

London Borough of Enfield

Report Title	Health & Wellbeing Board update
Report to:	Health & Wellbeing Board
Date of Meeting:	6 th October 2024
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Summary

This report is to update Health and Wellbeing Board on the Enfield 2023-25 Better Care Fund (BCF) plan.

The report has been consulted with the Chair of HWB prior to the HWB meeting.

Under the BCF, local authorities and NHS Integrated Care Boards are required to enter into annual pooled budget arrangements and agree an integrated spending plan for the BCF funding.

Details for the minimum contributions to the BCF for 2023 to 2025 are set out below. This includes the additional £1.6 billion funding for supporting hospital discharge.

Table 1: minimum contributions to the BCF in 2023 to 2024 and 2024 to 2025

BCF funding contributions	2023 to 2024 (£m)	2024 to 2025 (£m)
Minimum NHS contribution	4,759	5,029
Improved Better Care Fund (iBCF)	2,140	2,140
Disabled Facilities Grant (DFG)	573	573
Discharge funding	600	1,000
Grand total	8,072 (+4.6%)	8,741 (+8.3%)

Table 1

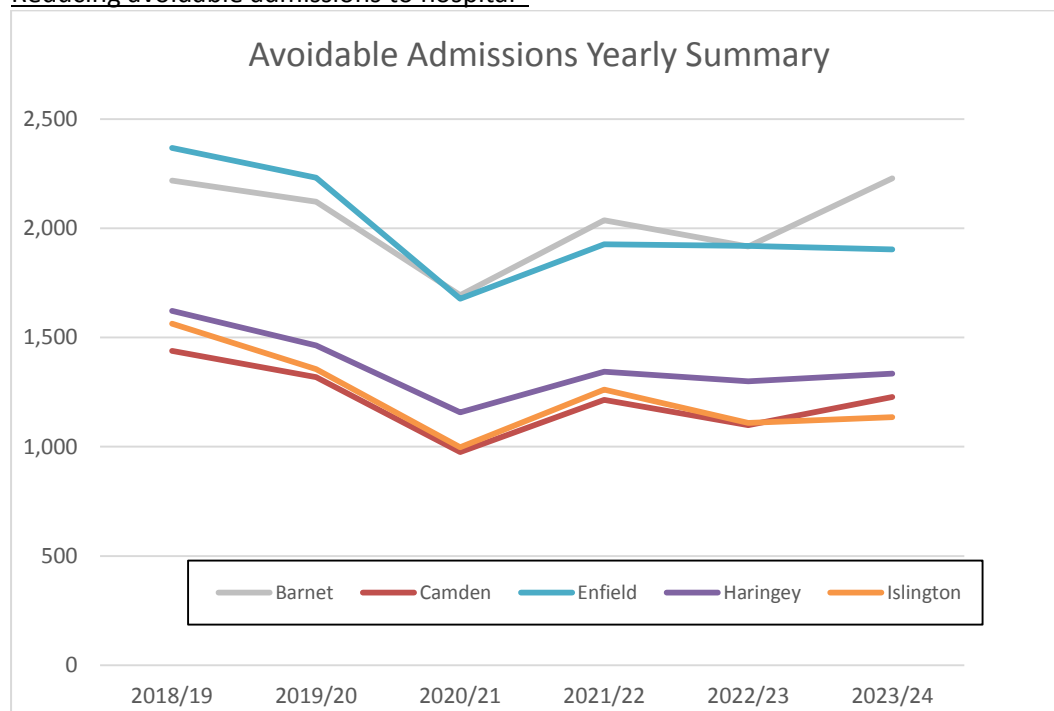
The total allocation for Enfield BCF in 2024-25	£ 49 million
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This report provides an overview of the two-year (2023-25) BCF Plan, which continues to act as a strategic enabler in the development of the Enfield Integrated Care Partnership (ICP).

The plan includes proposed local targets for the national BCF metrics that measure the performance of the integrated health and care system. The targets represent an ambitious aim to continue with the post-pandemic recovery and have been developed in partnership with social care and ICB colleagues. Below is an update on the metrics achieved for 2023 /2024

