

Health and Wellbeing Board Agenda – First Supplementary Agenda



BRISTOL CCG

Date: Thursday, 12 January 2023

Time: 2.30 pm

Venue: Bordeaux Room, City Hall, College Green,
Bristol, BS1 5TR

Issued by: Jeremy Livitt, Democratic Services

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Date: Tuesday, 10 January 2023



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Agenda

12. Better Care Discharge Fund Update - Stephen Beet

4.30 pm

(Pages 3 - 11)





**Bristol, North Somerset
and South Gloucestershire**
Integrated Care Board

Bristol Health and Wellbeing Board

Title of Paper:	Adult Social Care Discharge Grant
Author (including organisation):	Stephen Beet, Bristol City Council
Date of Board meeting:	Thursday, 12 January 2023
Purpose:	Information

1. Executive Summary

Nationally there are challenges in ensuring timely discharge from Acute and Community Health settings. To address this, an additional funding allocation has been made available to all health and social care systems in England.

2. Purpose of the Paper

To note the urgent key decision taken to approve the spending plan emergency decision taken on the spending plan for the £1.69m allocated to Bristol City Council by the Department of Health and Social Care ('DHSC') for the financial year 22/23 to alleviate delays to discharging people from hospital when they are fit to leave.

3. Background, evidence base, and what needs to happen

1. The Adult Social Care Discharge Fund was released to Local Authorities and Integrated Care Boards ('ICBs') on the 18th November 2022. The funding allocations must be an extension to the Better Care Fund for 2022/23 and be pooled in the existing section 75 agreement with health.
2. The purpose of the grant is to provide support to local authorities in England towards expenditure lawfully incurred, or to be incurred by them, up to 31 March 2023. The Department of Health and Social Care is providing this funding to support local authorities to:
 - enable more people to be discharged to an appropriate setting, including from mental health inpatient settings, with adequate and timely social care support as required
 - prioritise those approaches that are most effective in freeing up the maximum number of hospital beds and reducing bed days lost within the funding available. D2A and provision of homecare is recognised as an effective option for discharging more people in a safe and timely manner. Residential care to meet complex health and care needs may be more appropriate for people who have been waiting to be discharged for a long time
 - boost general adult social care workforce capacity through recruitment and retention, where that will help to reduce delayed discharges. This could include, but is not limited to, measures which: increase hours worked by existing workforce; improve retention of existing workforce; provide additional or redeployed capacity from current care workers; or support local recruitment initiatives
3. The funds have to be committed and used by March 2023 and are to target improvements in 'Discharge to Assess' over the winter period.
4. The funding released to Bristol City Council makes up just part of the £11m grant allocated across Bristol, North Somerset and South Gloucestershire to the ICB (circa £8m) and the other two local authorities (circa £1.6m between North Somerset and South Gloucestershire).
5. Cabinet authorised the Council's S.151 Officer to accept the Adult Social Care Discharge Fund of £1.69m on the 6th December 2022 via the Finance Exception

Report for P7. The report stated 'Approval of an emergency decision regarding the spending plan which is due by 16 December 2022 will come to Cabinet in January 2023.

6. The detail of the spending plan is attached to this report at Appendix A.

4. Community/stakeholder engagement

Due to time constraints, it was not possible to fully engage the wider community.

However:

- Report to the BNSSG ICB Chief Executive Meeting on 15th December 2022
- The fortnightly monitoring of the activity plans will also be undertaken at the BNSSG ICB Chief Executive meetings
- The Spending plans will also be considered via the three Health and Wellbeing Boards
- The spending plans will be developed following engagement with the Care Sector, Commissioning Leads and signed off by the Directors of Adult Social Care and the Chief Operating Officers across BNSSG

5. Recommendations

That the Health and Wellbeing Board note the contents of this report.

6. City Benefits

The additional funding will support patients being discharged earlier and back to their own homes, wherever possible. This will not directly reduce health inequalities.

