Report No. CS18139

London Borough of Bromley

Decision Maker: HEALTH AND WELLBEING BOARD

Date: 7th June 2018

Decision Type: Non-Urgent Non-Executive Non-Key

Title: IMPROVED BETTER CARE FUND 2017/18 PERFORMANCE

REPORT

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Ward: Borough-wide

1. Summary

1.1 This report provides an overview of the performance of the Improved Better Care Fund (iBCF) 2017/18 on both expenditure and activity up to the end of March 2017.

2. Reason for Report going to Health and Wellbeing Board

2.1 This is the first performance report on the Improved Better Care Fund 2017/18 to keep the Board informed on the progress of the locally agreed iBCF projects.

3. SPECIFIC ACTION REQUIRED BY HEALTH AND WELLBEING BOARD AND ITS CONSTITUENT PARTNER ORGANISATIONS

3.1 That the Health and Wellbeing Board notes the performance and progress of the iBCF schemes and the latest financial position.

Health & Wellbeing Strategy

1. Related priority: Not Applicable

Financial

1. Cost of proposal: Up to £5,661k in 2018/19

2. Ongoing costs: £1,390m in 2019/20

3. Total savings: Not Applicable

4. Budget host organisation: London Borough of Bromley

5. Source of funding: Section 31 Grant, Ministry of Housing, Communities & Local Government (previously DCLG)

6. Beneficiary/beneficiaries of any savings: London Borough of Bromley and Bromley CCG

Supporting Public Health Outcome Indicator(s)

Not Applicable

4. COMMENTARY

- 4.1 The Improved Better Care Fund (iBCF) was a new funding element added to the Better Care Fund from 2017-18 which is paid to local government as a direct LA grant for spending on adult social care. The 2017 Spring Budget announced additional funding for social care from 2017-18 to 2019-20.
- 4.2 The London Borough of Bromley was awarded an iBCF grant of £4.2m in 2017/18, £3.4m in 2018/19 and a further £1.7m for 2019/20.
- 4.3 A report outlining spending recommendations for the iBCF 2017/18 was approved by the Executive on 10 October 2017 and the proposals were noted by the Health & Wellbeing Board on 30 November 2017.

Update on iBCF schemes

- 4.4 The iBCF schemes reflect the three grant conditions that the fund 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 providers market is supported.
- 4.5 The iBCF has also been invested in schemes that support the High Impact Change Model Managing Transfers of Care namely:
 - Focus on Choice
 - Enhancing Health in Care Homes
 - Home First/Discharge to Assess
 - Multi-Disciplinary/Multi Agency Teams

Transformation of Social Care

- 4.6 The recruitment and retention of appropriately qualified staff within social care including the recruitment and retention of domiciliary care staff is a key concern and the implication of not addressing this situation is that there will be insufficient care workers across health and social care within LBB, domiciliary care agencies, care homes and health care assistant roles in the community. To address this it was recommended that a proportion of iBCF funding be set aside to enable transformation initiatives, including the following:
 - a) Assessed and Supported Year in Employment (AYSE) Lead and Placements Coordinator
- 4.7 In order to develop the social care workforce and raise the profile of adult social care and the career progression opportunities of carers, it was proposed to recruit an AYSE lead and also Placements Coordinator to develop placement strategies for undergraduate social care students within LBB and manage those students through their placement.

Scheme Delivery

4.8 An AYSE lead was recruited in January 2018 but unfortunately left. The post has been readvertised and interviews have taken place. It is envisaged that the post will be appointed by mid June. In the meantime the Head of Service is taking the project forward including the coordination of an AYSE recruitment event which took place on 14th May and interviews for prospective social workers scheduled 29th – 31st May.

- 4.9 The Placements Coordinator has now been recruited and has engaged with London South East Colleges (Bromley Campus) in regards to the project.
- 4.10 The college currently place their students in a selection of care homes in the borough so it has been agreed that these homes along with the college will form the partnership for this project. A memorandum of understanding has been drawn up for all parties to sign and all parties are working to move forward with the project outcomes.
- 4.11 The college is confident that a more focused approach on placement content and a financial incentive for the care homes hosting the placements will improve the number of carers that come into the profession and more importantly, stay in the profession
 - b) Systems and Processes
- 4.12 It was also proposed to review the current referral processes used throughout adult social care to reduce duplication of work and to review all data being captured to enable a clear understanding of the demands and how they can be more efficiently managed to assist in planning for a sustainable service going forward.

4.13 A review of Adult Social Care is currently underway. The review will address referral processes and business systems to ensure that the service is able to meet demand and also in place for the Health and Social Care Integration in 2020.