Metric 1

Reducing avoidable admissions to hospital



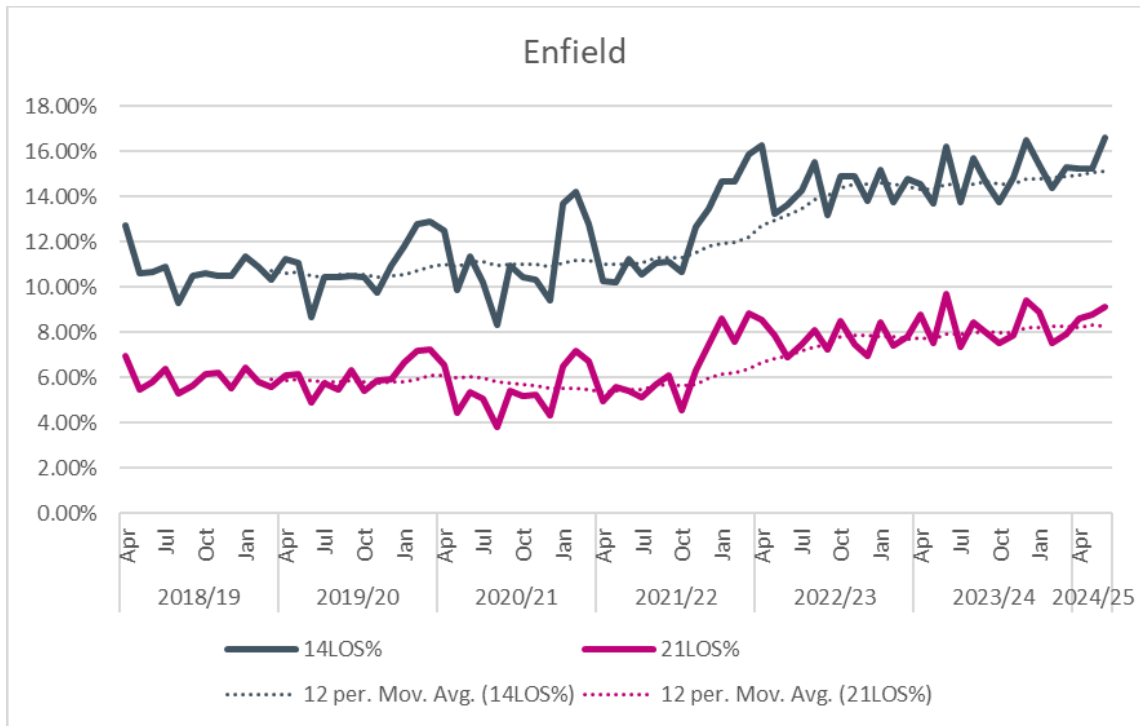
Yearly Summary

Local Authority	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24
Barnet	2,219	2,121	1,693	2,037	1,917	2,228
Camden	1,438	1,319	975	1,214	1,099	1,228
Enfield	2,368	2,232	1,678	1,926	1,920	1,903
Haringey	1,622	1,463	1,157	1,343	1,300	1,334
Islington	1,564	1,355	997	1,261	1,109	1,135

Avoidable Admissions are on a downward trend within Enfield, although at nearly 2,000 in 2023-24 are still too high. The trend in Enfield reflects that of the NCL generally. As you would expect, Enfield and Barnet have the most avoidable admissions across the NCL (being the two boroughs with the largest populations), although Enfield now has smaller levels than Barnet whereas in previous years, we have been the higher borough.

Metric 2

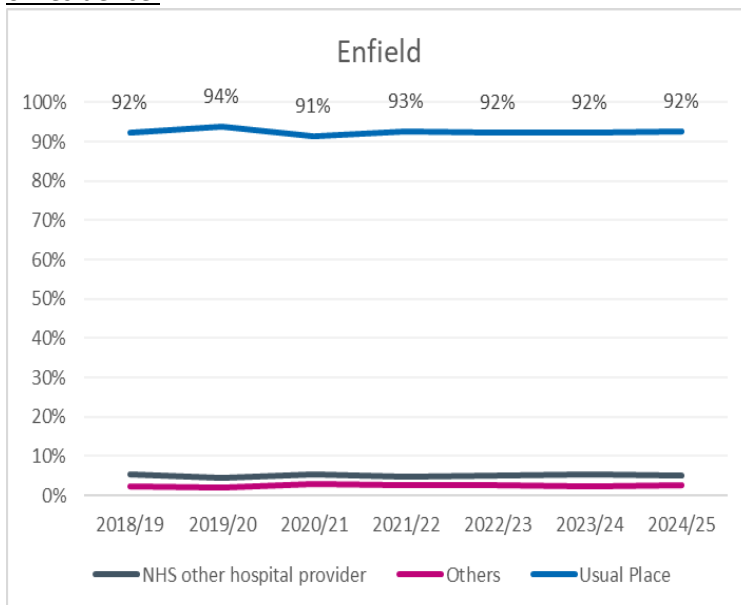
Reducing the proportion of people whose length of stay in an acute hospital bed exceeds both 14 and 21 days



The length of stay in hospital beds that exceeds 14 and 21 days is increasing across the NCL, particularly since the end of 2021-22, with similar trends seen in all five boroughs. Enfield consistently ranks third of the five boroughs, having higher rates than Barnet and Camden, and lower than Haringey and Islington.

