

 Brent NHS North West London	Brent Health and Wellbeing Board 23 July 2023
	Report from Brent Integrated Care Partnership (ICP)
23/24 BCF and ASC Funding Update	

Wards Affected:	All
Key or Non-Key Decision:	N/A
Open or Part/Fully Exempt:	Open
No. of Appendices:	None
Background Papers	None
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1.0 Purpose of the Report

1.1 BCF Overview

The Better Care Fund (BCF) programme supports local health and care systems to successfully deliver the integration of health and social care in a way that supports person-centred care, sustainability and better outcomes for people and carers.

BCF helps local areas plan and implement integrated health and social care services across England, in line with the vision outlined in the NHS Long Term Plan. The programme spans both the NHS and local government to join up health and care services, so that people can manage their own health and wellbeing and live independently in their communities.

Launched in 2015, the programme established pooled budgets between the NHS and local authorities, aiming to reduce the barriers often created by separate funding streams. The pooled budget is a combination of contributions from the following areas:

- NHS minimum allocation from Integrated Care Systems (ICSs)

- Disabled Facilities Grant – local authority grant
- Social Care funding (improved BCF) – local authority grant
- Discharge funding grant (added in 23/25 plan)

The funding contribution in 22/23 and 23/24 are as follows:

	22/23	23/24
Total Local Authority (LA) Minimum Contribution	£5.3 m	£ 5.3 m
iBCF Contribution	£13.3 m	£13.3 m
NHS Minimum Contribution	£25.8 m	£27.3 m
Additional North West London (NWL) ICB Contribution	£71 k	£1.5 m
LA Discharge Funding	£1.1 m	£1.8 m
NWL ICB Discharge Funding	£1.1 m	£1.6 m
Total BCF Pooled Budget	£44.6 m	£51 m

1.2 The purpose of the report is to inform the board of the items below:

- Overview of where we are with our current 23/25 BCF plan
- Brent ICP's Principles to NWL ICB BCF Finance Review
- Discharge Funding as part of 23/25 BCF Plan including new schemes
- NWL ICB BCF review and governance for 23/25

2.0 Recommendation(s)

2.1 It is recommended that the group notes the BCF related risks and the ICP approach to NWL ICB 24/25 BCF Review.

3.0 Detail

3.1 Overview or Current 23/25 BCF Plan and Submission

3.1.1 Due to NWL ICB finance review of BCF funding, Brent LA and NWL ICB were unable to submit our 23/25 plan by the national deadline of 28th June. This resulted in an escalation process by the national team. However, this has since been deescalated due to the agreement between the two parties.

3.1.2 The Brent ICP's initial concerns were about not having opportunity to jointly agree the principles and the terms, including timelines, of the finance review. However, both parties have agreed on having jointly agreed principles before any decision about funding is made. Brent's proposed principles for the BCF review are further detailed in Section 3.2.

3.1.3 The funding in question regards schemes that were removed from the NHS Minimum Contribution to Additional Contribution or other sources, putting those schemes 'at risk' in 2024/25. Please note that various schemes were moved to the "minimum contribution" to make up for the £27.3 million stated

above. The schemes that were removed from the Minimum Contribution are as follows:

Schemes	Funding
Rehabilitation and Reablement following bedded rehab	£416,000
Transformation Team	£270,000
Integrated care, planning and navigation (Whole System Integrated Care Contracts)	£2,140,496
Reablement - Supporting additional discharges in the Rapid Response team	£550,000
Step Down Beds	£250,000
Total	£3,626,496

3.2 Brent ICP's Principles to NWL ICB BCF Review

The following are the draft Brent ICP's proposed set of principles to put forward to NWL ICB for the BCF Review. NWL ICB and LA colleagues, including Directors of Adult Social Care and ICP Managing Directors are committed to collaborate and agree on the principles and approach for the BCF review before it takes place.

