

Decision Maker: **EXECUTIVE**
For Pre-decision Scrutiny by the Care Services PDS Committee on 9 October 2017

Date: **10 October 2017**

Decision Type: Non- Urgent Executive Key Non-Key

Title: **IMPROVED BETTER CARE FUND (IBCF)**

Contact Officer: Stephen John, Director: Adult Social Care (ECHS)
Tel: 0208 313 4754 E-mail: Stephen.John@bromley.gov.uk

Chief Officer: Ade Adetosoye, Deputy Chief Executive, and Executive Director of Education, Care and Health Services

Ward: All

1. Reason for report

- 1.1. This document is an update on the Improved Better Care Fund (IBCF). The report summarises the National Conditions for the use of the IBCF and the spending recommendations to be made from the IBCF grant.
- 1.2. The Improved Better Care Fund is a time limited grant to local authorities for spending on adult social care that was announced in the Spring Budget in March 2017 and represents an increase on the amount of additional IBCF previously announced in 2016.
- 1.3. The grant may be used only for the purposes of meeting adult social care needs, reducing pressures on the NHS, including supporting more people to be discharged from hospital when they are ready and ensuring that the local social care provider market is supported.
- 1.4. One of the grant conditions is that the IBCF grant can be spent ahead of the final NHS England approval of the Bromley Better Care Fund plan as long as it has been agreed with the Council's health and wellbeing partners. This will be sought at the 30th November Health and Wellbeing Board after it has been considered by Executive.
- 1.5. The purpose of this report is to gain the agreement of the Council's Executive to utilise the IBCF grant to stabilise and to reduce pressures on the current health and social care market, as well as provide opportunities for 'invest to save' projects across adult social care in the short to medium term. Members are asked to consider the report and agree the proposals for the IBCF.

2. RECOMMENDATION(S)

The Council's Executive is requested to:

- 2.1. Note the value of this IBCF grant in paragraph 3.3 and the conditions relating to the IBCF grant as identified in para 3.2.**
- 2.2. Approve the principles of the areas identified for investment in adult social care as set out in section 4**
- 2.3. Grant delegated authority to the Deputy Chief Executive & Executive Director for Education, Care and Health Services and the Portfolio Holder for Care Services (including Public Health) to draw down the value of the IBCF Grant for 2017/18 (£4.184m) and to determine detailed expenditure plans for the IBCF Grant proposals within the framework described within this report.**
- 2.4. Subject to the agreement of 2.4 above, Executive are asked to agree the recurring costs of £1.7m in 2018/19 and £1.6m in 2019/20 identified in paragraph 8.2**

Impact on Vulnerable Adults and Children

1. Summary of Impact: The IBCF will have a positive impact on vulnerable people through investment into safeguarding and adult social services.
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Corporate Policy

1. Policy Status: Existing Policy:
 2. BBB Priority: Supporting Independence Healthy Bromley
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Financial

1. Cost of proposal: Up to £4,184,109 in 2017/18:
 2. Ongoing costs: Recurring Cost Non-Recurring Cost:
 3. Budget head/performance centre: IBCF
 4. Total current budget for this head: £9,224k over three years
 5. Source of funding: IBCF
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Personnel

1. Number of staff (current and additional): 23
 2. If from existing staff resources, number of staff hours:
-

Legal

1. Legal Requirement: Non-Statutory - Government Guidance:
 2. Call-in:
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Procurement

1. Summary of Procurement Implications: The Care Homes Investment procurement implications will be identified in the proposed options appraisal. The proposal for 4 additional Extra Care Housing flats will result in a procurement using normal LBB procurement processes.
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Customer Impact

1. Estimated number of users/beneficiaries (current and projected): Not applicable
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Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments:

