

Better Care Fund (2023-25) Submission Update 15th March 2024

Health and Wellbeing Board
North Yorkshire



National Conditions

The BCF Policy Framework for the two-year period 2023-25 sets out four national conditions that all BCF plans must meet to be approved. These are:

1. A jointly agreed plan between local health and social care commissioners and signed off by the Health and Wellbeing Board (HWB).
2. NHS contribution to adult social care to be maintained in line with the uplift to NHS minimum contribution.
3. Invest in NHS commissioned out-of-hospital services.
4. Implementing the two BCF policy objectives.

Compliance with the national conditions will be confirmed through the planning template and narrative plans. Spend applicable to these national conditions will be calculated in the planning template based on scheme-level expenditure data.

National Conditions (2)

One of the findings from the 2018 BCF review was to provide clearer and more focused objectives for the BCF that address wider system and prevention outcomes through co-ordination of services.

The two objectives for 2023-25 BCF are:

- i. Enable people to stay well, safe and independent at home for longer.
- ii. Provide the right care in the right place at the right time.

The four National Conditions of the BCF have been amended to reflect these two objectives and now requires HWB areas to agree an approach within their BCF plan to make progress against these objectives in 2023-25.

Submission time-line

Action	Date due by	Achieved
BCF planning requirements published	5 April 2023	✓
Optional draft BCF planning submission submitted to BCM	By 19 May 2023	✓
BCF planning submission from local HWB areas (agreed by ICBs and local government).	19 July 2023	✓
Scrutiny of BCF plans by regional assurers, assurance panel meetings and regional moderation	28 June to 28 July 2023	✓
Approval letters issued giving formal permission to spend (NHS minimum)	18 September 2023	✓
All section 75 agreements to be signed and in place	31 October 2023	☒

Contributions from:

- ❑ NHS Humber and North Yorkshire ICB
- ❑ NHS Lancashire and South Cumbria ICB
- ❑ NHS West Yorkshire ICB

Priorities 2023-25:

The NY BCF constitutes a major programme of joint investment between North Yorkshire Council and the NHS via the three Integrated Care Boards (ICB). The integrated delivery of the Better Care Fund remains a key driver for the commissioning and improvement of integrated services across North Yorkshire.

Priorities for 2023-25:

The head-line priorities for NY are included in a Place Board Plan as follows:

- Priority 1 - A comprehensive and integrated health and social care model
- Priority 2 - A high quality care sector, with sufficient capacity to meet demand
- Priority 3 - A strong workforce
- Priority 4 - Prevention and Public Health

Priority 1 2023-25 (2)

Priority 1 - A comprehensive and integrated health and social care model

WHAT DOES GOOD LOOK LIKE:

- Increase in people living independently or managing safely at home/care setting.
- Increased care provided closer to home, with a sufficiency of supply of community health and social care services.
- Reduced need for acute beds for urgent care and for 24/7 residential and nursing beds.
- Significantly reduced delayed discharges into community care (whether nursing, residential or domiciliary care).
- Acute delivery operating much more in the community, coexisting with primary and social care.
- Partnerships that understand and respond jointly to the needs of their communities.
- People are supported to live in a broad range of housing that meets their circumstances.

Priority 1 2023-25 (3)

Priority 1 - A comprehensive and integrated health and social care model

KEY ACTIONS:

- Ensure a greater emphasis on self help, prevention and population health management (PHM).
- Develop a model for community health and social care which addresses sufficiency, comprehensiveness and skill mix, as well as integration.
- Develop a consistent model for intermediate care.
- NHS, local authority and other partners to develop integrated models of care, e.g. strong multi disciplinary teams and consistent 'any door' access.
- Develop alternative services in or near Emergency Depts urgent community response, virtual wards
- Strengthened role for the VCSE.
- Supporting Enhanced Health in care homes and joint work through the
- Quality Improvement Team to improve responsiveness and quality.

Priority 2 2023-25 (4)

Priority 2 - A high quality care sector, with sufficient capacity to meet demand

WHAT DOES GOOD LOOK LIKE:

- Increase in people living independently.
- Higher recruitment and retention levels across health and social care.
- A care market sustainable for providers and affordable for commissioners and service users.
- Reduced reliance on acute beds and 24 hour nursing/residential care Home First approach.
- Enhanced community capacity that can flex to prevent avoidable hospital admissions and facilitate timely hospital discharge.

Priority 2 2023-25 (5)

Priority 2 - A high quality care sector, with sufficient capacity to meet demand

KEY ACTIONS:

- Shaping the care market through the transformation of Approved Provider Lists consider impact of social care funding levy and cap.
- Recruitment and retention of care staff through attractive pay, training and career development.
- Develop innovative models for domiciliary care
- Undertake fair cost of care exercises for domiciliary care and implement actual cost of care for residential /nursing care to deliver a sustainable care market.
- Work with care providers to implement the national charging reforms for adult social care and the next phase of the NHS discharge pathway.