This funding will also support delivery of the Health and Wellbeing theme, through investing in services that will ensure people receive the most appropriate support to leave Hospital. It will support the ambition to offer the right level of support to people in a way that maximises their health, independence and wellbeing. There will be a focus on preventative measures and short-term, early interventions that have been co-created with people and the VCSE sector providing holistic, person-centred support as part of an integrated health and social care system. Should longer term care be required, we will explore innovative approaches to ensure that people regain and retain independence as much as possible.

7. Financial and Legal Implications

The Adult Social Care Discharge Funding is time limited funding which must be spent by 31 March 2023, to facilitate timely hospital discharges. Expenditure proposals are outlined at Appendix A and are in accordance with funding conditions. The funding will be pooled as part of the Better Care Fund with BNSSG ICB and these plans were approved by the Chair of the Health and Wellbeing Board on behalf of the Health and Wellbeing Board.

8. Appendices

- [Link](#) to key decision Officer Executive Decision (OED)
- [Adult Social Care Discharge Fund - GOV.UK \(www.gov.uk\)](http://www.gov.uk)
- [Letter to the health and social care sector from the Minister for Care - GOV.UK \(www.gov.uk\)](http://www.gov.uk)
- [Addendum to the 2022 to 2023 Better Care Fund policy framework and planning requirements - GOV.UK \(www.gov.uk\)](http://www.gov.uk)

Version 1.0.0

Please Note:

- You are reminded that much of the data in this template, to which you have privileged access, is management information only and is not in the public domain. It is not to be shared more widely than is necessary to complete the return.

- Please prevent inappropriate use by treating this information as restricted, refrain from passing information on to others and use it only for the purposes for which it is provided. Any accidental or wrongful release should be reported immediately and may lead to an inquiry. Wrongful release includes indications of the content, including such descriptions as "favourable" or "unfavourable".

- This template has been produced for areas to confirm how the additional funding to support discharge from hospital and bolster the social care workforce will be spent in each area. The government has also produced guidance on the conditions attached to this funding, that you should ensure has been followed.

- This template collects detailed data on how the funding allocated to each area will be spent. The portion of the funding that is allocated via Integrated Care Boards (ICBs) does not have a centrally set distribution to individual HWBs. ICBs should agree with local authority partners how this funding will be distributed and confirm this distribution in a separate template. The amount pooled into the BCF plan for this HWB from each ICB should also be entered in the expenditure worksheet of this template (cell N31) (The use of all funding should be agreed in each HWB area between health and social care partners).

Health and Wellbeing Board:	Bristol, City of
Completed by:	Richard Hills
E-mail:	richard.hills@bristol.gov.uk
Contact number:	7812158389

Please confirm that the planned use of the funding has been agreed between the local authority and the ICB and indicate who is signing off the plan or submission on behalf of the HWB (delegated authority is also accepted):

Confirm that use of the funding has been agreed (Yes/No)	
Job Title:	Director of Performance and Delivery
Name:	Lisa Manson

If the following contacts have changed since your main BCF plan was submitted, please update the details.

*Area Assurance Contact Details:	Role:	Professional Title (e.g. Dr, Cllr, Prof)	First-name:	Surname:	E-mail:
	Health and Wellbeing Board Chair		Helen	Holland	helen.holland@bristol.gov.uk
	Integrated Care Board Chief Executive or person to whom they have delegated sign-off		David	Jarret	david.jarrett2@nhs.net
	Local Authority Chief Executive		Mike	Jackson	mike.jackson@bristol.gov.uk
	LA Section 151 Officer		Denise	Murray	denise.murray@bristol.gov.uk
	Head of Performance		Julie	Kell	julie.kell1@nhs.net

Please add further area contacts that you would wish to be included in official correspondence e.g. housing or trusts that have been part of the process -->

When all yellow sections have been completed, please send the template to the Better Care Fund Team england.bettercarefundteam@nhs.net saving the file as 'Name HWB' for example 'County Durham HWB'. Please also copy in your Better Care Manager.

