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**SLOUGH BOROUGH COUNCIL**

**REPORT TO:** Slough Wellbeing Board **DATE:** 17 November 2021

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**WARD(S):** All

**PART I**

**FOR INFORMATION**

**BETTER CARE FUND PLAN 2021/22**

1. **Purpose of Report**

The purpose of the report is to present Slough's Better Care Fund Plan 2021/22 for the Wellbeing Board's information. The report outlines the planned financial expenditure together with our approach and priorities for integration in Slough.

2. **Recommendation(s)/Proposed Action**

The Board is asked to note the contents of the Better Care Fund Plan 2021/22 which will be submitted on behalf of the Board on 16<sup>th</sup> November 2021 under delegated decision to the Director of Adult Social Care.

The Health and Social Care Partnership reviewed and agreed a draft proposal for the plan and new areas of investment in the meeting of 26<sup>th</sup> October 2021.

Following submission the plan goes through a regional and national assurance process which involves representatives from NHS England and the Association of Adult Social Services (ADASS).

3. **The Slough Joint Wellbeing Strategy, the JSNA and the Five Year Plan**

3a. **Slough Wellbeing Strategy Priorities**

The Better Care Fund programme is developed and managed between the local authority and CCG together with other delivery partners and aims to improve the health and wellbeing outcomes for the people of Slough. It directly supports delivery of priority three within the Slough Joint Wellbeing Strategy, that is:

- 3) Integration relating to Health and Social Care.

The BCF programme for this year and next is guided by priorities we have jointly set out and agreed in the Health and Wellbeing Plan for Slough place. The plan includes activities between the partners that contribute towards addressing health inequalities identified in the Slough Joint Needs Assessment.

### 3b. Five Year Plan Outcomes

The Slough BCF programme contributes to achieving the five year plan in respect of:

Outcome 2: Our people will be healthier and manage their own care needs

### 4. Other Implications

#### (a) Financial

The total size of the BCF Pooled Budget in 2021/22 is £15,047,515

This includes a minimum contribution of £10,034,713 from the CCG, the improved Better Care Fund (grant funding to local authority, including Winter Pressures Grant) £3,872,122 and Disabled Facilities Grant of £1,140,680.

Minimum CCG Contribution	£10,034,713
DFG	£1,140,680
iBCF	£3,872,122
<b>Total</b>	<b>£15,047,515</b>

The expenditure is across 36 schemes listed and described in the plan which are agreed and managed between the partners of the pooled budget agreement under section 75 agreement (NHS Act 2006).

These are listed in appendix B.

#### (b) Risk Management

The Health and Social Care Partnership acts the Programme Board for the BCF and oversees and monitors risks in relation to the BCF programme. A risk register identifies, and scores risks of delivery of the programme together with actions to mitigate or manage those risks.

#### (c) Human Rights Act and Other Legal Implications

No Human Rights implications arise.

There are legal implications arising from how funds are used, managed and audited within a Pooled Budget arrangement under section 75 of the NHS Act 2006.

The Care Act 2014 provides the legislative basis for the Better Care Fund by providing a mechanism that allows the sharing of NHS funding with local authorities.

(d) Equalities Impact Assessment

The BCF aims to improve outcomes and wellbeing for the people of Slough through effective protection of social care and integrated activity to reduce emergency and urgent health demand. Impact assessments are undertaken as part of planning of any new scheme or investment to ensure that there is a clear understanding of how various groups identified within the Equalities Act (2010) may potentially be affected.

(e) Workforce

There are future workforce development implications as we move towards closer integration of health and social care service. The pooling of budgets and closer collaborative working to deliver integrated care is creating new ways of working in partnership with others and BCF programme is therefore aligning together with other change programme activities happening across the wider Frimley Integrated Care System (ICS) as well as the local integration of services at place.

5. **Supporting Information**

Supporting information is within the contents of the plan (see appendices A & B).

6. **Comments of Other Committees**

An initial outline of this plan was presented and discussed at the Health and Social Care Partnership on 26<sup>th</sup> October to discuss and agree the expenditure plan and areas of investment. Discussion over the setting of ambitions for the BCF metrics has been taking place between the partners to align with their operational plans and activity, notably with the acute trust. The summary of these is included with the metrics narrative in the plan.

7. **Conclusion**

As partners to the Better Care Fund programme and pooled budget arrangements the Council and the CCG have a shared commitment in striving to achieve best outcomes for residents and communities in Slough.

Our vision for integrated care locally remains largely unchanged in our ambition to achieve a shift change from reactive to more proactive health and social care to enable more people to have healthier, safer and more independent lives in their own home and community for longer being supported with the right care in the right place at the right time.

Through this past year the BCF programme has inevitably been affected by the pressures of Covid-19 pandemic. Whilst tackling the pandemic and working to protect vulnerable groups and communities this has led to a backlog of non-Covid related care. There are longer waiting lists for non-urgent treatment and operations, people experiencing longer lasting affects of Covid and many more

whose health has deteriorated and deconditioned through protracted periods in lockdown.

While integrated working was accelerated and enhanced during the Covid-19 pandemic, capacity issues are amplified across the system due to ongoing workforce challenges and recruitment difficulties. Covid also threw into sharp relief the existing health inequalities present in our population and the potential for there to be a disproportionate impact on local lives and livelihoods. Additional investments through BCF in this year is aimed at creating capacity in the system and proactive, early interventions to help alleviate pressures and improve outcomes.

8. **Appendices Attached**

'A' - BCF 2021/22 narrative plan

'B' - Expenditure plan summary

9. **Background Papers**

'1' - Slough Health and Social Care Plan 2021/22