

Title	Better Care Fund (BCF) – Update
Date	15 September 2016
Report of:	Devora Wolfson, Director of Joint Commissioning, Communities Health and Adult Social Care
Lead contacts:	Susie Yapp – Strategic Commissioning Adult Social Care

1. Purpose of the report

This report provides the Health and Wellbeing Board with an update on the performance of the Better Care Fund (BCF) and the delivery of better integrated care. The report includes the newly developed Dashboard which has been developed to demonstrate the progress against targets and integration milestones.

2. Summary of main issues:

- The Better Care Fund Section 75 Agreement has been signed
- Agreement has been reached with the District Councils on the Disabled Facilities Grant and partners are working together closely to ensure the maximum benefit from these resources
- A Dashboard has been developed which is designed to provide the Board with an assessment of our performance against the BCF objectives and targets.
- Our latest data shows that we are performing well in terms of the reduction in non-elective admissions and permanent admissions to care homes however our performance for delayed transfers of care requires improvement. This is being overseen by a multi-agency working group, the Discharge Project Group that reports to the newly established A and E Board (formerly the Systems Resilience Group).

3. Recommendation for the Health and Wellbeing Board:

The Health & Wellbeing Board is asked to note our performance in relation to the BCF Plan.

4. Update on Better Care Fund Process

4.1 Sign off of our Better Care Fund Plan and Section 75 Agreement

Following the regional assurance process, we received confirmation that the Buckinghamshire BCF Plan was approved, in July. This means that the plan meets all requirements and our focus has moved on to delivery.

The BCF Section 75 has now been agreed and signed off by the partners. The total value of the Pooled fund is £30.21million.

4.2 Disabled Facilities Grant

Agreement has now been reached in partnership with District Council colleagues on how the Disabled Facilities Grant will be deployed in the current financial year. Individual allocations have been agreed with all District Councils and there was also agreement that the County Council would retain £268,995 to be invested in areas that will support individuals to remain independent in their own homes for as long as possible. This will include capacity within our Occupational Therapy team to address delays in the pathway and support for individuals to swiftly access minor adaptations and community equipment. This will help to address the needs of 400 people waiting for an OT assessment, with the current average wait of four months.

The Disabled Facility Grant provides housing adaptations for people to enable them to remain independent in their homes for as long as possible. The types of adaptation may include (but not limited to) ground floor extensions, through-floor lifts, stair lifts and level access showers. The grant is delivered in partnership between BCC and the local housing authorities. Following the inclusion of the funding in the BCF, a project has been established to determine how the system can be improved to ensure the best outcome for the individual and maximise the use of the available funds. The aim is to streamline the process to ensure the adaptations are delivered promptly when required, reducing waiting time particularly to support hospital discharges, and ensure a consistent approach across the county leading to all users in Bucks receiving the same high quality, simple to access service

5. Update on Better Care Fund - Performance

A Dashboard has been developed to demonstrate the progress being achieved on the BCF metrics. Q1 data has been reported through the Dashboard (**Appendix 1**) based on local data and will be updated when we receive the performance report from DH.

A summary of notable areas of performance are:

- **Non-elective admissions to hospital** (general and acute) all ages - Our target is to maintain the current level of admissions avoiding any further increase. We are performing well and are on target to perform above the target.
- **Admission to Care Homes** (nursing and residential) - our performance in relation to this target is also positive. The annual performance target was set at 549. The performance in Q1 is significantly lower than the target which demonstrates that we are supporting people to live independently in the community for longer through packages of care and support. The actual number admitted in Q1 was 79.5 per 100,000.
- **Delayed transfers of care** – We are currently not delivering against this metric however we are taking corrective action to address this. The multi-agency Discharge Working Group has been established to focus on the issue and the ICET (Integrated Commissioning Executive Group) regularly reviews the performance through this Dashboard, and identifies the barriers and blockages. As we move towards the winter months the challenges can become more significant and there is daily oversight of risks and issues to keep the system working as effectively as possible

6. Update on Integration Milestones for 16/17

At the March meeting, the Health and Wellbeing Board received a report giving an overview of the Better Care Fund which included detail of the Integration Milestones for delivery by the end of this financial year. Progress is being made across the milestone areas, and two areas of current focus are reported below. Progress on the other areas will be reported at the next Health and Wellbeing Board.

