

Better Care Fund 2024-25 Quarter 1 Reporting Template

1. Guidance for Q1

Overview

The Better Care Fund (BCF) reporting requirements are set out in the BCF Planning Requirements document for 2023-25, which supports the aims of the BCF Policy Framework and the BCF programme; jointly led and developed by the national partners Department of Health and Social Care (DHSC), Ministry of Housing, Communities and Local Government (MHCLG), NHS England (NHSE), working with the Local Government Association (LGA) and the Association of Directors of Adult Social Services (ADASS). The addendum to the Policy Framework and Planning Requirements published in March 2024 provides further information on the reporting requirements for 24-25.

The key purposes of BCF reporting are:

- 1) To confirm the status of continued compliance against the requirements of the fund (BCF)
- 2) To confirm actual income and expenditure against BCF plans, actual outputs against planned, and progress against metrics
- 3) To identify areas of challenge and good practice to inform national conversations around support requirements
- 4) To enable the use of this information for national partners to inform future planning frameworks and for local areas to inform improvements

The information submitted within reports should be used by ICBs, local authorities, HWBs and service providers to understand and improve both planning processes and the integration of health, social care and housing.

Q1 reporting will only focus on the Discharge Fund.

Requirement

BCF reports submitted by local areas are required to be signed off by HWBs, including through delegated arrangements as appropriate, as the accountable governance body for the BCF locally. Aggregated reporting information will be published on the NHS England website.

Note on entering information into this template

Throughout the template, cells which are open for input have a yellow background and those that are pre-populated have a blue background and those that are not for completion are in grey, as below:

Data needs inputting in the cell

Pre-populated cells

Not applicable - cells where data cannot be added

Note on viewing the sheets optimally

To more optimally view each of the sheets and in particular the drop down lists clearly on screen, please change the zoom level to between 90% - 100%. Most drop downs are also available to view as lists within the relevant sheet or in the guidance tab for readability if required.

The row heights and column widths can be adjusted to fit and view text more comfortably for the cells that require narrative information.

Please **DO NOT** directly copy/cut & paste to populate the fields when completing the template as this can cause issues during the aggregation process. If you must 'copy & paste', please use the 'Paste Special' operation and paste 'Values' only.

The details of each sheet within the template are outlined below.

Checklist (2. Cover)

1. This section helps identify the sheets that have not been completed. All fields that appear as incomplete should be complete before sending to the BCF team.
2. The checker column, which can be found on the individual sheets, updates automatically as questions are completed. It will appear 'Red' and contain the word 'No' if the information has not been completed. Once completed the checker column will change to 'Green' and contain the word 'Yes'
3. The 'sheet completed' cell will update when all 'checker' values for the sheet are green containing the word 'Yes'.
4. Once the checker column contains all cells marked 'Yes' the 'Incomplete Template' cell (below the title) will change to 'Template Complete'.
5. Please ensure that all boxes on the checklist are green before submitting to england.bettercarefundteam@nhs.net and copying in your Better Care Manager.

2. Cover

1. The cover sheet provides essential information on the area for which the template is being completed, contacts and sign off. Once you select your HWB from the drop down list, relevant data on metric ambitions and spend from your BCF plans for 2023-24 will prepopulate in the relevant worksheets.

2. HWB sign off will be subject to your own governance arrangements which may include a delegated authority.

3. Please note that in line with fair processing of personal data we request email addresses for individuals completing the reporting template in order to communicate with and resolve any issues arising during the reporting cycle. We remove these addresses from the supplied templates when they are collated and delete them when they are no longer needed.

3. Spend and activity

The spend and activity worksheet will collect cumulative spend and outputs for Q1 for schemes against planned values and scheme types.

Once a Health and Wellbeing Board is selected in the cover sheet, the spend and activity sheet in the template will prepopulate data from the 24-25 BCF plans.

You should complete the remaining fields (**highlighted yellow**) with incurred expenditure and actual numbers of outputs delivered in Q1.

- Actual expenditure to date in column J. Enter the amount of spend to date on the scheme.

- Outputs delivered to date in column L. If a unit is shown in column L for a scheme, enter the number of outputs delivered to date. For example, for a reablement and/or rehabilitation service, the number of packages commenced. If no unit is attached, enter NA.

