Report to West Sussex Health and Wellbeing Board

25 January 2024

Better Care Fund Monitoring Q2 2023-24

Appendix 1: BCF Q2 Quarterly Report 2023-24 Summary Paper

Summary

This paper summarises the approved BCF Q2 Quarterly Report submitted on 31 October 2023. The paper is necessitated by the complex formatting of the Excel report which cannot be presented in PDF or other suitable formats.

The guidance and cover sheet are omitted for brevity, but all following information is drawn directly from the report with no omissions or additions.

National Conditions

The report confirmed that West Sussex continued to meet the following national conditions:

1. Jointly agreed plan

2. Implementing BCF Policy Objective 1: Enabling people to stay well, safe and independent at home for longer

3. Implementing BCF Policy Objective 2: Providing the right care in the right place at the right time

4. Maintaining NHS's contribution to adult social care and investment in NHS commissioned out of hospital services.

Confirmation that the BCF section 75 agreement was due to be signed-off on 20 November 2023.

Metrics

Metric	Definition	Q1 Actual	Assessment of progress against the metric plan for the reporting period	Challenges and any support needs	Achievements - including where BCF funding is supporting improvements
Avoidable Admissions	Unplanned hospitalisation for chronic ambulatory care sensitive conditions (NHS Outcome Framework indicator 2.3i) **2023/24 Plan:** **Q1:** 142.9 **Q2:** 120.3 **Q3:** 117.8 **Q4:** 120.2	134.4	On track to meet target	At Q1 2023/24 the avoidable admission rate is below the planned figure of 142.9. In both 2021/22 and 2022/23, the highest figures were recorded in Q1 and, if this trend continues, the target will be met.	N/A

Metric	Definition	Q1 Actual	Assessment of progress against the metric plan for the reporting period	Challenges and any support needs	Achievements - including where BCF funding is supporting improvements
Discharge to normal place of residence	Percentage of people who are discharged from acute hospital to their normal place of residence **2023/24 Plan:** **Q1:** 88.8% **Q2:** 88.5% **Q3:** 88.5% **Q4:** 88.8%	90.6%	On track to meet target	N/A	At Q1 2023/24 performance remains above target and has improved over 7 successive quarters.

Metric	Definition	Q1 Actual	Assessment of progress against the metric plan for the reporting period	Challenges and any support needs	Achievements - including where BCF funding is supporting improvements
Falls	Emergency hospital admissions due to falls in people aged 65 and over, directly age standardised rate per 100,000 **2023/24 Plan:** 2,058.1	561.2	Not on track to meet target	At Q1 2023/24 the Falls rate is above the planned figure of 514.5. However, it is below the 5-year average for Q1, and the average figure for all quarters over the past 4 years. In both 2021/22 and 2022/23, the highest figures were recorded in Q1. Therefore, it is possible that performance in the subsequent quarters of 2023/24 will still bring performance within plan, which assumed a 3% reduction quarter on quarter, when taken over the year as a whole.	N/A

Metric	Definition	Q1 Actual	Assessment of progress against the metric plan for the reporting period	Challenges and any support needs	Achievements - including where BCF funding is supporting improvements
Residential Admissions	Rate of permanent admissions to resdential care per 100,000 population (65+) **2023/24 Plan:** 500	N/A	On track to meet target	In-year local data indicates that we are on track to meet this target. Adult Social care are continuing to work towards reducing new admissions to residential settings, while increasing non-residential options. This has been effective and the percentage of res to non-res customers has been moving in the right direction, however the average cost of placements is increasing, due to market pressures and complexity of customer need.	N/A

Metric	Definition	Q1 Actual	Assessment of progress against the metric plan for the reporting period	Challenges and any support needs	Achievements - including where BCF funding is supporting improvements
Reablement	Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services **2023/24 Plan:** 68.2%	N/A	Not on track to meet target	In-year local data indicates that performance continues to be below the target set and this metric, no longer part of the Adult Social Care Outcomes Framework, is problematic as recognised in the ADASS review. There has been an increase to the level of dependence and complexity of people referred to the reablement service over the last 12 months. This is due to an increase in dependency in the relevant population, particularly those being discharged from hospital, and also an increased focus on ensuring as many people as possible benefit from referral to a reablement service, so a wider application of the criteria for the service.	An alternative measure for Reablement of 'Adults that did not receive long term support after a period of reablement support' reflects the proportion of new clients who received short-term services during the year, where no further request was made for ongoing support. Since short-term services aim to reable people and promote their independence, this measure provides evidence of a good outcome in delaying dependency or supporting recovery. For Q1 2023/24 this recorded an actual of 81.7% against an annual target of 85.5% with the performance trajectory improving when compared to 2022/23.