Discharge fund 2022-23 Funding Template

5. Expenditure

Selected Health and Wellbeing Board:

Bristol

Source of funding		Amount pooled	Planned spend
LA allocation		Please select HWB	£1,658,400
ICB allocation	Please select HWB on Cover page	Please enter amount pooled from ICB	
		Please enter amount pooled from ICB	
		Please enter amount pooled from ICB	

Yellow sections indicate required input

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Scheme ID	Scheme Name	Brief Description of Scheme (including impact on reducing delayed discharges).	Scheme Type	Sub Types	Please specify if 'Scheme Type' is 'Other'	Estimated number of packages/beneficiaries	Setting	Spend Area	Commissioner	Source of Funding	Planned Expenditure (£)
27	Redeploy CHC nurses to improve identification of Fast Track EOL	Monies used to source additional CHC assessment capacity in order to release substantially more to work performance	Additional or redeployed capacity from current care workers	Costs of agency staff		677 extra assessments complex assessments to	Both	Community Health	NHS Bristol, North Somerset and South Gloucestershire ICB	ICB allocation	£29,500
32	Administration	Management/Contract staff to support Returns/Capacity	Other			enabler	Both	Social Care	NHS Bristol, North Somerset and South Gloucestershire ICB	ICB allocation	£7,500
8	TEC	20 Teler units (purses predictive analytics to either ops centre/ virtual support/family and friends in the home). To give assurance to clinicians /	Assistive Technologies and Equipment	Telecare		supports increase in P1 discharges 10 some would be additionality	Home care	Community Health	Bristol	Local authority grant	£24,400
9	TEC	100 install of emergency alert wearable devices to support mobility post	Assistive Technologies and Equipment	Telecare		supports increase in P1 discharges 40 NCTR	Home care	Community Health	Bristol	Local authority grant	£75,000
10	TEC	100 install of emergency alert wearable devices to support mobility post	Assistive Technologies and Equipment	Telecare		supports increase in P1 discharges 10 some would be additionality	Home care	Community Health	Bristol	Local authority grant	£30,000
18	system support: extension Medequip 7 days week	medequip providing/ installing equipment 7 day week basis & Greater use of support care devices (smart care hub) for older people to support hospital discharge	Assistive Technologies and Equipment	Community based equipment		42 additional orders of fast track equipment reduction in bed	Home care	Community Health	NHS Bristol, North Somerset and South Gloucestershire ICB	ICB allocation	£30,000
36	TEC	step up from 7 to 10 P3 beds at Redfield and link them all into P3 pathway - request nursing support	Assistive Technologies and Equipment	Community based equipment		15 extra cases supported on P1s	Home care	Community Health	Bristol	Local authority grant	£24,000
12	Bed based P3	step up from 7 to 10 P3 beds at Redfield and link them all into P3 pathway - request nursing support	Bed Based Intermediate Care Services	Step down (discharge to assess pathway 2)		takes additional 12 P3 step downs with LOS of 28 days	Residential care	Social Care	Bristol	ICB allocation	£82,800