3. Background

- 3.1. The Improved Better Care Fund (IBCF) is a time limited grant to local authorities for spending on adult social care that was announced in the Spring Budget in March 2017 and represents an increase on the amount of additional IBCF previously announced in 2016.
- 3.2. The government has made it clear that part of this funding is intended to enable local authorities to quickly provide stability and extra capacity in local care systems. It has also been made clear that where local authorities do not deliver on reducing their delayed transfers of care there could be financial implications to future payments of this grant.
- 3.3. In the Spring Budget 2017 the London Borough of Bromley was awarded an IBCF Grant of £4.2m in 2017/18, £3.4m in 2018/19 with a further £1.7m for 2019/20. This report describes the proposals for the use of only £4.2m IBCF to be spent within the Bromley Social Care in 2017/18. Some of these costs will however be recurring in future years. There will be further reports to be presented to the Executive for the £3.4m in 2018/19 and the £1.7m in 2019/20. These may include proposals for flexibility to deal with ongoing cost pressures as well as the recurring costs from the 2017/18 proposal.
- 3.4. As the IBCF is a direct grant to local authorities to spend on adult social care, including services that reduce pressures on the NHS, the final decisions on how the IBCF will be spent rests with the Council. However, a key requirement of the grant conditions is that this is done in conjunction with the wider health and social care partners. The agreement of other partners on the spending plans will be obtained via the Health and Wellbeing Board in order to satisfy this part of the Grant Determination conditions.
- 3.5. Also, as the grant is a direct grant to local authorities for spending on social care it will not form part of the Better Care Fund Section 75 agreement with Bromley CCG. It is required to be included in the BCF Narrative Plan and BCF Financial Budgets in line with the NHS England BCF Planning Guidelines.

4. IBCF Spending Recommendations

The transformation process within Adult Social Care is already under way and is described in the document "Our Journey to Excellence". The IBCF spending proposals support this change programme.

The grant conditions for the IBCF require that the IBCF grant paid to local authorities may be used only for the purposes of:

- Meeting adult social care needs;
- Reducing pressures on the NHS, including supporting more people to be discharged from hospital when they are ready;
- Ensuring that the local social care provider market is supported.

The spending recommendations are therefore grouped under these three grant condition headings.

The IBCF is also expected to be invested in schemes that support the governments High Impact Changes Model - Managing Transfers of Care. The proposed investments in this section support the following aspects of that model:

- Focus on Choice
- Enhancing Health inn Care Homes
- Home First / Discharge to Assess
- Multi-Disciplinary / Multi Agency Teams

Grant Condition 1 - Meeting adult social care needs

- 4.1. A total of £2.349m (57%) of the IBCF is allocated to this grant condition in 2017/18.
- 4.1.1. **Transformation of Social Care (Adults, Mental Health and LD) / workforce development.** It is recommended that a proportion of the IBCF (£500k) be set aside to enable these initiatives.
- 4.1.1.1. Recruitment of appropriately qualified staff within Social Care has been identified as a key concern. Local care providers have also experienced similar problems with the recruitment and retention of domiciliary care staff. The implication of not addressing this situation is that there will be insufficient paid care workers across health and social care within LBB, domiciliary care agencies, care homes and health care assistant roles in the community..
- 4.1.1.2. It is recommended that some of the IBCF be set aside to help develop initiatives that create closer working relationships with local education providers and to support the wider local health and social care workforce. This will be achieved by offering placements within the LBB social care team (see 4.1.1.3) and work experience with providers to enable those who are interested in a career in the caring profession to understand the context that they would be working. This will broaden their opportunities of moving through a career as a paid care worker, social worker or occupational therapist with LBB or with the local care market. Initiatives include working with local colleges who offer health and social care training which consists of the student having to complete a placement and to provide additional support to those providers that offer placement schemes and encourage others to take students into their settings. This may include investing in provider's supervision of their placement students. The intention is that following a successful placement and on qualifying from their courses, students will wish to continue to work for local Bromley care providers.
- 4.1.1.3. Students studying to qualify as social workers are currently offered placements within LBB social care department. Difficulties arise freeing up already busy social workers to mentor and lead these placements. It is recommended that a full time Practice Educator, who is a Senior Practitioner Social Worker, is recruited to manage the placements of around 10 students per year. It is also recommended that for those students who have a satisfactory placement with LBB and who qualify from university at the end of their course, a full time role as a newly qualified social worker can be offered through the normal recruitment processes. The Practise Educator would also be responsible for the supervision of the newly qualified social workers through their first probationary year with LBB. The benefit of this approach is that it ensures successful placements, encourages students to want to work for LBB and provides a steady stream of newly qualified staff coming into Bromley each year. The costs of recruiting and employing a Practice Educator plus the dual running costs associated with developing this role are included in the recommended investment
- 4.1.1.4. Additional Social Care Packages: There will also be a requirement to invest in a greater number of Care Packages especially as the social care workforce is increased and the current backlog of cases awaiting assessment is reduced. Investment in a 'Discharge to Assess' scheme will improve the current position and facilitate the appropriate discharge for individuals.
- 4.1.1.5. Carers Services: Investment in carer's services, through the newly commissioned primary and secondary services, is also recommended to support carers, reduce

carer breakdown, and prevent any likely increases in packages of care and hospital admissions.

