

# Better Care Fund Criteria

## 1 What is the Better Care Fund?

Better Care Funding is available for individuals to receive funding free at the point of delivery.

This is a 'Pooled Budget' of Health and Social Care Funding. The aim of this funding stream is to improve Partnership working and remove barriers to service integration, thus ensuring the smooth transition of care across boundaries.

This funding is in line with national guidance related to Intermediate Care. Therefore, interventions are for a maximum period of 6 weeks. The aim is to regain or maintain an individuals' ability to live independently and be optimised within this timescale. Only in exceptional circumstances will an extension of funding be considered. In each case, this must be requested from the budget holder.

The provision of Better Care Funding is to provide services to an individual within the home, normal place of residence or designated Intermediate Care bed as an alternative to admission or on discharge from hospital.

## 2 The criteria for Intermediate Care this is set out below:

### 2.1 Home Based Intermediate Care

To **prevent hospital admission** Intermediate Care interventions (rehabilitation and/or reablement) will take place at home in situations such as:

- An acute exacerbation of long term illness
- COPD
- Diabetes
- High blood pressure or
- Acute illness including chest infection, urinary tract infection,
- Period of delirium,
- Uncomplicated falls,
- Acute progression of a long term condition.

**BCF is not to be used when a chronic deterioration has resulted in a carer crisis, of not managing their caring role.**

**2.2 To provide rehabilitation and/or Telford and Wrekin Council, enablement interventions to support discharge from hospital** for individuals with 'uncomplicated' discharge care needs including care packages i.e. where optimisation is expected within the six week timescale.

This will include:

- Frailty related conditions
- Recovering from a respiratory, urinary tract infection, acute delirium or sepsis, fracture, routine surgery, following a fall
- A person in receipt of a long term package, when an 'acute' episode causes decline resulting in hospital admission.

### 2.3 Bed Based Intermediate Care

Bed based Intermediate Care will be through:

- Block purchased beds currently: 20 at Hatton Court 2 at Lightmoor View
- 'Spot purchase' admissions to a bed beyond the designated intermediate care beds.

Spot purchase is utilised in the following situations:

- Insufficient capacity of block purchased Intermediate Care beds
- To assess the individuals needs following discharge from hospital, when it may not be clear if they will benefit from a period of rehabilitation. Clinical presentation include following a stroke, or acute decline of a long term condition. (for both step up or down)

### **3 Exclusions to BCF Pooled Budget Funding**

Better Care Funding is not appropriate in complex conditions, where the individual may require high level support which may be complex and/or high risk in their own home or a bed based provision.

#### **3.1. NHS Temporary Funding, Local Definitions (May 2018) will apply**

This funding is available and must be agreed with Telford and Wrekin CCG Head of Complex Care or Lead Commissioner for the Better Care Fund and Care Closer to Home

- A person is in a Plaster of Parris or similarly immobile and are unable to meet their own basis needs due to the temporary limitation.
- Where they are requiring pressure care interventions or any similar healthcare intervention that is required prior to them being able to access enablement funded via the Better care fund (hospital avoidance or discharge to enable).
- A person will in a foreseeable future need enablement services provided under the BCF in order to return to their optimal level of functioning.

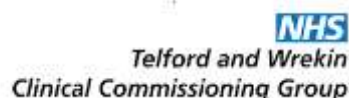
Information to be supplied

- Details of the patients identity
- Fact Finding Assessment
- Rationale for need for Temporary NHS Funding
- Cost of care
- Date of commencement of support
- Estimated date of enablement commencement

Once agreed either verbally or by Email an Email trail must be sent between the CCG to the LA confirming funding. The Email will need to be retained on the Persons Council Case file, for audit purposes.

Request for Temporary NHS Funding must be made as soon as feasible and ideally before the placement takes place, any placement made without prior approval is made at the risk of the placing team.

Temporary NHS Funding is time limited with an agreed start date and an end date. Beyond the agreed date, funding will be from the BCF. There is no notice period at the end of Temporary NHS Funding as the NHS will still be funding via the BCF. Case management and contract responsibility will lie with the Council and care costs will be recharged in full to the Complex Care Team.



To ensure reimbursement of these cost from the CCG, all agreed costs of NHS Temporary care, the agreement e mail will be immediately forwarded to Telford and Wrekin ASC Finance Team, this is the Case Holders responsibility.

### **3.2. Interim Funding.**

The NHS will commission care for interims where a person is in/going to a long term placement but the person has not yet at their optimal level of functioning. Where it is clear that rehabilitation is needed a Checklist will not always be required, but a Fact Finding Assessment (FFA) can suffice. Active treatment will be being provided in the placement by the NHS or commissioned by the NHS in order to be able to undertake treatment. Contract and Case management will lie with the Complex Care team. Once the person's health needs have stabilised and ongoing care needs can be assessed a Checklist will be completed and DST completed if required. The outcome of the DST will determine the ongoing funding responsibility. Where the NHS is not the commissioner for ongoing care 7 days' notice will be given to the council.

#### **4. At the end of BCF**

Prior to the ending of the BCF period, if ongoing support is required, the case manager will ensure that a Continuing Healthcare Checklist must be completed, with the individual.

See Continuing Healthcare Guidance

## **5 Footnotes**

Where Council block purchased beds are used for spot purchasing of Intermediate Care, these must be charged / costed to the pooled budget. These beds should not be used unless in **extreme** emergency

Funded Nursing Care (FNC) will be paid from the BCF for an agreed number of beds.

The issue of the appropriate funding stream should not allow the individual to be admitted to hospital, where not required or their discharge be delayed.

Earliest possible discussions should take place to discuss the funding stream.

**Authors & Date:** April 2017

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