13	Mental Health and homelessness	Purchase of small block (3 beds) MH/ homeless P3 beds in supported living	Bed Based Intermediate Care Services	Step down (discharge to assess pathway 2)		takes 7 clients in over the period with complex MH discharge	Residential care	Social Care	Bristol	ICB allocation	£100,000
29	Reablement beds	Commission 20 reablement beds	Bed Based Intermediate Care Services	Step down (discharge to assess pathway 2)		20 beds with LOS of 28 days =66 NCTR	Residential care	Community Health	NHS Bristol, North Somerset and South Gloucestershire ICB	ICB allocation	£408,000
35	Supporting step down from D2A	Supprt incentive payment on Bristol Block to provide step down dementia care	Bed Based Intermediate Care Services	Step down (discharge to assess pathway 2)		8 beds with LOS of 28 days=26 NCTR	Residential care	Social Care	Please select HWB on Cover page	ICB allocation	£14,400
15	Homeless multiagency team	Support 1.6 settle in worker and 1 UHBW homeless hospital discharge worker retention payment based on providers continuing to deliver same or more hours throughout the Dec-Mar	Contingency			Support 12 clients per month	Both	social care	Bristol	ICB allocation	£42,000
1	Domicillary care	Continue to pay dom care agency when a client is admitted for up to 14 days write to all dom care providers to ask for any hand backs / possible reduction in engagement (national pilot) to work dom care waiting lists into rounds for booking program not	Home Care or Domiciliary Care	Domiciliary care workforce development		locks in capacity currently 22,100 hours per week - current discharge - providers taking back (linked to 5) allows for any capacity not needed to be maximised the dom care capacity that does come on	Home care	Social Care	Bristol	Local authority grant	£1,200,000
2	Domicillary care	Continue to pay dom care agency when a client is admitted for up to 14 days write to all dom care providers to ask for any hand backs / possible reduction in engagement (national pilot) to work dom care waiting lists into rounds for booking program not	Home Care or Domiciliary Care	Domiciliary care to support hospital discharge		enabling 24 discharges across 12 weeks	Home care	Social Care	Bristol	Local authority grant	£60,000
3	Domicillary care	Continue to pay dom care agency when a client is admitted for up to 14 days write to all dom care providers to ask for any hand backs / possible reduction in engagement (national pilot) to work dom care waiting lists into rounds for booking program not	Home Care or Domiciliary Care	Domiciliary care packages		enabling 7 discharges across 12 weeks	Home care	Social Care	Bristol	Local authority grant	£50,000
7	Domicillary care	Continue to pay dom care agency when a client is admitted for up to 14 days write to all dom care providers to ask for any hand backs / possible reduction in engagement (national pilot) to work dom care waiting lists into rounds for booking program not	Home Care or Domiciliary Care	Domiciliary care packages		enabler	Home care	Social Care	Bristol	Local authority grant	£50,000
17	Additional capacity care homes	Share training portfolio ICB/LA to utilise where MH/LDA individuals are in back in the care providers /VCSE and training resources to support the release of improve retention of dom care staff by bringing forward the annual inflationary increase in ICB brokerage admin support to release broker capacity during discharge meant to include IDS, brokerage etc over xmas period working Proud to Care: Local events	Home Care or Domiciliary Care	Other	supporting providers to manage complex discharges	12 extra complex CHC packages	Both	Social Care	NHS Bristol, North Somerset and South Gloucestershire ICB	ICB allocation	£27,500
26	Crisis response funding for MH/LDA community	Share training portfolio ICB/LA to utilise where MH/LDA individuals are in back in the care providers /VCSE and training resources to support the release of improve retention of dom care staff by bringing forward the annual inflationary increase in ICB brokerage admin support to release broker capacity during discharge meant to include IDS, brokerage etc over xmas period working Proud to Care: Local events	Home Care or Domiciliary Care	Domiciliary care packages		enabler	Both	Community Health	NHS Bristol, North Somerset and South Gloucestershire ICB	ICB allocation	£80,000