Priority 3 2023-25 (6)

Priority 3 - A strong workforce

WHAT DOES GOOD LOOK LIKE:

- Sufficient trained and motivated staff to meet demand through:
- Positive narratives about the various different roles and professions.
- Increasing numbers of people being recruited.
- Range of innovative, possibly even joint funded, posts to help bridge gaps and/or break down silos (e.g. part primary care / community, or part health / social care).
- High recruitment and retention levels of all care staff.

Priority 3 2023-25 (7)

Priority 3 - A strong workforce

KEY ACTIONS:

- Develop more balanced/varied roles and better work/life balance, wellbeing support, appropriate rewards.
- Develop innovative approaches to recruitment.
- Develop innovative workforce models.
- Innovative use of technology to support staff.
- Identify opportunities for cross sector working and roles.
- Support international recruitment across sectors.

Priority 4 2023-25(8)

Priority 4 - Prevention and Public Health

WHAT DOES GOOD LOOK LIKE:

- Narrowing of the gap in health inequalities between the least deprived areas compared with the most deprived areas across North Yorkshire.
- Increase in overall healthy life expectancy across the County.
- Narrowing of the gap in healthy life expectancy between the people in the least deprived areas compared with those in the most deprived areas across North Yorkshire.
- Having a clear, resourced strategic plan with dedicated staff to implement.

Priority 4 2023-25(9)

Priority 4 - Prevention and Public Health

KEY ACTIONS:

- Commission and provide high quality, accessible prevention and primary care services.
- Support people to maintain good mental health with timely access to effective primary, secondary and specialist services when needed.
- Support people to be physically active across all ages and stages of the life course.
- Influence through the strength of the partnership the wider determinants of health with a particular focus on coastal communities.
- Promote and invest in stronger communities and strategic commissioning of the VCSE.
- Engage with people in a dialogue about self care, early help, loneliness and using digital tools.

Priority development 2023-25

In respect of BCF specifically, the following areas represent priority areas for development over the next 2 years:

1. Development of Local Care Partnerships supported by locality-based plans;
2. Strengthened multi-disciplinary working and the development of neighbourhood teams;
3. Development of a population health management approach to address health inequalities;
4. Development of a new integrated model of intermediate care that will support both admission avoidance and expedite discharge from hospital;
5. Strategic review of integrated VSCE commissioning as true system partners;

Priority development 2023-25 (2)

6. Strengthened approach to collaborative commissioning, including comprehensive review of all existing partnership agreements given that both North Yorkshire Council and Humber and North Yorkshire ICB are new organisations;
7. Strengthened care market with closer collaborative commissioning for packages of care between the Local Authority and Continuing Healthcare;
8. Improved systems and processes for prescribing community equipment;
9. Continued support for unpaid carers, including recommissioning of Carers Break Sitting Services; and
10. Review of delivery of the Disabled Facilities Grant and wider services.

Key changes since previous plan:

- The BCF Plan has been revised to include additional expenditure and reflect up-dated spend, including inflation uplift where appropriate;
- New aspirations have been included for the revised BCF metrics;
- Development priorities and actions have been revised to reflect the current work programme, particularly to reflect Place Board priorities and plan;
- North Yorkshire County Council has merged with its District and Borough Councils to create a single unitary authority, North Yorkshire Council; and
- The Disabled Facilities Grant is therefore no longer passed through and is managed by the new authority.

2023/24 BCF budget

	2023/24
Funding Sources;	
DFG	£5,114,924
Minimum NHS Contribution	£48,759,576
iBCF	£17,328,446
Additional LA Contribution	£0
Additional NHS Contribution	£0
Local Authority Discharge Funding	£2,429,421
ICB Discharge Funding	£3,517,496
Total	£77,149,863

2024/25 BCF budget

	2024/25
Funding Sources;	
DFG	£5,114,924
Minimum NHS Contribution	£51,519,368
iBCF	£17,328,446
Additional LA Contribution	£0
Additional NHS Contribution	£0
Local Authority Discharge Funding	£4,032,839
ICB Discharge Funding	£4,928,484
Total	£82,924,061

Delegated Authority

To enable the continued support, maintenance and reporting of the Better Care Fund the Health & Wellbeing Board continues to agree that the local authority's Public Health Director has delegated authority to agree plans on behalf of the board.

Questions and support documents



Microsoft Word
Document

2023-25 BCF Narrative



Microsoft Excel
Worksheet

2023-25 BCF Finance Template



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2023/24 Quarter 2 monitoring report



Microsoft Excel
Worksheet

2023/24 Quarter 3 monitoring report

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