

Date of meeting:	12 July 2018		
Item Title:	Better Care Fund Monitoring		
Executive Summary:	Summary report of the Better Care Fund 2017/18 year-		
	end position, quarterly reporting, and 2018/19 plan refresh.		
Recommendations for	The Board is asked for comments and feedback on the		
the Board:	report.		
Relevance to Joint	Maintaining Wellbeing and Resilience		
Health and Wellbeing			
<u>Strategy</u> :			
Financial implications (if	N/A		
any):			
Consultation (undertaken	N/A		
or planned):			
Item author and	Paul Keough – <u>paul.keough@nhs.net</u>		
contact details:			

1. Background

The Better Care Fund (BCF) is a programme spanning both the NHS and local government which seeks to join-up health and care services, so that people can manage their own health and wellbeing, and live independently in their communities for as long as possible.

It has been created to improve the lives of some of the most vulnerable people in our society, placing them at the centre of their care and support, and providing them integrated health and social care services, resulting in an improved experience and better quality of life.

This report summarises Better Care Fund performance for 2017/18. It also provides brief updates on BCF quarterly monitoring and the refresh of the two-year BCF Plan for 2018/19.

BCF quarterly monitoring template ensures that Health and Wellbeing Board (HWB) areas continue to meet the requirements of the BCF over the lifetime of the plan. It also enables areas to provide insight on health and social care integration.

2. BCF Performance 2017/18

2.1 Metrics Overview

The national BCF policy framework establishes the national metrics for measuring progress of integration through the BCF. In summary these are:

- a. Non-elective admissions;
- b. Admissions to residential and care homes;
- c. Effectiveness of reablement; and
- d. Delayed transfers of care;

Information on all four metrics is collected nationally however local areas monitor performance across these four areas to provide indicative updates on performance.

Indicator	2017/18 Target	2017/18 Year to Date Actual	Required Trend
1. Non-Elective Admission (Specific Acute)	88,674	96,164	Lower
2. Long-term support needs of older people (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population.	595.4	624.7	Lower
 Proportion of older people 65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services. 	85.3%	89.7%	Higher
4. Delayed transfers of care from hospital per 100,000 population.	1,266.1	1,360.4	Lower

2.2 Non-Elective Admissions (Specific Acute)

This metric measures the outcome, a reduction in the number of unplanned acute admissions to hospital.

Effective prevention and risk management of vulnerable people through effective, integrated Out-of-Hospital services will improve outcomes for people with care needs and reduce costs by avoiding preventable acute interventions and keeping people in non-acute settings.

For 2017/18, the number of Non-elective Admissions across West Sussex is above plan by 7,490 (8.4%). The excess is partially due to a revision in the counting of Non-Elective Admissions although, if this change had not occurred, Non-Elective Admissions would still be above plan by at least 1,000.

2.3 Residential and Nursing Care Admissions

This metric measures the outcome, reducing inappropriate admissions of older people (65+) into residential care.

Avoiding permanent placements in residential and nursing care homes is a good measure of delayed dependency, and the inclusion of this measure in the framework supports local health and social care services to work together to reduce avoidable admissions. Research suggests that, where possible, people prefer to stay in their own home rather than move into residential care. However, it is acknowledged that for some client groups that admission to residential or nursing care homes can represent an improvement in their situation.

For 2017/18, the number of admissions is above plan by 29.3 (4.9%) but marginally below the number at the same time last year. This is partly due to growing demographic and complexity issues along with increases in demand and in Non-Elective Admissions. In the medium term the County Council is developing plans to invest in Extra Care Housing as an alternative to residential care. (Note that the number of admissions may increase due to the late processing of data.)

2.4 Reablement/Rehabilitation

This metric measures the outcome, increase in effectiveness of these services whilst ensuring that the number of those offered service does not decrease.

Improving the effectiveness of these services is a good measure of delayed dependency, and the inclusion of this measure in the scheme supports local health and social care services to work together to reduce avoidable admissions. Ensuring that the rate at which these services are offered is also maintained or increased also supports this goal.

For 2017/18, performance across West Sussex is above plan and has improved on last year. In 2018/19, the development of Discharge to Assess (D2A) and the roll out of the Council's new reablement service will have further impact.

2.5 Delayed Transfers of Care

This metric measures the outcome, effective joint working of hospital services (acute, mental health and non-acute) and community-based care in facilitating timely and appropriate transfer from all hospitals for all adults.

This is an important marker of the effective joint working of local partners, and is a measure of the effectiveness of the interface between health and social care services. Minimising delayed transfers of care (DToCs) and enabling people to live independently at home is one of the desired outcomes of social care. The DToC metric reflects the system wide rate of delayed transfers and activity to address it will involve efforts within and outside of the BCF.

For 2017/18, the number of delayed days across West Sussex is above plan by 2,585 (7.5%). This is in the context of centrally-set and extremely challenging reduction targets. This target was met for December 2017 and performance was very close to the target in February and March 2018. This provides a foundation for improved performance in 2018/19.

3. BCF Quarterly Return Q1 2018/19

3.1 Overview

The Better Care Support Team published the template for the Q1 2018/19 BCF return on Monday 11th June. This incorporates the previously separately reported Improved Better Care Fund Quarterly Return covering the grant monies paid directly to local authorities. There are no other significant changes.

Work on completing the return is in progress. The submission date is 20th July following sign-off from the HWB Chairman.

Note that we expect this return to reference the BCF Plan for 2017-18. The plan refresh exercise summarised below does not currently have a published timeline.

4. BCF Plan Refresh 2018/19

4.1 High-level Requirement

The BCF plan for West Sussex covers the period 2017-2019 and, as per the guidance, HWB areas will be given the opportunity to refresh their plans for 2018/19. Dates for this exercise are not currently available.

The refresh will cover the following topics:

- Guidance on implementing agreed BCF plans
- Confirmation of monitoring process and escalation
- Process for refreshing BCF plans and metrics for 2018-19
- Support offer for local areas

4.2 Expected Scope of Refresh for West Sussex

For West Sussex the main area of change is likely to be around revised metric targets for Non-Elective Admissions. It is possible that a change to Delayed Transfers of Care targets is pending.

Each CCG submitted revised activity plans in April 2018. The BCF Non-Elective Admissions targets are derived from these operational plans.

For Delayed Transfers of Care, we expect some revision of targets. At the time of writing, it is not known whether these will apply in general or only to specific HWB areas.