31	Training support	Share training portfolio ICB/LA to utilise where MH/LDA individuals are in back in the care providers /VCSE and training resources to support the release of improve retention of dom care staff by bringing forward the annual inflationary increase in ICB brokerage admin support to release broker capacity during discharge meant to include IDS, brokerage etc over xmas period working Proud to Care: Local events	Home Care or Domiciliary Care	Domiciliary care workforce development		enabler	Home care	Primary Care	NHS Bristol, North Somerset and South Gloucestershire ICB	ICB allocation	£50,000
23	Advance CHC dom care annual pay award to 1 Jan 2022	Share training portfolio ICB/LA to utilise where MH/LDA individuals are in back in the care providers /VCSE and training resources to support the release of improve retention of dom care staff by bringing forward the annual inflationary increase in ICB brokerage admin support to release broker capacity during discharge meant to include IDS, brokerage etc over xmas period working Proud to Care: Local events	Improve retention of existing workforce	Bringing forward planned pay increases		14 extra discharges over xmas period	Home care	Community Health	NHS Bristol, North Somerset and South Gloucestershire ICB	ICB allocation	£60,000
25	Brokerage administration capacity	Share training portfolio ICB/LA to utilise where MH/LDA individuals are in back in the care providers /VCSE and training resources to support the release of improve retention of dom care staff by bringing forward the annual inflationary increase in ICB brokerage admin support to release broker capacity during discharge meant to include IDS, brokerage etc over xmas period working Proud to Care: Local events	Increase hours worked by existing workforce	Overtime for existing staff.		enabler	Both	Community Health	NHS Bristol, North Somerset and South Gloucestershire ICB	ICB allocation	£10,000
22	Facilitation of discharges during BH and weekends	Share training portfolio ICB/LA to utilise where MH/LDA individuals are in back in the care providers /VCSE and training resources to support the release of improve retention of dom care staff by bringing forward the annual inflationary increase in ICB brokerage admin support to release broker capacity during discharge meant to include IDS, brokerage etc over xmas period working Proud to Care: Local events	Increase hours worked by existing workforce	Overtime for existing staff.	supporting discharges over W/Es and Christmas and	14 extra discharges over xmas period	Both	Community Health	NHS Bristol, North Somerset and South Gloucestershire ICB	ICB allocation	£10,725
30	Proud to Care	Share training portfolio ICB/LA to utilise where MH/LDA individuals are in back in the care providers /VCSE and training resources to support the release of improve retention of dom care staff by bringing forward the annual inflationary increase in ICB brokerage admin support to release broker capacity during discharge meant to include IDS, brokerage etc over xmas period working Proud to Care: Local events	Local recruitment initiatives			Impact from Feb onwards - Sustainability	Both	Social Care	Please select HWB on Cover page	ICB allocation	£30,000
28	Recruitment campaigns	Share training portfolio ICB/LA to utilise where MH/LDA individuals are in back in the care providers /VCSE and training resources to support the release of improve retention of dom care staff by bringing forward the annual inflationary increase in ICB brokerage admin support to release broker capacity during discharge meant to include IDS, brokerage etc over xmas period working Proud to Care: Local events	Local recruitment initiatives			Impact from Feb onwards - Sustainability target earlier	Home care	Social Care	NHS Bristol, North Somerset and South Gloucestershire ICB	ICB allocation	£7,500
5	Additional discharge support	Share training portfolio ICB/LA to utilise where MH/LDA individuals are in back in the care providers /VCSE and training resources to support the release of improve retention of dom care staff by bringing forward the annual inflationary increase in ICB brokerage admin support to release broker capacity during discharge meant to include IDS, brokerage etc over xmas period working Proud to Care: Local events	Other			discharges by 48 hours 36 discharges over	Both	Social Care	Bristol	ICB allocation	£150,000