4.1.1.6. Part of this investment will be set aside to facilitate the retention of mental health social workers and the recruitment of additional mental health social workers.

4.1.2. **Investment in Adult Social Care:** It is recommended that £597k be set aside to invest in the resources described below. The resources will be short term temporary or fixed term appointments to cover the IBCF period only.

Summary of Proposals "Investment in Adult Social Care"		
Role	Purpose	Estimated Cost
CHC Lead Social Worker	The suggested approach is for one full time Social Work CHC Lead who can ensure robust systems are in place to capture patterns, trends and ensure practitioners are reliably knowledgeable and skilled to deliver effective and relevant CHC assessments.	£42k non recurring
CHC Care Manager	A CHC Care Manager to support the CHC Lead Social Worker who will provide additional capacity to the current workforce enabling them time to embed their CHC learning and build their confidence.	£55k recurring
Safeguarding Project Lead (3 days per week)	Project Manager to implement the SLAM Project, approved by Executive 18 July 2017, covering safeguarding at Oxleas and South London & Maudsley NHS trust	£20k non recurring
General project work	Recruitment of an interim Project Mgr. for up to 6 months to manage Discharge to Assess (D2A) in ECH and Social Workers into ICNs	£50k non recurring
IBCF Project Mgr. initial work	It is recommended that the investment already made by LBB in the development of IBCF plans be funded from the IBCF	£110k non recurring
IBCF/BCF programme Mgr. ongoing	Currently there are insufficient resources within Bromley to manage the number of workstreams identified within the BCF and IBCF. In addition, unlike most other localities in England, Bromley does not have dedicated resource in place to manage the overall BCF process and its finances. It is recommended that a proportion of the IBCF is invested in resources to support the workstreams associated with the BCF and IBCF investment plans. A full time BCF Programme Manager to manage the	£110k non recurring

	<p>implementation of BCF / IBCF schemes and the administration of the BCF / IBCF within the locality. (NB. Within Bromley this role is undertaken by several employees in addition to their core duties).</p> <p>Initially, interim rates have been applied to allow for the recruitment of a BCF specialist who can develop the role so that a permanent employee can then take on the role.</p>	
Finance Lead to support IBCF and BCF	The BCF and IBCF within the Bromley health and care system is valued at in excess of £54m over 2017/18 and 2018/19. It is recommended that suitable resource for financial management is made available to oversee the financial controls of both BCF and IBCF on behalf of LBB and BCCG	£85k recurring
Assistive Technology	Revival of the currently lapsed “Just Checking” monitoring licences	£25k recurring
Transitions Programme Lead	<p>A management role that develops the transition process to support young people (and their families) transitioning from children to adult services across education, health and social care, ensuring that the Council meets its statutory duties under the Care Act 2014 and Children and Families Act 2014.</p> <p>The Transitions Lead would develop and manage cross-organisational processes and protocols that ensure young people commencing the transition pathway have their needs met in the most effective and timely manner. The lead would also provide support to ensure young people with both eligible and non-eligible needs transition smoothly from children’s to adult services</p>	£50k recurring
OT and Trusted Assessors Resources	Conduct a review of Occupational Therapy services to reduce duplication and maximise staff efficiency. Implement a trusted assessor process where health and social care professionals can refer clients directly into specific services.	£50k non recurring
Total		£597k

4.1.3. Public Health, Supporting JSNA priorities.

It is recommended that £60k investment is made into a pilot to reduce demands on social care through targeted social work people with drug and alcohol abuse issues.

There is a clear evidence base that substance misuse treatment is effective in reducing harm to individual drug/alcohol misuser’s and communities. The aim of the Social Care Support Pilot is to employ a designated social worker with a specialist interest in substance misuse to support clients moving from a position of problematic drugs and/or

alcohol misuse, associated with poor physical health status, chaotic lifestyle and sometimes criminality to a position of stability, improved health and well-being, employment and positive engagement with the drug treatment service and ultimately the community.

4.1.4. **Housing initiatives and research into older peoples housing needs.**

It is proposed that an investment of £100k be made to (a) carry out research into the housing and care needs of older people in Bromley to inform commissioning and service strategies (b) investigate the extent to which existing occupants of social housing with care needs would be appropriate for extra care housing. This will help to better meet individual needs, keep people independent within the community, prevent, reduce or delay long term care placements and also potentially release a social housing unit to meet need in Bromley.

