



18th March 2022

North Yorkshire Better Care Fund (NY BCF) 2021/22 Summary Narrative

Report of the Director of Public Health

1. Executive Summary

The North Yorkshire Better Care Fund constitutes a major programme of joint investment between North Yorkshire County Council and three partner Clinical Commissioning Groups (North Yorkshire CCG, Bradford District and Craven CCG and Vale of York CCG). Investment covers a broad range of providers, including both the statutory and voluntary/charitable sectors. The purpose of this paper is to outline the overall scope in 2021/22, highlighting the main areas of development and transformation.

The plan and narrative contains 59 projects, with total funding of £75.5m across each of the Districts, to support a wide range of initiatives and this has been sent to Members for information and has been approved by the Chair and Vice Chair on behalf of the Health and Wellbeing Board.

Looking ahead, work on the Plan for 2022/2023 has commenced and this will be brought to the Board for sign off by January 2023.

2. Development priorities for 2021-22:

The BCF Plan includes a range of developments and improvements associated with different funding streams as follows:

- Discharge to assess improvements based on the national policy, particularly length of stay and discharge to usual place of residence
- Strengthening VSCE as a system partner through Community First Yorkshire
- Retendering key services provided by the VSCE sector
- Care market
- Frailty Service Development
- Crisis response service development to reduce avoidable admissions
- Telemedicine support to Care Homes through Immedicare
- Improving response times within the community equipment services
- Integrating York urgent care practitioner scheme with primary care
- Prevention and addressing inequalities
- Mental health and dementia

3. Previous BCF objectives, plans and progress (based on 2019/20 planning)

The previous development plan for Integrated Care across North Yorkshire inclined towards the delivery of Integrated Service Models wrapped around newly formed Primary Care Networks to support people to access care in the right place at the right time.

To coordinate interventions that support people identified with complex care needs, a multidisciplinary team (MDT) approach is considered best practice to ensure timely, holistic individualised care and to agree a plan of action based on intended outcomes for the patient. North Yorkshire Clinical Commissioning Group have actively worked with provider partners to encourage the use of this approach, producing a guide suggesting how an MDT meeting could be organised. Through the HRW frailty pathway meetings, identified patients are discussed at Multi-Agency Meetings led by GPs monthly. HARA and HTFT are realigning their current approach to MDT meetings to identify the population cohort which will benefit most from proactive care in the community.

4. Engagement with partners

The Better Care Fund underpins much of the North Yorkshire approach to collaborative commissioning and integration. The BCF plan is a product of both specific engagement work to produce the plan itself, particularly to confirm priorities, financial contributions and metrics, supported by a broader programme of engagement on the core responsibilities.

The wider content of the plan is drawn from organisational plans and joint programmes of work from the partner organisations for community development and integration, supported by a broader programme of engagement and partnership working, in particular with the VCSE. While this work is not limited to the content of the BCF, it is consistent with and helps to inform the BCF aims and objectives.

5. Approaches to joint / collaborative commissioning

North Yorkshire County Council and its CCG partners have established a number of Groups and Boards to facilitate joint and collaborative commissioning. While these are not exclusively designed to manage the BCF, they do provide effective forums to discuss and develop commissioning plans related to services included within the BCF. In addition, BCF will be a key enabler to managing system pressures this winter and these forums will ensure that BCF services are responsive to emerging pressures and solutions, including responding to further guidance from NHS England.

6. Health and Care Management Group

As part of the transition towards moving towards an integrated care system while maintaining and building on existing arrangements, a new health and care management group across NHS and local government has been established in North Yorkshire, which will provide a strategic oversight to joint and collaborative commissioning. This consists of Director level membership between North Yorkshire CCG and North Yorkshire County Council, and attendance by key officers as appropriate. The content of the BCF and the associated plan are reviewed through this newly formed Group. Housing is not routinely represented on this group, but there are opportunities through regular meetings between North Yorkshire CCG, North Yorkshire County Council and Borough colleagues for housing input to be sought.

