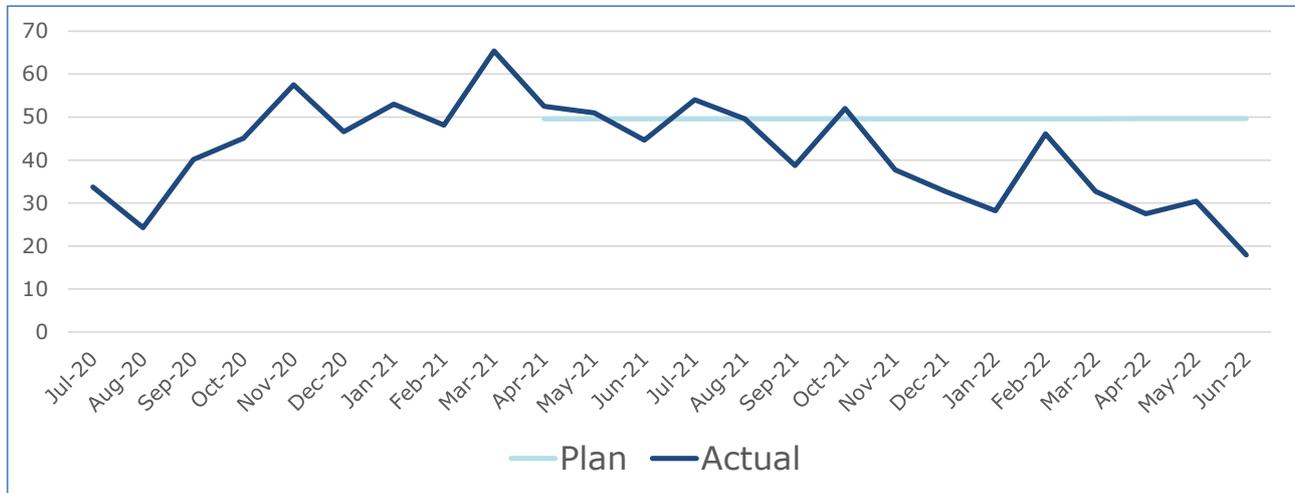


HWB Better Care Monitoring Q1 2022/23: Appendix 3

Permanent Admissions to Nursing and Residential Homes

Figure 1 Residential Admissions (per month) - 24 months to June 2022



2022/23 Plan: Lower than 49.7 per month (average of annual target of 595.8)

June 2022 total: 17.9 (See note about data collection below.)

June 2021 comparison: 44.6.

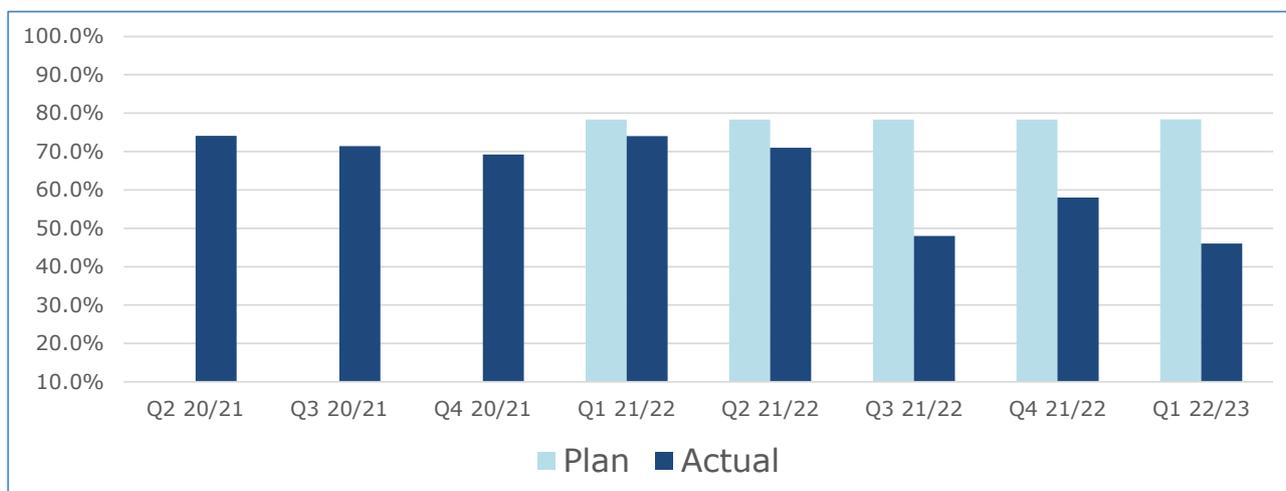
Current performance remains impacted by the effects of Covid; therefore, the data is not representative of normal patterns of admission. We have seen a significant increase in demand in all areas of adult social care, due to pent up demand. Adult social care is working towards reducing new admissions while increasing non-residential options. This is proving effective; however, the average cost of placements is increasing, due to market pressures and complexity of customer need.