4.1.5. **Care Homes Investment Options Appraisal –**

The Council is facing increased pressures in securing local nursing home placement. Bromley are competing with self-funders as well as other local authorities for placements. A key consideration to overcoming this is to consider an investment in a care home, which the Council would own, but not manage, and have full nomination rights on placements. Officers would like to instruct Cushman and Wakefield, the Councils Property Surveyors to undertake a 2 phased options appraisal on the purchase of suitable accommodation. The first phase would be a high level options appraisal of sites available, while the second phase would deliver a full feasibility study on preferred options identifying capital investment opportunities for the Council. It is recommended that £250k is invested in this work.

It is further recommended that the balance of the 2017/18 IBCF Grant (£842m) be held over for future investment into the Care Homes option that is identified from the work described above or to help secure any identified pressures in long term placements.

Grant Condition 2 - Reducing pressures on the NHS, including supporting more people to be discharged from hospital when they are ready.

4.2. A total of £1.389m (33%) of the IBCF is allocated to this grant condition.

4.2.1. **Support for Integrated Care Networks (ICNs).**

Significant social care cost pressures arise from clients coming to social care from the ICNs. It is recommended that part of the IBCF (£989k) is invested in additional care management resources within the ICNs to manage care and facilitate the collection of data that can be used to determine the correct level of investment in care packages for clients after contact with the ICN. In addition it is recommended that part of the IBCF is used to fund the anticipated cost pressures on ASC resulting from the ICN and a further sum is set aside to cover additional costs should they be evidenced once better data can be obtained and analysed.

A separate and more detailed paper is being presented to Executive for their consideration of this proposal.

4.2.2. **Discharge to assess in Extra Care Housing (ECH).**

Bromley currently has 12 Step Down flats in Extra Care Housing and these are often occupied over a long period of time by individual service users. It is recommended that part of the IBCF (£400k) be invested to review the current processes within ECH so that individuals are discharged from hospital into an ECH flat and have their longer term care needs assessed and a care package arranged within 4 to 6 weeks. In addition, an investment of up to 4 additional floating Step Down beds to be made for the purpose of providing accommodation for those that are unable to find suitable accommodation and are at risk of becoming long term ECH tenants.

The benefits of this approach is that the 12 existing flats would be occupied only for up to 6 weeks whilst reablement, rehabilitation and further assessments take place leading to more appropriate longer term care packages being put in place. It is anticipated that those care packages will be at a lower cost than ongoing residential costs.

The additional costs include the piloting of this approach to prove the benefits and the additional 4 ECH flats to provide accommodation for those who are unable to be offered long term residency by landlords

This investment will help support the discharge to assess initiative, details of which are being reported to Executive on 10 October 2017 in a separate report.

Grant Condition 3 - Ensuring that the local social care provider market is supported

4.3. A total of £0.446m (10%) of the IBCF is allocated to this grant condition. The market includes all providers and not just Care Homes and is intended to support the market so that people can exercise choice and control, including with regards to Direct Payments.

4.3.1. Safeguarding – SLAM.

This proposal has already been approved by Executive (£156k) and is included for completeness. It covers the effective management of safeguarding investigations within the community and hospitals relating to mental health.

4.3.2. Direct Payments Lead.

It is recommended that an investment of £40k is made for a lead to develop and increase the uptake of Direct Payments. In addition a further £50k is recommended to resource the systems for Direct Payments, including pre-Payment cards, and to develop an interactive guide for Direct Payments.

Currently in excess of 40% of all Direct Payments offered to service users are declined for reasons relating to it being too difficult for the service user to manage their own care packages (689 cases in 2016/17). A dedicated Direct Payments lead will help to significantly reduce this number. An increase in the uptake of Direct Payments will drive demand for the Personal Assistant market and the Direct Payments Lead will work closely with Vibrance, who are a registered charity that offer advice and assistance to Service Users for all aspects of Direct Payments, to help develop the market.

4.3.3. **Market development and support** It is recommended that £200k be invested in this initiative.

4.3.3.1. Bromley providers are rated to be in the bottom 20% in England according to the CQC. Investment is recommended to help raise the sustainability and performance of care homes, assist in the training of their staff and provide emergency care funding for those providers in danger of failing financially. Due to the current lack of

availability locally, this will also include investing in growing the PA market through the contract with Vibrance and through the local education providers.