For reporting of outputs, the collection only relates to scheme types that include outputs. These are shown below:

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Scheme Type	Units
Assistive technologies and equipment	Number of beneficiaries
Home care and domiciliary care	Hours of care (unless short-term in which case packages)
Bed based intermediate care services	Number of placements
Home based intermediate care services	Packages
DFG related schemes	Number of adaptations funded/people supported
Residential Placements	Number of beds/placements
Workforce recruitment and retention	Whole Time Equivalents gained/retained
Carers services	Number of Beneficiaries

- **Implementation issues in columns N and O** - If there have been challenges in delivering or starting a particular service (for instance staff shortages, or procurement delays) please answer yes in column P and briefly describe the issue and planned actions to address the issue in column Q. If you answer no in column P, you do not need to enter a narrative in column Q.

3. Spend and activity (new schemes)

At the top of tab 3, in cell I3, there is a hyperlink leading you to the "add new schemes" section.

For any additional Discharge Fund schemes that have been introduced in Q1, please fill in the details of these schemes in the "add new schemes" section.

If no new schemes have been introduced since the 24-25 plan then this can be left blank.

When all questions have been answered and the validation boxes below have turned green you should send the template to england.bettercarefundteam@nhs.net saving the file as 'Name HWB' for example 'County Durham HWB'.



	Complete:
2. Cover	Yes
3. Spend and activity	Yes
3.Spend and activity (new schemes)	Yes

[<< Link to the Guidance sheet](#)

[^^ Link back to top](#)

3. Spend and activity (Discharge Fund only)

Selected Health and Wellbeing Board:

Checklist

Scheme ID	Scheme Name	Brief Description of Scheme	Scheme Type
61	Home Care/Care Home sustainability	To meet the challenges of escalating cost pressures within this service, relating to	Workforce recruitment and retention
62	SYHA Discharge Support	Additional housing inreach on to ward to support with housing issues to support	Housing Related Schemes
63	Community Equipment	Supply and delivery of additional Community based equipment to increase ability	Assistive Technologies and Equipment
64	Alternative to Admission	Spot purchase short term stay to help manage a crisis situation.	Bed based intermediate Care Services (Reablement, rehabilitation, wider short-
65	Hospice - Clinical Nurse Specialist	Clinical Nurse Specialist which will enable increased community activity allowing	Workforce recruitment and retention
66	Hospice - Increased Inpatient Unit costs	Improve the management of discharge from the hospice thus increasing bed availability	Other
67	CHC – assessments	Increase number and speed of assessments to improve flow	Other
68	Integrated Discharge Team	Additional avoidance / front door capacity	High Impact Change Model for Managing Transfer of Care
69	Reablement expansion	Additional hours dedicated to hospital discharge + funding for a Deputy Manager post	Home-based intermediate care services
70	Davies Court Intermediate Care	Support discharge capacity and admission avoidance	Bed based intermediate Care Services (Reablement, rehabilitation, wider short-
71	Rothercare - installer	Additional post to support discharge and avoidance	Enablers for Integration
72	Housing Officer	Housing officer align to ACT/IDT	High Impact Change Model for Managing Transfer of Care

73	CHC assessors	CHC co-ordinators in practice hub	High Impact Change Model for Managing Transfer of Care
74	MH Discharge	MH discharge co-ordinator due to DToC	High Impact Change Model for Managing Transfer of Care
75	Intermediate Care	Athorpe Lodge 24 Community Beds fee Uplift	Bed based intermediate Care Services (Reablement, rehabilitation, wider short-
77	Trusted Assessor for Care Homes	Trusted Assessor for Care Homes over 7 days	High Impact Change Model for Managing Transfer of Care
78	Administrative Support	Administrative Support	Other
80	Home Care	Home Care Temporary Block Capacity - if capacity shortfall home care	Home Care or Domiciliary Care
76	Short Term spot placements	Short Term spot beds to support Hospital Discharges	Bed based intermediate Care Services (Reablement, rehabilitation, wider short-
87	Complex needs Intermediate Care	1:1 capacity for complex or double handed IMC cases	Bed based intermediate Care Services (Reablement, rehabilitation, wider short-
88	Proportionate Care Lead	To look at safe single handed care in bed and community based locations	Integrated Care Planning and Navigation
89	Vocationally Qualified Assessment Officer	To support the Proportionate Care Lead for single handed care	Integrated Care Planning and Navigation
90	Waiting Lists / LD Review Officer	To support timely assessments and reviews	Integrated Care Planning and Navigation
91	Operations Manager (Provider Services)	Additional capacity to support service transformation	Other
92	Home from Hospital - extension	Bridging service prior to RMBC enablement service capacity	High Impact Change Model for Managing Transfer of Care
93	Deputy Head of Mental Health Services	Oversight and management of the Approved Mental Health Professional Service	Integrated Care Planning and Navigation
94	Additional capacity at front door	To support timely assessments	Integrated Care Planning and Navigation
95	Additional Commissioning Capacity	To carry out data entry requirements to identify risks and promote quality in	Prevention / Early Intervention