Due to increased demand and reduced market capacity, significant wait times are experienced in all areas of the business. This means the current performance may be impacted by individuals having to wait longer before a placement can be identified, which shows as an over estimated reduction in new admissions.

Please note that data for this metric is collected over an extended period. Hence, the most recent months will always show low figures pending full data collection.

% Of Older People at Home 91 Days after Discharge into Reablement/Rehabilitation Services

Figure 2 Reablement (% 65+ at home 91+ days post-discharge) - 24 months to Q1 2022/23



2022/23 Plan: Higher than 78.4 percent per month (annual target of 78.4 percent.)

Q1 2022/23 total: 46.0 percent.

Q1 2020/21 comparison: 74.4 percent.

Performance at Q1 2021/22 remains lower than planned. Contributory factors include data quality issues around the 91-day measure which are being worked through, along with market pressures.

The reablement provider have been challenged with capacity during the pandemic due to staff sickness, and also challenges moving people on through the service who require a long term provision due to challenges in the social care workforce locally. There has also been a significant increase in the complexity and levels of dependence of people referred to our reablement service over the last 2 years which will have an impact on this indicator.

ADASS feel that the 91-day measure is not fit for purpose and are looking to remove this measure and refresh ASCOF. If we are unable to contact the customer or the customer does not respond, then the guidance requires us to record these as not at home. Work is underway to consider whether there are more effective ways of using this measure through SE ADASS networks. West Sussex has a number of reablement offers that contribute to supporting independence, these include both home-based reablement and bed-based provision. A local based measure looking at these outcomes would be more reflective of the local picture.

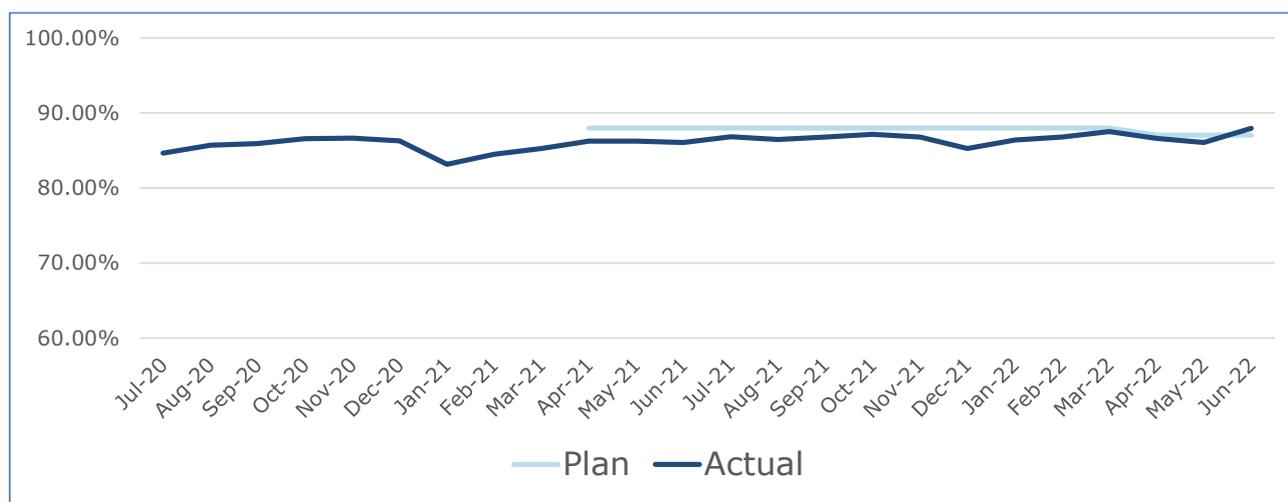
Unplanned Hospitalisation for Chronic Ambulatory Care Sensitive Conditions

Updated in-year data unavailable.

This metric is a measure of emergency admissions with a primary diagnosis of an ambulatory care sensitive condition such as: acute bronchitis, angina, ischaemic heart disease, heart failure, dementia, emphysema, epilepsy, hypertension, diabetes, COPD, pulmonary oedema. Data is released in November for the preceding financial year. The planned figure is set at the pre-pandemic performance level.

For 2022/23, additional in-year data will be available from the national Better Care Fund team and reported here from Q2. Discharge to Usual Place of Residence

Figure 3 Discharge to Usual Place of Residence - 24 months to June 2022



2022/23 Q1 Plan: Higher than 87.03 percent.

June 2022 total: 87.96 percent.

June 2021 comparison: 86.07 percent.

This measure for discharge to usual place of residence has been constructed by the national BCF team around the 95% expectation in the discharge policy for Pathways 0 and 1. However it should be noted that the policy was not intended as setting a hard target for these pathways.

In West Sussex, this figure tends to be lower than some areas due to the relatively large older population, and the capacity of Pathway 2 offering which provides an alternative to discharge to usual place of residence where appropriate.

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