- 4.3.3.2. Bromley Third Sector Enterprise and integrated care networks (ICN): Working in conjunction with the social workers in the ICNs, social workers will train the 3rd sector enterprise to identify service users earlier who might need only a small package of care.
- 4.3.3.3. Support for Self-Funders: Care Home Select (CHS) are currently commissioned to provide advice, guidance and brokerage of placements for individuals leaving the PRUH who are self-funding their care. CHS have a good relationship with the local market and continually support them to ensure they are able to meet presenting needs. Support will be given to CHS to build the self-funded domiciliary care market and ensure self-funders are offered the appropriate level of care aiding the prevention and independence of self-funders.

5. IMPACT ON VULNERABLE ADULTS AND CHILDREN

The IBCF will have a positive impact on vulnerable people through investment into safeguarding and adult social services. As the IBCF is for investment into adult services only there will be no impact on children, with the exception of those transitioning to adulthood that will be positively impacted by the proposed Transitions Lead post.

6. POLICY IMPLICATIONS

The Improved Better Care Fund supports the Building a Better Bromley and Supporting Independence priorities.

7. PROCUREMENT IMPLICATIONS

Procurement will be engaged as appropriate on the proposals in this report.

8. FINANCIAL IMPLICATIONS

- 8.1. The value of the IBCF Grant for the next three years is £4.184m in 2017/18, £3.363m in 2018/19 and £1.677m in 2019/20
- 8.2. The IBCF is a direct grant to local authorities which they are required to spend on social care. It will therefore not form part of the Better Care Fund Section 75 agreement with Bromley CCG. It will, however, form part of the BCF Narrative Plan and BCF Financial Budgets in line with the NHS England BCF Planning Guidelines.

The proposed spend on the IBCF is detailed in the table below:

	<u>2017/18</u> <u>£'000</u>	<u>2018/19</u> <u>£'000</u>	<u>2019/20</u> <u>£'000</u>
Transformation of social care/workforce development	500	60	60
Investment in ASC	597	215	215
Supporting JSNA priorities	60	0	0
Housing Initiatives	100	100	0
Care Home option appraisal	1,092	0	0
Sub total for grant condition 1	2,349	375	275
 <u>Grant condition 2</u>			
	<u>2017/18</u> <u>£'000</u>	<u>Recurring</u> <u>2018/19</u> <u>£'000</u>	<u>Recurring</u> <u>2019/20</u> <u>£'000</u>
Support for Integrated care Networks	989	989	989
Discharge to assess in Extra Care Housing	400	180	180
Sub total for grant condition 2	1,389	1,169	1,169
 <u>Grant condition 3</u>			
	<u>2017/18</u> <u>£'000</u>	<u>Recurring</u> <u>2018/19</u> <u>£'000</u>	<u>Recurring</u> <u>2019/20</u> <u>£'000</u>
Safeguarding	156	156	156
Direct payments Lead	90	0	0
Market Development and support	200	0	0
Sub total for grant condition 3	446	156	156
Total IBCF expenditure	4,184	1,700	1,600
IBCF Allocation	-4,184	-3,363	-1,677
Unallocated IBCF	0	-1,663	-77

- 8.3. By agreeing to the expenditure for 2017/18, this will lead to recurring expenditure in future years. The expectation is that this will also be funded from IBCF and will be the first call on the additional funding.
- 8.4. Any underspend on the grant allocation can be carried forward and used to support future years expenditure
- 8.5. It should be noted that IBCF is a finite resource and is only available for three years. Once the funding ceases this will potentially be a pressure on the service moving forward with recurring spend and therefore this will need to be closely monitored and reported on

accordingly.

9. PERSONNEL IMPLICATIONS

The majority of personnel implications are as set out in this report. In the event that the recommendations are agreed consultation with staff and their representatives will be required for those issues affecting the workforce, the outcome of which would be subject to a separate report at that time.

10. LEGAL IMPLICATIONS

The Improved Better Care Fund Grant Determination (2017/18): No 31/3064 is made by the Secretary of State under section 31 of the Local Government Act 2003. The grant may be used only for the purposes of meeting adult social care needs; reducing pressures on the NHS, including supporting more people to be discharged from hospital when they are ready; and ensuring that the local social care provider market is supported.

The Council is also required to:

- Pool the grant funding into the local Better Care Fund, unless the authority has written ministerial exemption
- Work with the relevant clinical commissioning group and providers to meet National Condition 4 (Managing Transfers of Care) in the Integration and Better Care Fund Policy Framework and Planning Requirements 2017-19; and
- Provide quarterly reports as required by the Secretary of State

Non-Applicable Sections:	
Background Documents: (Access via Contact Officer)	