Capacity and Demand - Assumptions

1. How of your estimates for capacity and demand changed since the plan submitted in June: Please include how learning from the last 6 months was used to arrive at refreshed projections?
We refreshed capacity with latest available information and accounted for changes in current service provision. There are no significant changes to the demand projections.

2. Please outline assumptions used to arrive at refreshed projections (including to optimise length of stay in intermediate care and to reduce overprescription of care.) Please also set out your rationale for trends in demand for the next 6 months (e.g. how have you accounted for demand over winter?)
Demand:
Hospital Discharge: Patients are assessed following discharge for ongoing care into a service which provides rehabilitation and reablement. These patients are denoted in the below as rehabilitation. Planning submission for Sussex ICB was (as per guidance) based upon UHSx and ESHT. The below also includes estimated discharges from SaSH and community services. Figures are included where available and validated. Where supporting information allows for estimate they have been included, but services do not neatly fall into these categories.
Capacity:
The position was adjusted based on latest available data and signed off winter plans.

3. What impact have your planned interventions to improve capacity and demand management for 2023-24 had on your refreshed figures? Has this impact been accounted for in your refreshed plan?
Plans for increased capacity over winter have been applied as signed off by the system.

4. Do you have any capacity concerns or specific support needs to raise for the winter ahead?
No.

5. Please outline any issues you encountered with data quality (including unavailable, missing, unreliable data.)
Not all services report on the currencies in this submission. Figures are included where available and validated. Where supporting information allows for estimate they have been included, but services do not neatly fall into these categories.

6. Where projected demand exceeds capacity for a service type, what is your approach to ensuring that people are supported to avoid admission to hospital or to enable discharge?
Not all services report on the currencies in this submission. Figures are included where available and validated. Where supporting information allows for estimate they have been included, but services do not neatly fall into these categories. Projected demand reflects the unmitigated position that does not fully take account of a number of initiatives underway locally that is taking an improvement approach to improving productivity and optimising pathways. It is believed that these efficiencies will reduce the position that has been reported. Moreover, additional schemes to improve discharge have been approved for Q3 and Q4, which are now being mobilised and will have a further positive effect.

Capacity and Demand - Hospital Discharge

Capacity - Hospital Discharge	Pre-populated from plan:					Refreshed planned capacity (not including spot purchased capacity):					Capacity that you expect to secure through spot purchasing:				
Service Area	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24
Social support (including VCS) (pathway 0)	130	130	130	130	130	130	130	130	130	130	0	0	0	0	0
Reablement and Rehabilitation at home (pathway 1)	442	456	456	429	456	1066	1102	1102	1031	1102	0	30	30	30	30
Short-term domiciliary care (pathway 1)	23	23	23	23	23	23	23	23	23	23	0	0	0	0	0
Reablement and Rehabilitation in a bedded setting (pathway 2)	353	353	353	353	353	353	353	353	353	353	0	30	60	60	60
Short-term residential/nursing care for someone likely to require a longer-term care home placement (pathway 3)	114	114	114	114	114	114	114	114	114	114	0	0	0	0	0

Demand - Hospital Discharge	Pre-populated from plan:					Refreshed expected number of referrals:				
Social support (including VCS) (pathway 0)	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24
Total	124	128	128	119	128	135.8810	140.4104	140.4104	131.3517	140.4104
Queen Victoria Hospital NHS Foundation Trust	2	2	2	1	2	1.7156	1.7728	1.7728	1.6585	1.7728
Surrey and Sussex Healthcare NHS Trust	29	30	30	28	30	31.2551	32.2969	32.2969	30.2132	32.2969
University Hospitals Sussex NHS Foundation Trust	93	96	96	90	96	102.9103	106.3407	106.3407	99.4800	106.3407