Adding New Schemes (Discharge Fund only):

Scheme ID	Scheme Name	Brief Description of Scheme	Scheme Type
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ing Template

[Add new schemes](#)

Rotherham

Yes

Sub Types	Source of Funding	Planned Expenditure	Actual Expenditure to date
Improve retention of existing workforce	ICB Discharge Funding	£1,933,930	£483,483
	ICB Discharge Funding	£60,900	£15,225
Community based equipment	ICB Discharge Funding	£157,500	£39,375
Other	ICB Discharge Funding	£157,500	£39,375
	ICB Discharge Funding	£68,250	£17,063
Other	ICB Discharge Funding	£63,000	£15,750
Additional or redeployed capacity from	ICB Discharge Funding	£31,920	£7,980
Multi-Disciplinary/Multi-Agency Discharge	Local Authority Discharge Funding	£120,000	£30,074
Reablement at home (to support discharge)	Local Authority Discharge Funding	£437,037	£37,495
Bed-based intermediate care with rehabilitation	Local Authority Discharge Funding	£500,000	£65,022
Data Integration	Local Authority Discharge Funding	£30,000	£0
Housing and related services	Local Authority Discharge Funding	£50,000	£12,640

Early Discharge Planning	Local Authority Discharge Funding	£150,000	£27,706
Early Discharge Planning	Local Authority Discharge Funding	£100,000	£25,717
Bed-based intermediate care with rehabilitation	Local Authority Discharge Funding	£93,000	£0
Trusted Assessment	Local Authority Discharge Funding	£100,000	£12,103
	Local Authority Discharge Funding	£40,000	£10,000
Short term domiciliary care (without	Local Authority Discharge Funding	£509,150	£0
Bed-based intermediate care with rehabilitation	Local Authority Discharge Funding	£138,000	£104,018
Bed-based intermediate care with rehabilitation	Local Authority Discharge Funding	£100,000	£22,082
Assessment teams/joint assessment	Local Authority Discharge Funding	£56,400	£0
Assessment teams/joint assessment	Local Authority Discharge Funding	£33,600	£0
Assessment teams/joint assessment	Local Authority Discharge Funding	£200,000	£44,010
0	Local Authority Discharge Funding	£75,000	£0
Early Discharge Planning	Local Authority Discharge Funding	£185,000	£46,250
Assessment teams/joint assessment	Local Authority Discharge Funding	£85,462	£21,366
Assessment teams/joint assessment	Local Authority Discharge Funding	£70,934	£18,156
Risk Stratification	Local Authority Discharge Funding	£20,000	£0

Sub Types	Source of Funding	Planned Expenditure	Actual Expenditure to date
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Existing schemes

	Yes		Yes
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Planned outputs	Outputs delivered to date (estimate if unsure) (Number or NA)	Unit of Measure	Have there been any implementation issues?
1,378	344	WTE's gained	No
	NA		No
183	45	Number of beneficiaries	No
2	2	Number of placements	No
	NA	WTE's gained	No
	NA		No
	NA		No
	2		No
92	23	Packages	No
190	45	Number of placements	No
	0		Yes
	1		No

	2		No
	2		No
288	72	Number of placements	No
	2		No
	1		No
41	0	Hours of care (Unless short-term in which case it is packages)	Yes
56	48	Number of placements	No
383	87	Number of placements	No
-	0		No
-	0		No
-	3		No
-	0		No
-	97		No
-	1		No
-	2		No
-	0		No

Planned outputs (Number or NA)	Outputs delivered to date (estimate if unsure) (Number or NA)	Unit of Measure	Have there been any implementation issues?
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Yes

If yes, please briefly describe the issue(s) and any actions that have been/are being implemented as a result.

Funding will be re-allocated to support winter planning.

If yes, please briefly describe the issue(s) and any actions that have been/are being implemented as a result.

