

**Manchester Health and Wellbeing Board  
Report for Resolution**

**Report to:** Manchester Health and Wellbeing Board – 31 October 2018

**Subject:** Better Care Fund 2018/2019

**Report of:** City Treasurer, Manchester City Council  
Chief Finance Officer, Manchester Health and Care  
Commissioning

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**Summary**

The Better Care Fund (BCF) has been established by Government to provide funds to local areas to support the integration of health and social care. Section 75 of the National Health Service 2006 Act gives powers to local authorities and health bodies to establish and maintain pooled funds out of which payment may be made towards expenditure incurred in the exercise of prescribed local authority functions and prescribed National Health Service (NHS) functions.

The purpose of this report is to provide the Health and Wellbeing Board with an overview of the plan submitted for Better Care Fund 2018/19 and update on changes from the guidance released in July 2018.

**Recommendations**

The Board is asked to note the changes to the Delayed Transfers of Care monitoring and confirm the spending plan for 2018/19.

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**Board Priority(s) Addressed:**

<b>Health and Wellbeing Strategy Priority</b>	<b>Summary of contribution to the strategy</b>
Getting the youngest people in our communities off to the best start	The Better Care Fund supports the integration of health and social care. <ul style="list-style-type: none"><li>• To improve the health and wellbeing of people in Manchester</li><li>• To ensure services are safe, equitable and of a high standard with less variation</li><li>• To enable people and communities to be active partners in their health and wellbeing</li><li>• To achieve a sustainable system</li></ul>
Improving people's mental health and wellbeing	
Bringing people into employment and ensuring good work for all	

Enabling people to keep well and live independently as they grow older	
Turning round the lives of troubled families	
One health and care system – right care, right place, right time	
Self-care	

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**Background documents (available for public inspection):**

The following documents disclose important facts on which the report is based and have been relied upon in preparing the report. Copies of the background documents are available up to 4 years after the date of the meeting. If you would like a copy please contact one of the contact officers above.

- Integrated and Better Care Fund Operating Guidance for 2017-19 (July 2018) - Department of Health and Social care and Ministry of Housing, Communities and Local Government
- Report Better Care Fund and Improved Better Care Fund Submission 2017-19 – Health and Wellbeing Board 30 August 2017
- Integration and Better Care Fund planning requirements for 2017-19 (July 2017) - Department of Health and the Department for Communities and Local Government

- 2017-19 Integration and Better Care Fund: Policy Framework (March 2017) - Department of Health and the Department for Communities and Local Government
- GM UEC Planning Guidance 2018/19 – Letter to Manchester from Greater Manchester Combined Authority
- DTOC Targets 2018/2019 Apportionment - Manchester & Trafford Emergency Care Strategic Board (MHCC)

## **1. Introduction and Background**

- 1.1 Health and Wellbeing Board (HWB) received a previous paper on the 30th August 2017 detailing the guidance published by NHS England which describes the planning requirements for the 'Integration and Better Care Fund for 2017-19'. The HWB was advised of the national conditions for the receipt of funding, including the required metrics and timetables.
- 1.2 The Health and Wellbeing Board was asked to:
  - Support and approve the 2017-19 Better Care Fund Plan and Improved Better Care Fund Plan,
  - To confirm the national requirement that the proposed plan has been jointly agreed and
  - To delegate responsibility of the plan submission to the City Treasurer through the reform Board.
- 1.3 A refreshed operational guidance for approved BCF plans for 2017-19 was published in July 2018, re-confirming the framework for the ongoing requirements of the BCF as plans are implemented for 2017-19.
- 1.4 Areas are not required to revise BCF plans for 2018-19, other than in relation to metrics for Delayed Transfers of Care (DToC) as set out in Section 3.
- 1.5 In light of the refreshed guidance the Health and Wellbeing Board is asked to:
  - Note and endorse the changes made in relation to DToCs
  - Confirm the expenditure plan for 2018-19, as per the previous report of 30<sup>th</sup> August 2017
- 1.6 Greater Manchester has applied for graduation from BCF on behalf of the ten localities. Graduation would remove the requirements for formal planning submissions and reduced reporting to NHS England. Instead a process of self-certification would be undertaken.
- 1.7 The Previous Health Secretary announced that the design of the BCF in future would be reviewed and announced alongside the NHS Long Term Plan. This review will consider more fundamental changes from 2020, but is also considering the approach to 2019-20. As it stands there isn't a decision on how to approach graduation 2019-20 and therefore there has been no progress with regards to the Greater Manchester application.
- 1.8 A further report will be provided to the Board in the summer of 2019 outlining a reflective assessment of the impact of the 2017/19 Better Care Fund in Manchester.