Demand - Hospital Discharge	Pre-populated from plan:					Refreshed expected number of referrals:				
Reablement and Rehabilitation at home (pathway 1)	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24
Total	414	427	427	399	427	452.2564	467.3316	467.3316	437.1812	467.3316
East Sussex Healthcare NHS Trust	1	1	1	1	1	0.8698	0.8988	0.8988	0.8408	0.8988
Queen Victoria Hospital NHS Foundation Trust	6	6	6	5	6	5.6992	5.8892	5.8892	5.5093	5.8892
Surrey and Sussex Healthcare NHS Trust	96	99	99	93	99	103.8270	107.2879	107.2879	100.3661	107.2879
University Hospitals Sussex NHS Foundation Trust	311	321	321	300	321	341.8603	353.2557	353.2557	330.4650	353.2557

Demand - Hospital Discharge	Pre-populated from plan:					Refreshed expected number of referrals:				
Short-term domiciliary care (pathway 1)	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24
Total	5	5	5	5	5	23.4572	24.2391	24.2391	22.6753	24.2391
Surrey and Sussex Healthcare NHS Trust	5	5	5	5	5	5.4646	5.6467	5.6467	5.2824	5.6467
University Hospitals Sussex NHS Foundation Trust	16	17	17	16	17	17.9926	18.5924	18.5924	17.3929	18.5924

Demand - Hospital Discharge	Pre-populated from plan:					Refreshed expected number of referrals:				
Reablement and Rehabilitation in a bedded setting (pathway 2)	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24
Total	340	350	350	329	350	302.4407	312.5221	312.5221	292.3593	312.5221
Queen Victoria Hospital NHS Foundation Trust	4	4	4	4	4	3.8186	3.9459	3.9459	3.6914	3.9459
Surrey and Sussex Healthcare NHS Trust	79	82	82	77	82	69.5668	71.8857	71.8857	67.2479	71.8857
University Hospitals Sussex NHS Foundation Trust	257	264	264	248	264	229.0553	236.6905	236.6905	221.4201	236.6905

Demand - Hospital Discharge	Pre-populated from plan:					Refreshed expected number of referrals:				
Short-term residential/nursing care for someone likely to require a longer-term care home placement (pathway 3)	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24
Total	110	112	112	106	112	127.8838	132.1466	132.1466	123.6210	132.1466
Queen Victoria Hospital NHS Foundation Trust	1	1	1	1	1	1.6147	1.6685	1.6685	1.5609	1.6685
Surrey and Sussex Healthcare NHS Trust	26	26	26	25	26	29.4156	30.3961	30.3961	28.4351	30.3961
University Hospitals Sussex NHS Foundation Trust	83	85	85	80	85	96.8536	100.0820	100.0820	93.6251	100.0820

Capacity and Demand - Community

Capacity - Community	Pre-populated from plan:					Refreshed planned capacity:				
Service Area	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24
Social support (including VCS)	0	0	0	0	0	0	0	0	0	0
Urgent Community Response	663	663	663	663	663	1153	1153	1153	1153	1153
Reablement and Rehabilitation at home	2183	2183	2183	2183	2183	1329	1329	1329	1329	1329
Reablement and Rehabilitation in a bedded setting	0	0	0	0	0	0	0	0	0	0
Other short-term social care	0	0	0	0	0	0	0	0	0	0

Demand - Community	Pre-populated from plan:					Refreshed expected number of referrals:				
Service Area	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24
Social support (including VCS)	0	0	0	0	0	0	0	0	0	0
Urgent Community Response	628	649	649	607	649	1093.1250	1129.5625	1129.5625	1056.6875	1129.5625
Reablement and Rehabilitation at home	2070	2139	2139	2001	2139	1260.0417	1302.0431	1302.0431	1218.0403	1302.0431
Reablement and Rehabilitation in a bedded setting	0	0	0	0	0	0	0	0	0	0
Other short-term social care	0	0	0	0	0	0	0	0	0	0

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