Metric 3

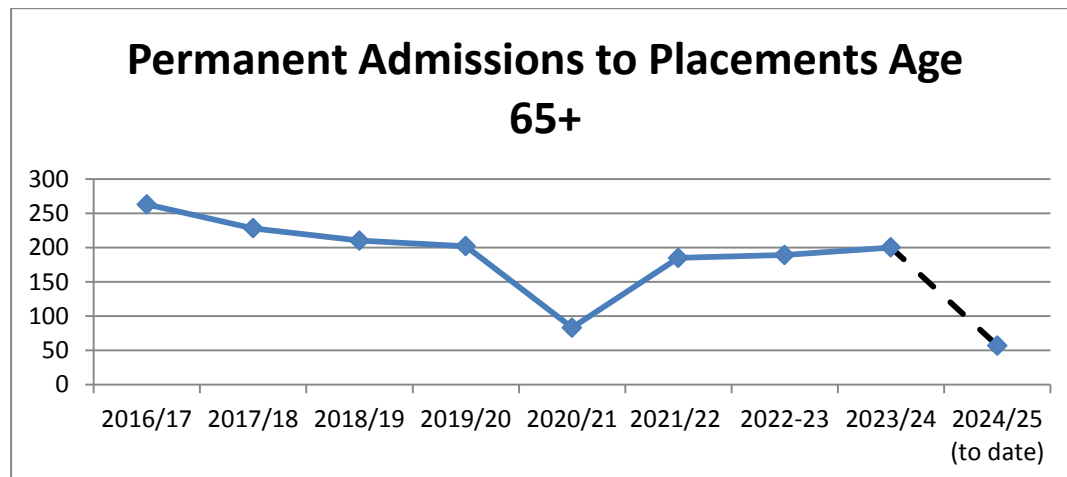
Increasing the proportion of people who are discharged from hospital back to their usual place of residence



Discharge to the usual place of residence has hovered around the 92% mark for several years now, although the trend over the last few years has been slightly downward. Enfield broadly mirrors the NCL average with end of year figures for 2022-23 of 92.3% (Enfield) and 92.5% (NCL)

Metric 4

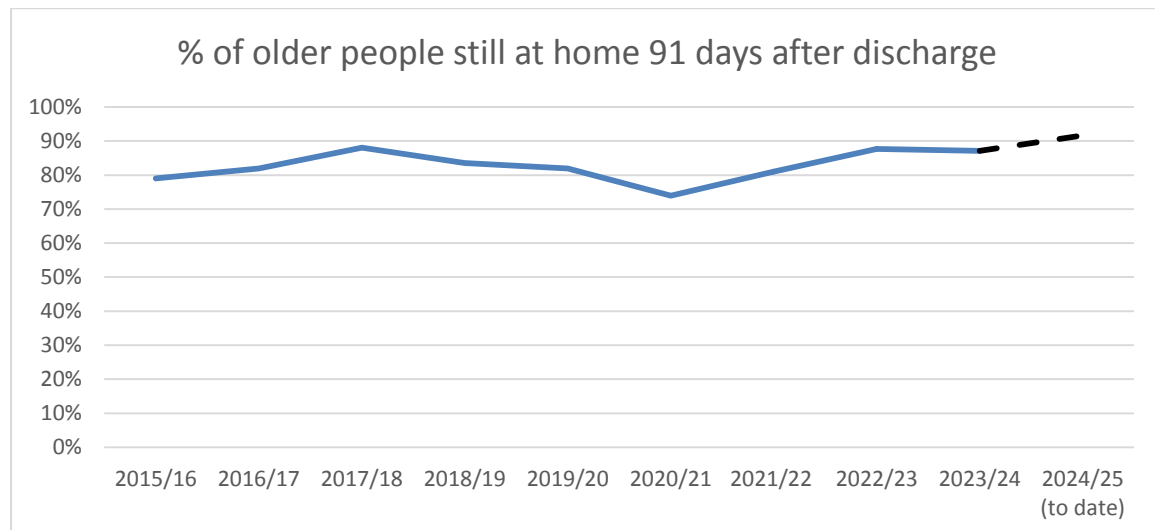
Minimising the number of people aged 65 and over who are permanently admitted to residential or nursing care



The number of permanent admissions to residential homes for those aged 65+ had generally been falling steadily since 2016-17 (excluding the covid impacted figures of 2020-21). However, post covid, current pressures and trends have started to see increasing demand on these services.

Metric 5

Maximising the proportion of people who enter the enablement service following discharge from hospital and who are living independently three months following discharge



The percentage of people still at home 91 days after discharge into reablement services is on an upward trend and has been for several years now, especially when you take out the impact of covid on 2020-21 data.