## **2. Better Care Fund (BCF) Plan 2017-19**

- 2.1 The financial values for the 2017-19 plans match those seen by Health and Wellbeing Board in August 2017, plus the additional Disabled Facilities Grant

(DFG) announced in the autumn statement 2017. The below table shows the submitted expenditure plans for 2017–19 for the BCF:

Service Description	CCG	Council	TOTAL	CCG	Council	TOTAL
	2017/18	2017/18	2017/18	2018/19	2018/19	2018/19
	£'000	£'000	£'000	£'000	£'000	£'000
Adult Community Services	41,309	6,457	47,766	41,722	6,457	48,179
Care Act	1,560	-	1,560	1,590	-	1,590
Protection of Social Care	12,652	-	12,652	12,893	-	12,893
Integrated Community Teams	702	-	702	709	-	709
Non Elective Reserves	-	-	-	-	-	-
Reablement	13,920	2,419	16,339	14,059	2,419	16,478
<b>Sub Total</b>	<b>70,143</b>	<b>8,876</b>	<b>79,019</b>	<b>70,973</b>	<b>8,876</b>	<b>79,849</b>
Care Act	-1,560	1,560	-	-1,590	1,590	-
Protection of Social Care	-12,652	12,652	-	-12,893	12,893	-
Adult Social Care Grant	-	12,917	12,917	-	7,644	7,644
Improved Better Care Fund	-	3,265	3,265	-	14,762	14,762
Disabled Facilities Grant	-	7,008	7,008	-	6,928	6,928
<b>TOTAL</b>	<b>55,931</b>	<b>46,278</b>	<b>102,209</b>	<b>56,490</b>	<b>52,693</b>	<b>109,183</b>

2.2 The below table shows the Improved BCF funding available to the locality over the planning period (2017-19) and the proposed investments to be made:

Funding Source	Budgets	Budgets
	2017/18	2018/19
	£'000	£'000
Adult Social Care Grant	12,917	7,644
Improved Better Care Fund*	3,265	14,762
<b>Total</b>	<b>16,182</b>	<b>22,406</b>

\*Confirmed as part of ASC baseline before announcement of ASC grant

### 3. Delayed Transfers of Care (DToC)

- 3.1. 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.
- 3.2. The 2018-19 NHS planning guidance to CCGs and NHS Trusts also set an expectation that local health and social care commissioners will work together to reduce delays to the equivalent of around 4,000 daily delays.
- 3.3. Based on this national ambition, The GM Better Care Fund expectations for 2018-19 have been published and provide ambitions for September 2018 for DToC bed days, on a GM aggregate basis.
- 3.4. The baseline for Q3 2017/2018 is reported as, on average, 286 beds occupied per day across the Greater Manchester Health and Wellbeing Board footprint.

- 3.5. The stated ambition is to reduce the average daily DToC beds to 211.5 across GM but there is further ambition to achieve a reduction to 200 bed day delays by December 2018.
- 3.6. This target ambition of 200 bed day delays has been apportioned and allocated to individual HWB by GM Partnership, based upon mid 2017 ONS populations. For Manchester this equates to 41 beds per day.
- 3.7. 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 (HICM). 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.
- 3.8. Additionally, we are expecting that a revised guide on counting DTOC will be published in the coming months for implementation in October 2018. Organisations are to be aware that this may have a potential impact on the reported position across all sites.

#### **4. BCF 'Graduation'**

- 4.1 The GMH&SCP has applied for graduation from BCF on behalf of the 10 localities. GM locality plans seek to progress a wider and deeper integration of services than BCF plans alone would require and pooling budgets beyond the scope of the BCF as part of their health and social care integration plans.
- 4.2 Graduation would remove the requirements for formal planning submissions to the BCF team, and reduced reporting. Instead a process of self-certification would be undertaken. The GM Partnership is still awaiting an outcome regarding the application.
- 4.3 NHS England hopes that a first wave of shortlisted areas eligible for graduation from the Better Care Fund will be confirmed in 2018-19. National partners would then work with shortlisted areas to test readiness for full graduation and co-produce what a meaningful graduation model would look like, including agreement of a memorandum of understanding with graduate areas, setting out the BCF requirements that will be removed or relaxed and any expectations of graduate areas, including:
  - Participation in learning events
  - Commitment to work with BCF national partners to develop models of integration, informing development of Integrated Care Systems and the health and care integration agenda.
  - Areas for improvement – for instance on specific metrics
  - Expectations for light touch self-certification process.

## **5. Recommendations**

- 5.1 A further report will be provided to the Board in the summer of 2019 outlining a reflective assessment of the impact of the 2017/19 Better Care Fund in Manchester.
- 5.2 The Health and Wellbeing Board are asked to:
  - Note and endorse the changes made in relation to DToCs
  - Confirm the spending plan for 2018-19, as per the previous report of 30<sup>th</sup> August 2017