



<b>Date of meeting:</b>	11 <sup>th</sup> October 2018
<b>Item Title:</b>	Better Care Fund Monitoring
<b>Executive Summary:</b>	Summary report of the Better Care Fund 2018/19 position, quarterly reporting, and plan refresh.
<b>Recommendations for the Board:</b>	To note the contents of the report.
<b>Relevance to <u>Joint Health and Wellbeing Strategy</u>:</b>	Maintaining Wellbeing and Resilience
<b>Financial implications</b> (if any):	N/A
<b>Consultation</b> (undertaken or planned):	N/A
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## 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 at Month 4 (July) 2018/19. It also provides brief updates on the refresh of the two-year BCF Plan for 2018/19 and BCF quarterly reporting.

## 2. BCF Plan Refresh 2018/19

### 2.1 High-level Requirement

The BCF plan for West Sussex covers the two-year period 2017-2019 and, as per the guidance, HWB areas were given the opportunity to refresh their plans for 2018/19.

West Sussex opted not to refresh the plan but, along with all other HWB areas, is required to adopt new centrally set targets for Delayed Transfers of Care effective from September 2018.

Additionally, the refresh coincided with the publication of new targets for Non Elective Admissions following the submission of revised plans by all CCGs in April 2018.

### 2.2 Delayed Transfers of Care

New Delayed Transfer of Care targets for delays attributed to 'Health', 'Social Care', and 'Both' replace those given in the original BCF plan submission and are based on a Q3 2017/18 baseline. Figures are expressed as daily delays:

	Health	Social Care	Both	Total
<b>Original Target:</b>	62.2	17.6	7.3	87.1
<b>Q3 2017/18 Actual:</b>	72.4	24.1	4.1	100.7
<b>From 09/2018 Target:</b>	<b>50.7</b>	<b>17.5</b>	<b>4.1</b>	<b>72.4</b>

The reduction in delays attributed to 'Health' is the greatest challenge. However, at Month 4 (July) 2018/19 daily delays are as follows:

	Health	Social Care	Both	Total
<b>Month 4 2018/19:</b>	56.7	13.7	2.5	72.9

## 2.3 Non Elective Admissions

The revised quarterly targets for Non Elective Admissions are shown below alongside those from the original BCF plan submission. These figures include the additional HWB reduction linked to the local risk sharing agreement:

2018/19:	Q1	Q2	Q3	Q4	Total
<b>Original:</b>	20,304	20,264	20,823	20,718	82,109
<b>Revised:</b>	<b>21,286</b>	<b>21,118</b>	<b>22,149</b>	<b>22,280</b>	<b>86,833</b>

## 3. BCF Performance 2018/19 at Month 4

### 3.1 Metrics Overview

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

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

Information on all four metrics is collected nationally however local areas monitor their performance across these 4 areas to provide indicative updates on performance.

Indicator	2018/19 YTD Target	2018/19 YTD Actual	M4 Target	M4 Actual	Required Trend
1. Non-Elective Admissions (Specific Acute)	30,712	33,138	7,821	8,205	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.	198.4	179.0	49.6	32.2	Lower
3. Proportion of older people 65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services.	86.0%	80.0%	N/A	N/A	Higher
4. Delayed transfers of care from hospital per 100,000 population.	1,173.2	1,075.9	1,182.9	982.3	Lower

### 3.2 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 M4 2018/19, the number of Non-elective Admissions across West Sussex is above plan by 384 (4.9%). The YTD figure is above plan by 2,426 (7.9%).

### **3.3 Residential and Nursing Care Admissions**

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

Avoiding permanent placements in residential and nursing care homes is a good measure of delaying 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 M4 2018/19, the number of admissions is below plan by 17.2 (34.7%). The YTD figure is below plan by 19.4 (9.8%). (Note that the number of admissions may increase due to the late processing of data.)

### **3.4 Reablement/Rehabilitation**

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

Improving the effectiveness of these services is a good measure of delaying 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.

This metric is reported quarterly. For Q3 2018/19, performance across West Sussex is at 80% against a planned figure of 86%. Note that this is the first full quarter that data has been collected from the new reablement provider through a new reporting process.

### **3.5 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 M4 2018/19, the number of delayed days across West Sussex is below plan by 462 (17.0%). The YTD figure is below plan by 899 (8.4%).

## **4. BCF Quarterly Return Q2 2018/19**

### **4.1 Overview**

The Better Care Support Team published the template for the Q2 2018/19 BCF return on Thursday 6th September. 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 19th October following sign-off from the HWB Chair.