The Enfield BCF Plan is largely a continuation of the expenditure plan for 2023-24 with adjustments for inflation, and new allocations to support improved hospital discharge.

Recommendations

- the HWB note:
 - That proposals for distribution of the BCF 2024-2025 are agreed by the Health & Wellbeing Board (HWB), following consultation and agreement with the Chair of HWB.
 - BCF plans are developed locally in HWB areas by the relevant local authority and health commissioners.
 - BCF plans have been agreed by the ICB (in accordance with ICB governance rules) and the Director of Health & Adult Social Care, prior to being signed off by the HWB. BCF partners have submitted a narrative plan and a planning template, providing details of expenditure from BCF funding sources, capacity and demand, as well as ambitions and delivery plans for BCF metrics that require to be signed off by (or on behalf of) the HWB
 - The Enfield BCF 2023-25 plan has been reviewed for 2024/25 assured and moderated regionally. The plan has now been put forward for approval by Better Care Fund England, in consultation with DHSC (Department for Health & Social Care) and DLUHC (Department for Levelling Up, Housing & Communities).
 - To grant delegated authority to the Director of Health & Adult Social Care, and Director of Integration NCL ICB to make further decisions relating to Enfield's BCF Plan and associated national reporting within the parameters set out in this report, in consultation and agreement with the Chair of HWB.

Background: The Better Care Fund (BCF)

- Since 2015, the BCF has been crucial in supporting people to live healthy, independent and dignified lives, through joining up health, social care and housing services seamlessly around the person. This vision is underpinned by 2 core objectives, to:
 - enable people to stay well, safe, and independent at home for longer
 - provide people with the right care, at the right place, at the right time
- The BCF achieves this by requiring integrated care boards (ICBs) and local government to agree a joint plan, owned by the Health and Wellbeing Board (HWB), governed by an agreement under Section 75 of the NHS Act (2006). This continues to provide an important framework in bringing local NHS services and local government together to tackle pressures faced across the health and social care system and drive better outcomes for people.
- The BCF programme underpins key priorities in the NHS Long Term Plan by joining up services in the community and the government's plan for recovering urgent and emergency care (UEC) services, as well as supporting the delivery of next steps to put [People at the Heart of Care](#). The BCF facilitates the smooth transition of people out of hospital, reduces the chances of re-admission, and supports people to avoid long-term residential care. The BCF is also a vehicle for wider joining up of services across health and local government, such as support for unpaid carers, housing support, and public health

- Better Care Funding has increased by 5.66 % in 2024/25 and this increase has been applied to all BCF schemes. Improved Better Care Fund (iBCF) funding by 5% 2023-24 and Disabled Facilities Grant (DFG) funding increased by 1%.
- Schemes proposed for inclusion within the Section 75 Agreement for 2024/2025 are broadly aligned to schemes included within the Section 75 Agreement of 2023/2024. Proposed changes since 2023/2024 include additional funding to support hospital discharge.
- Funding shall be distributed in 2024-2025 to support safe and timely discharge from hospital to home or an appropriate community setting. This builds on funding included within the BCF of 2023-2024, to speed up the safe discharge of individuals over the winter period.
- In 2024 to 2025, the discharge fund will focus on growing social care capacity in ways that have the greatest possible impact on:
 - reducing delayed hospital discharges
 - planning services sufficiently far in advance to enable providers to make appropriate workforce capacity plans
 - learning from evaluation of the impact of previous discharge funding
 - improving collaboration and information sharing across health and social care services

Governance and Monitoring

- The schemes within the Better Care Fund are discussed at the Joint Health and Social Care Commissioning Board and approved by the Director of Adult Social Care for Enfield Council and the Director of Integration (Enfield), NCL ICB.
- The schemes are monitored by the Better Care Fund Delivery Group, who report to the Joint Health and Social Care Commissioning Board, the Better Care Fund Executive and the Health and Wellbeing Board. A quarterly return to NHS England is completed which evaluates delivery against jointly agreed priorities, as well as end-of-year returns.
- The NCL ICB is invoiced on a quarterly basis in arrears after the agreement has been signed and finalised.
- Monthly meetings are held between senior officers of the NCL ICB and Enfield Council to discuss and agree on funding amendments.
- Spend from the Better Care Fund and improved Better Care Fund has been utilised to meet increased demand and cost for services across health and social care and to deliver some stability within existing service provision following a significant period of austerity and much reduced central government funding across the health and social care system. This funding enables the health and social care system to continue to deliver services which meet statutory requirements. It has also been used to fund new service developments which prevent escalation of need/crisis and admission to hospital and which facilitate timely hospital discharge

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