Investment in Adult Social Care

- 4.14 It was agreed that funds would be set aside to invest in a number of short term temporary or fixed term appointments to cover the iBCF period in order to undertake the work outlined in the iBCF implementation plan. The funding would be used to recruit sufficiently skilled and experienced resources including the following:
 - a) Continuing Health Care (CHC) Lead Social Worker and CHC Care Manager
- 4.15 The recruitment of one full time social work CHC lead and a CHC care manager to support the lead social work, providing additional capacity to the workforce to deliver effective and relevant CHC assessments.

Scheme Delivery

- 4.16 The CHC Care Manager was recruited in December 2017 and has been working on the agreed outcomes including training sessions for staff. All teams have now been trained and refresher training is being organised including training for new staff on CHC processes and procedures. All staff have been advised about the importance of recording the correct information on the system.
- 4.17 A Lead Social Worker commenced in November 2017 but unfortunately has since left as a result of a more attractive pay offer and the post is now vacant. However the post is currently out to advert with a target date to appoint by 1st July.
 - b) Occupational Therapy Review/Trusted Assessor Resource
- 4.18 It was recommended that funds be invested in a resource to undertake a review of the current occupational therapy service with a view to reduce duplication and maximise staff efficiency.

- 4.19 The Occupational Therapy (OT) project lead commenced at the end of November 2017.
- 4.20 The focus of the project has been to address the OT waiting list backlog. The original waiting list of 196 clients reported in December 2017 has now been fully addressed. This has been achieved using additional agency staff and by outsourcing to an external agency.
- 4.21 The Occupational Therapy service review has also been completed and a report has been submitted for further discussion. The report identifies a proposed fit for purpose OT service structure to enable the service to meet current levels of demand and to avoid future unmanageable backlogs.
- 4.22 Formal consultation will be necessary prior to implementation if the proposals are agreed.
 - c) Transitions Programme Lead
- 4.23 It was also recommended that funds be invested in a management resource to undertake and develop a coordination role to support young people and their families transitioning from children to adult services across education, health and social care (in line with the Care Act 2014 and Children and Families Act 2014) to ensure that young people commencing the transition pathway have their needs met in the most effective and timely manner.

Scheme Delivery

- 4.24 The Transitions Programme Manager was appointed 16th April 2018.
- 4.25 Initial scoping work has taken place across a range of partners and key stakeholders in the local area and a transition protocol is currently being developed through consultation with services, clients and stakeholders which aligns to the requirements in the Children & Families Act 2014 and the Care Act 2014.
- 4.26 With regards to SEND Reforms ensuing social care engagement is strong and current baselines to demonstrate progress are being reviewed e.g. supported internships, work experience, 18-25yr olds in supported living, 16-19 NEETs and volunteering. These are key areas pertaining to transition that support the preparation for inspection and identifying relevant gaps in provision.
- 4.27 A set of challenging cases (including LGO) will be selected and reviewed carefully to identify issues and lessons learned in order to improve pathways.
- 4.28 The Transitions Programme Manager will also lead on the DfE 'preparation for employment' grant, which seeks to support young people with SEND to progress into employment, with sustained outcomes. The role will also support an increased awareness and engagement from employers to enable more young people to enter into a range of employment options. This supports life pathways as set out in the SEND Code of Practice and Children and Families Act.
 - d) Investment in 'Just Checking' software
- 4.29 The Just Checking activity monitoring system helps people live in their own homes for longer by showing family and professionals their day-to-day capabilities, or where support is needed. The information helps care providers deliver the right care at the right time; as well as reassuring family members, helping individuals stay at home for as long as possible.

4.30 The Just Checking equipment has now been purchased and is due to be rolled out to 10-15 units and will be assisted by Supported Living providers. The equipment will be used as part of the assessment and safeguarding process.

Public Health - Supporting JSNA priorities

4.31 It was agreed that funds would be used for one year for the investment in a pilot to reduce demands on social care through targeted drug and alcohol abuse social care. A designated social worker with a special interest in substance misuse would be recruited for this purpose to interface with the adult substance misuse service and a range of key partners to identify and support professionals to work effectively and consistently with substance using parents. The post will provide a legacy

Scheme Delivery

- 4.32 There has been a delay in implementing this scheme as it has been necessary to spend time modelling the programme to ensure that there is a legacy after the one year funding ends. This post will provide a legacy and build skills, knowledge and capacity. It is anticipated that by intervening early, there will be better outcomes for families.
- 4.33 The job description and person specification has now been drawn up and is currently being evaluated. It is anticipated that the post holder will be recruited by the end of May.
- 4.34 The specification/work plan and identification of key tasks, output and outcomes has also been drafted with the pilot scheduled to commence in June (subject to recruitment).