Scheme types and guidance

This guidance should be read alongside the addendum to the 2022-23 BCF Policy Framework and Planning Requirements.

The scheme types below are based on the BCF scheme types in main BCF plans, but have been amended to reflect the scope of the funding. Additional scheme types have been added that relate to activity to retain or recruit social care workforce. The most appropriate description should be chosen for each scheme. There is an option to select 'other' as a main scheme type. That option should only be used when none of the specific categories are appropriate.

The conditions for use of the funding (as set out in the addendum to the 2022-23 BCF Policy Framework and Planning Requirements) confirm expectations for use of this funding. Funding should be pooled into local BCF agreements as an addition to existing section 75 arrangements. Local areas should ensure that there is agreement between ICBs and local government on the planned spend.

The relevant Area of Spend (Social Care/Primary Care/Community Health/Mental Health/Acute Care) should be selected

The expenditure sheet can be used to indicate whether spending is commissioned by the local authority or the ICB.

This funding is being allocated via:
 - a grant to local government - (40% of the fund)
 - an allocation to ICBs - (60% of the fund)

Both elements of funding should be pooled into local BCF section 75 agreements.

Once the HWB is selected on the cover sheet, the local authority allocation will pre populate on the expenditure sheet. The names of all ICBs that contribute to the HWB's BCF pool will also appear on the expenditure sheet. The amount that each ICB will pool into each HWB's BCF must be specified. ICBs are required to submit a separate template that confirms the distribution of the funding across HWBs in their system. (Template to be circulated separately).

When completing the expenditure plan, the two elements of funding that is being used for each line of spend, should be selected. The funding will be paid in two tranches, with the second tranche dependent on an area submitting a spending plan 4 weeks after allocation of funding. The plan should cover expected use of both tranches of funding. Further reporting is also expected, and this should detail the actual spend over the duration of the fund. (An amended reporting template for fortnightly basis and end of year reporting, will be circulated separately)

Local areas may use up to 1% of their total allocation (LA and ICB) for reasonable administrative costs associated with distributing and reporting on this funding.

For the scheme types listed below, the number of people that will benefit from the increased capacity should be indicated - for example where additional domiciliary care is being purchased with part of the funding, it should be indicated how many more packages of care are expected to be purchased with this funding.

Assistive Technologies and Equipment
 Home Care or Domiciliary Care
 Bed Based Intermediate Care Services
 Reablement in a Person's Own Home
 Residential Placements

Scheme types/services	Sub type	Notes	home care?
Assistive Technologies and Equipment	1. Telecare 2. Community based equipment 3. Other	You should include an expected number of beneficiaries for expenditure under this category	Y
Home Care or Domiciliary Care	1. Domiciliary care packages 2. Domiciliary care to support hospital discharge 3. Domiciliary care workforce development 4. Other	You should include an expected number of beneficiaries for expenditure under this category	Y
Bed Based Intermediate Care Services	1. Step down (discharge to assess pathway 2) 2. Other	You should include an expected number of beneficiaries for expenditure under this category	N
Reablement in a Person's Own Home	1. Reablement to support to discharge – step down 2. Reablement service accepting community and discharge 3. Other	You should include an expected number of beneficiaries for expenditure under this category	Y
Residential Placements	1. Care home 2. Nursing home 3. Discharge from hospital (with reablement) to long term care 4. Other	You should include an expected number of beneficiaries for expenditure under this category	N
Increase hours worked by existing workforce	1. Childcare costs 2. Overtime for existing staff.	You should indicate whether spend for this category is supporting the workforce in: - Home care - Residential care - Both	Area to indicate setting
Improve retention of existing workforce	1. Retention bonuses for existing care staff 2. Incentive payments 3. Wellbeing measures 4. Bringing forward planned pay increases	You should indicate whether spend for this category is supporting the workforce in: - Home care - Residential care - Both	Area to indicate setting
Additional or redeployed capacity from current care workers	1. Costs of agency staff 2. Local staff banks 3. Redeploy other local authority staff	You should indicate whether spend for this category is supporting the workforce in: - Home care - Residential care - Both	Area to indicate setting
Local recruitment initiatives		You should indicate whether spend for this category is supporting the workforce in: - Home care - Residential care - Both	Area to indicate setting

Other		You should minimise spend under this category and use the standard scheme types wherever possible.	Area to indicate setting
Administration		Areas can use up to 1% of their spend to cover the costs of administering this funding. This must reflect actual costs and be no more than 1% of the total amount that is pooled in each HWB area	NA