- Any agreed changes to funding must prioritise improvement and equity in access and outcomes for our residents.
- All agreed changes must have a well-defined transition plan that mitigates risks and ensures the sharing of financial risks among partners.
- Funding must be based on population needs in line with the Levelling Up strategy and must uphold our objective of improving health inequalities.
- Although we aim to achieve a degree of uniformity across NWL, borough, the shape of local Brent service delivery, population needs and funding flows must be a key part of decision making and priorities
- A joint approach to investment on supporting people to live independently and to return home as soon as possible if hospital admission is required through home based Rehab and Reablement and step-down service provision is a key element to delivering the right capacity at the right time and achieving good outcomes for Brent residents and ensuring continuity of care and support.
- An integrated approach to transformation across health and social care which is focused on measuring financial benefits, equity of access and the experience of people in Brent is an important feature of the delivery of the Better Care Fund ambitions going forward.
- No decision should be taken about the spend on Whole System Integrated Care Contracts in advance of the outcome of the NWL review of the Frailty Service. However, BCF is not just about the Frailty Service.
- A robust Brent resident engagement, Inequality Equality and Health Inequality Impact Assessment (EHIA), and Quality Impact Assessment (QIA) must be completed for any change in service provision resulting from a reduction in spend.
- It is crucial to understand any impact of funding changes to the amount of money that is available to meet the Care Act 2014 duties of the local

authority, and that health, social care and the wider system is not destabilised financially by any changes in any single organisation

3.3 Discharge Funding

3.3.1 There are 3 ASC Discharge Funding streams as part of 23/25 BCF:

- Stream 1 – NHS minimum contribution uplift of 5.66%: £512,782 (recurrent)
- Stream 2 - ASC Discharge Funding – Direct Allocation to LA Brent: £1.8mil (non-recurrent post 24/25)
- Stream 3 - ASC Discharge Funding – NWL ICB Allocation to Brent (non-recurrent post 24/25): £1.6mil

3.3.2 Brent ICP partners, including London North West University Healthcare Trust (LNWHT), Central London Community Healthcare NHS Trust (CLCH), and Central and North West London NHS Foundation Trust (CNWL), and Brent LA have come together to jointly develop winter schemes to ensure a local system approach of managing patient flow effectively. In addition to establishing the winter schemes, ICP partners have established a robust process of monitoring, reviewing and assessing these schemes to ensure positive outcomes for both Brent residents and the Health and Social care system in Brent.

3.3.3 A number of our winter schemes are from the success of the piloted and implemented 22/23 schemes. In addition, ICP colleagues have actively developed new schemes for the additional 5.66% NHS minimum contribution uplift, to ensure health and wellbeing outcomes for Brent residents, prevent hospital admissions and support residents post discharge.

3.4 Next Steps for NWL ICB BCF Review and Governance

3.4.1 NWL ICB is proposing the governance for approving the BCF (at NHS) to be via NWL Integrated Care System Strategic Committee whilst BCF still needs to be approved at the Health and Wellbeing Board in each borough.

3.4.2 The following timetable below provides key dates ahead of the 23/25 BCF submission on **July 31st 2023**:

Action	Date	Lead
Final Planning completed templates and narrative templates due back for local care/finance review	19/07/23	Local Care/ ICB Finance
Local care/ ICB finance will feedback comments for above submissions	21/07/23	Local Care / ICB Finance
LA/ICB borough lead to submit by 31 st July to the NHSE National Team	31/07/23	LA/ ICB Borough lead

3.4.3 It should be noted that the NWL ICB BCF review process will resume after the 31st July submission. The review will include representation from each LA, and Brent ICP's principles as stated in Section 3.2 will be raised in advance of the meeting. Please note that the NWL ICB BCF Review will also include iBCF and Disabled Facilities Grant (DFG) as per NWL ICB's principles.

4.0 Financial Implications

4.1 The table presented under section 3.1.4 highlights the schemes that are now sitting outside the core BCF schemes, and therefore, they are potentially subject to the NWL ICB review.

5.0 Legal Implications

5.1 N/A

6.0 Equality Implications

6.1 None

7.0 Consultation with Ward Members and Stakeholders

7.1 Schemes have been worked through and agreed by ICP stakeholders.

8.0 Human Resources/Property Implications (if appropriate)

8.1 N/A

Report sign off:

Helen Coombes
Corporate Director Care, Health & Wellbeing