Housing Initiatives and research into older peoples housing needs

4.35 It was proposed that investment be made to carry out research into the housing and care needs of older people via a commissioned Older Persons Housing Needs Survey and to investigate the extent to which existing occupants of social housing with care needs would be appropriate for extra care housing which would help to better meet individual needs, prevent, reduce of delay long term care placements and potentially release social housing units to meet housing needs.

Scheme Delivery

- 4.36 Housing staff have been engaging with the market on delivery of the Older Persons Housing Needs Survey. The project has been tendered and is now awaiting a contract award. The target date to complete the survey is October 2018.
- 4.37 A project resource is currently being sourced to take forward the ECH investigation.

Care Homes Investment Options Appraisal

4.38 With increasing pressures to secure local nursing home placements, Bromley's investment in building a care home could assist in alleviating this issue through improved access to affordable, local bed spaces. As such it was agreed that funds be invested to undertake a high level options appraisal of potential sites and a full feasibility study on preferred options to be undertaken in the event that this is recommended by the initial business case.

4.39 A business case development manager was appointed 23rd March 2018 and an initial business case is currently being developed and which is on track to be presented in mid-June. Indicative timescales propose a full feasibility study on potential sites to be undertaken in August subject to the decision to proceed following the presentation of the business case.

Support for Integrated Care Networks (ICNs)

- 4.40 In 2017, three Integrated Care Networks began operating across Bromley. The care is delivered by a multi-disciplinary team (MDT) designed to help patients with the most complex care needs to stay well, remain independent and stay out of hospital where possible.
- 4.41 In October 2017 it was recommended that the Council formerly sign and join the ICN Alliance Agreement and that iBCF funds be invested in providing care management support in the ICNs and also for additional cost pressures on adult social care resulting from the ICNs.

Scheme Delivery

- 4.42 The Council joined the Alliance Agreement in October 2017.
- 4.43 An experienced Senior Care Manager and two short term Social Workers have now been appointed and will commence as full members on 21st May.
- 4.44 A Project Lead was appointed on 3rd April 2018 supporting the Operational Manager in working with Bromley Health Care and the Senior Care Manager to develop the KPI's and the pathway required. Several meetings have taken place and the recording of data to evidence the outcomes is being developed to compliment the current quarterly data submitted to DCLG.

Discharge to Assess in Extra Care Housing

4.45 It was agreed that iBCF funds would be invested to review the current assessment process within Extra Care Housing (ECH) with the aim of completing assessments within 4 to 6 weeks from hospital into an Extra Care Housing flat. It was also agreed that investment of up to 4 additional floating step down beds be made to provide accommodation for those unable to find suitable accommodation and at risk of becoming long term ECH tenants. The investment supports the discharge to assess (D2A) initiative with the aim of supporting adult social care and reducing delayed transfers of care from the hospital through increased out of hospital capacity.

Scheme Delivery

- 4.46 In discussion with providers, three units in Norton Court have been identified as additional step down flats and an inventory of works including furniture and appliances to bring each of the units up to standard was drawn up at the beginning of April with the majority of items having now been procured.
- 4.47 It is envisaged that the flats will be fully furnished and ready for release to discharge to assess usage by the end of May 2018.

Safeguarding – South London and Maudsley (SLAM)

4.48 A review of Bromley's response to safeguarding identified gaps in the provision to manage safeguarding investigations effectively within community and hospital settings in relation to mental health.

- 4.49 Additional resources have now been recruited and a project group was formed with SLAM in early October with membership from the senior team at SLAM and LBB. A project action plan guides the work of the group. A project manager has also been recruited and due in post by end of June 2018.
- 4.50 Meetings have been held with police in relation to AWOLS and gathering information as to the risks on the site and communication and training audit to determine pre and post understanding of staff awareness of how to refer.
- 4.51 The LBB QA referral has now been developed and investigation standards for the Bethlem management are to follow.
- 4.52 Meetings have been held with the four CCGs and the four Local Authorities who commission beds and provide services under S75 agreements. Further work is to be undertaken with the CCGs for assurance of risk management of the safeguarding referrals.

Direct Payments Lead

4.53 Bromley has historically had a low uptake of direct payments. It was therefore recommended that funds be invested to develop and increase the uptake of Direct Payments.

