment of 4 Dementia Nurses to enhance the capabilities of care homes to support people with more complex dementia needs	£0.2m	- Number of homes supporting this cohort - Number of discharges facilitated - Number of admissions prevented	<i>Not spent – deferred to 2018/19</i>
	Embed changes to delegated healthcare provision with home care providers	£0.2m		<i>Not spent – deferred to 2018/19</i>
Additional provision	30 care home beds – HART mitigation		<i>Through put figures tbc</i>	
	10 interim beds for people awaiting a care home placement		<i>Through put figures tbc</i>	