7. Equality and health inequalities

North Yorkshire has an increasingly aging population with rural deprivation, and the majority of BCF investment is therefore aligned with the challenges associated with this. A system workshop was held to review identify the priorities across North Yorkshire for Population Health, Prevention and Inequalities. The following headline priorities were identified:

- Supporting with a 3-4 D model around person, place and age group
- Community partnerships – building grass roots engagement at local places
- Addressing the rural geography of North Yorkshire
- Addressing the wider determinants of health – for example: school readiness, deprivation, housing, homelessness, carers, veterans, hypertension, alcohol use

- Tackling dementia / complex dementia – to reduce inequality of outcomes
- Young peoples' mental ill health
- Proactive management of frailty (including in younger people) and long-term conditions, such as diabetes, CVD, stroke, and respiratory disease
- Reaching the BAME population – including tackling exclusion and support in relation to diet, nutrition, drugs, alcohol, taking a more preventative approach

8. Supporting Discharge

Funding for health and social care community staff who support discharge is included within the overall BCF. However, during 2021/22, this is augmented by a National Discharge Fund, which meets the cost of a person's new or enhanced health and care needs post discharge for up to 4 weeks, and funds enhanced care services. Significantly, this fund also supports people who self-fund their own care, where previously they would have contributed to the cost of their own care post discharge.

In response to the National Discharge Policy, North Yorkshire and York (NYY) partners have agreed a revised operating model focussing on the principles of a 'Home First' approach which centred around discharge Command Centres for each of the main acute sites of, York, Harrogate, Airedale, South Tees, and Scarborough. Due to the complexities of having multiple providers across NYY, the 'Home First' approach has been developed across NYY via a series of providers' conversations and self-assessment exercises, informed by the Integration and BCF.

9. Metrics and performance

North Yorkshire County Council in partnership with CCGs tracks discharge performance through a detailed weekly report. This tracks progress against delivering the national target to discharge 12% or less patients within 21 days. Due to the significant pressures within the current system and capacity gaps within the broader care market and community services, current performance against this target for this age group is around 16% (based on NHS England data-packs provided to North East & Yorkshire Region CCGs). This data-set will have slightly different filters to the BCF national data-set.

The intention is to improve performance during autumn / winter 2021/22 by addressing workforce and other system pressures. For example, there is ongoing work to: integrate the health and social care workforce to increase resilience and reduce duplication; combining OT teams to pool work and resources and develop combined OT apprenticeship roles; development of generic health and care support worker roles for community settings; and increased placement capacity for nurse associate and nurse apprenticeship roles in Residential Care.

10. Development and improvement plans for specific BCF-funded services

The BCF includes an extensive and broad range of services. While the delivery of some schemes and services will continue as in previous years, many areas of the BCF are subject to development and review during 2021/22. This will inform and contribute to plans in development for 2022/23.

- Strengthening VSCE as a system partner through Community First Yorkshire
- Retendering key services provided by the VSCE sector
- Care market.
- Frailty service development
- Crisis response service development
- Telemedicine support to Care Homes through Immedicare
- Improving response times within the community equipment services
- Integrating York urgent care practitioner scheme with primary care

- Prevention and addressing inequalities

11. Disabled Facilities Grant (DFG) and wider services

North Yorkshire County Council is a tier one council and as such, DFG support is passed through directly to the District Councils.

District Councils continue to be engaged in the development and implementation of the Plan through representation on the Health and Wellbeing Board (Chief Officer and Council Leader representation) and on Locality Transformation boards. Work has continued with District Council housing officers to develop a more strategic and joined-up approach to improving outcomes across health, social care and housing through the DFG and BCF programme. Use of DFG generally is used to support persons to stay safe, well and maintain independence in their own home. North Yorkshire County Council and Borough Council colleagues work collaboratively, and on undertaking a needs assessment, North Yorkshire County Council may refer to a Borough Home Improvement Agency (HIA). The HIA will assess the work, obtain quotations, approve grant applications in line with Section 19 of the Housing Grants, Construction and Regeneration Act 1996, which excludes extra care settings, and oversees the adaptation process to meet the person's needs.

12. Conclusions

The range of work described in the BCF plan and the associated integrated approaches to commissioning and service delivery demonstrate the commitment of all local partner organisations to the successful utilisation of the BCF.

The BCF plan and supporting financial template serves as a refresh and consolidation of a huge programme of work, which has been both interrupted and accelerated through the Covid pandemic response. It provides an effective platform to deliver improvements in 2021/22 and to prepare for further evolution of the BCF in 2022/23.

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Background papers relied upon in the preparation of this report:

The report is a summary of the BCF submission and based upon the financial template and narrative.