Scheme Delivery

- 4.54 A Direct Payments project lead was recruited in March 2018 and a Direct Payments Project Board has been set up to oversee the work. The board has met twice and will meet every 6 weeks going forward.
- 4.55 A number of factors have had an impact upon the uptake of direct payments and these are currently being reviewed including:
 - Review of the DP Process:
- 4.56 Currently the process is cumbersome and split across a number of teams and two commissioned services and there does not appear to be a high level of confidence among frontline staff in recommending the option. The review aims to simplify the process and make it easier and quicker.
 - Review of support for people with a direct payment:
- 4.57 Information is being gathered on how well the current support is working and the kind of support DP users would like to have in the future. Surveys are planned commencing from late May. The review will inform the decision as to whether to extend the current support contract (2+1+1) which expires in March 2019 and how to improve the support provided within the current contract.
 - Prepaid cards:
- 4.58 Prepaid cards will make it easier for people to use a direct payment by making paying for support easier and removing most of the arduous tasks in financial monitoring. They will transform the information available to Bromley on how people use a DP, and increase the Council's ability to manage risks.
 - Establishing an evidence base for our understanding of user requirements:

- 4.59 Currently there is very poor information on a) the experience of people using a direct payment in Bromley and what matters most to them b) how a DP impacts upon their services c) what they think of the support that is provided and d) on what they are able to and on what they would like to spend their DP. The same is true of the experience of personal assistants, carers and people who choose not to have a DP. This will be addressed by surveying each of these cohorts.
- 4.60 With regards to training and support for staff, a training plan is currently being drawn up but this will depend on the DP process going forward.
- 4.61 Current data held on direct payments is also poor and requirements on this going forward are being reviewed.

Market Development and Support

4.62 It was recommended that funds be invested as a contingency to raise the sustainability and performance of care homes including assisting in the training and development of a sustainable workforce and which may include providing emergency care funding for those providers in danger of failing financially.

Scheme delivery

- 4.63 This work is being coordinated via the joint LBB/BCCG Care Homes project which has the following three main workstreams:
 - (a) Strategy development
 - (b) Health and social care offer to care homes
 - (c) Quality
- 4.64 A survey of providers is currently being conducted as part of the training review and next steps include the analysis of LBB and CCG market activity for residential and nursing homes and to progress with the commissioning of primary care support to care homes.

5. IMPACT ON VULNERABLE PEOPLE AND CHILDREN

5.1 The Improved Better Care Fund is for investment into adult services and will have a positive impact on vulnerable people through investment into safeguarding and adult social care. However, those children transitioning to adulthood will be positively impacted by the Transitions lead post.

6. FINANCIAL IMPLICATIONS

- 6.1 Following approval at the Executive on 10th October, iBCF funding was released from the central contingency and allocated to the ECHS budget. The grant for 2017/18 was £4.184m.
- 6.2 As agreement was reached late in the financial year there has been delay in implementing the projects which has led to an underspend totalling £3.172m in 2017/18. The Executive, at its meeting on 21st May, approved the recommendation to carry forward this amount into 2018/19. In line with the report to Executive on 10th October, underspends can be carried forward to support expenditure in future years and spending commitments are in place.
- 6.3 The current budget and expenditure for the Improved Better Care Fund is detailed in the table below.

	2017/18 £'000	2018/19 £'000	2019/20 £'000
		BUDGET	
Transformation of Social Care (Adults, Mental Health & LD) / workforce development	130	430	60
CHC Lead Social Worker	17	25	0
CHC Care Manager	0	110	55
Safeguarding Project Lead (3 days per week)	0	20	0
General project work	0	50	0
IBCF Project Mgr. initial work	110	0	0
IBCF/BCF programme Mgr. ongoing	67	43	0
Finance Lead to support IBCF and BCF	0	170	85
Assistive Technology	0	50	25
Transitions Programme Lead	0	100	50
OT and Trusted Assessors Resources	42	8	0
Public Health, Supporting JSNA priorities	0	60	0
Housing initiatives and research into older peoples housing needs	40	160	0
Care Homes Investment Options Appraisal	0	1,566	0
Support for Integrated Care Networks (ICNs)	440	854	779
Discharge to assess in Extra Care Housing (ECH)	0	580	180
Safeguarding – SLAM	84	228	156
Direct Payments Lead	13	77	0
Market development and support	70	130	0
LD Growth as part of the Medium Term Financial Strategy	0	1,000	0
Total committed spend	1,013	5,661	1,390
Grant allocation	-1,013	-6,534	-1,677
Unallocated IBCF	0	-873	-287

6.4 There is still unallocated funding available in 2018/19 and 2019/20. This expenditure is subject to the agreement of the Executive.

7. LEGAL IMPLICATIONS

7.1 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 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
- Provide quarterly reports as required by the Secretary of State

Non-Applicable Sections:	Not Applicable.
Background Documents: (Access via Contact Officer)	Improved Better Care Fund (iBCF) Report No. CS18065