Formation of the Integrated Commissioning Executive Team

A senior level commissioning group, the Integrated Commissioning Executive Team (ICET) has been set up to oversee and facilitate the delivery of the BCF outcomes and milestones, replacing the Adult Joint Executive Team. The group meets monthly and their responsibilities include facilitating and overseeing the deployment of the BCF pooled fund through appropriate approval arrangements for the BCF. A Programme Manager for Integrated Care has been newly appointed to manage all aspects of the delivery of the Better Care Fund and will take up the post in early October 2016. The post will oversee the deployment of the Pooled and Aligned Budget as well as other areas of integrated commissioning. The ICET will agree an annual performance reporting framework for the BCF and monitor performance through regular updates from the Integrated Commissioning Programme Manager.

The ICET will report quarterly as required to the Health and Wellbeing Board.

Baselining Section 117 Mental Health – progress towards Section 117 Aftercare Pooled Budget arrangements

We have developed a Joint Health and Social Care protocol for Section 117 Aftercare and are in the process of agreeing the pooled budget for this. The pooled budget will be presented for agreement to ICET in October 2016 and will be operationalised from April 2017. By pooling the budget we will streamline the process for agreeing Section 117 arrangements in a timely way and work together with the market to achieve better value for money.

Buckinghamshire County Council

Better Care Fund Metric Dashboard

Date Published	23/08/2016
----------------	------------

Current Year data period	Qtr1
--------------------------	------

1. Emergency Admissions

Source: NHS South, Central And West Commissioning Support Unit

Indicator	RAG	Previous Years			Previous Target	Current Year (to date)	Current Target	Trend
		2013/14	2014/15	2015/16	2015/16	Qtr1 2016/17	Qtr1 2016/17	
Total non elective admissions to hospital (general and acute) all ages		12417	12545	12801	12545	11509	11836	
Definition: Composite measure of: - unplanned hospitalisation for chronic ambulatory care sensitive conditions (all ages) - unplanned hospitalisation for asthma, diabetes and epilepsy in children - emergency admissions for acute conditions that should not usually require hospital admission (all ages) - emergency admissions for children with lower respiratory tract infection.								
Commentary: This is currently exceeding the target for 2016/17 - performance for quarter one is 2.8% lower than the target								

2. Care Home Admissions

Source: BCC Adult Social Care AIS System

Indicator	RAG	Previous Years			Previous Target	Current Year (to date)	Current Target	Trend
		2013/14	2014/15	2015/16	2015/16	Qtr1 2016/17	Qtr1 2016/17	
Permanent admissions of Older People aged 65+ to residential & nursing care homes, per 100,000 population		687	581	486	697	79.5	137.5	
Definition: This indicator reflects the number of admissions of older adults, aged 65 or over, to residential and nursing care homes relative to the population size of people in this age group. Numerator: Number of council-supported permanent admissions of older people to residential and nursing care, excluding transfers Denominator: Size of the older people population in area from the latest ONS mid-year estimate. Avoiding permanent placements in residential and nursing care homes is a good measure of delaying dependency. The inclusion of this measure in the dashboard supports local health and social care services to work together to reduce avoidable admissions.								
Commentary: This is currently exceeding the target for 2016/17.								

3. Reablement

Source: BCC Adult Social Care AIS System & Buckinghamshire Healthcare NHS Trust

Indicator	RAG	Previous Years			Previous Target	Current Year (to date)	Current Target	Trend
		2013/14	2014/15	2015/16	2015/16	Qtr1 2016/17	Qtr1 2016/17	
Proportion of people over 65 still at home 91 days after discharge from hospital into reablement services		61%	71%	66%	75%	~	75%	
<p>Definition: This indicator measures the effectiveness of Reablement services. The figure reported represents the proportion of people discharged from hospital to reablement or rehabilitation services who are still at home 91 days after discharge.</p> <p>Denominator: The number of older people aged 65 and over offered rehabilitation services following discharge from acute or community hospital.</p> <p>Numerator: The number of older people identified in the denominator and who are at home or in extra care housing or an adult placement scheme setting three months after discharge from hospital. This excludes those who are in hospital or in a registered care home those who have died within the three months.</p> <p>Improving the effectiveness of these services is a good measure of delaying dependency and will reduce avoidable admissions</p>								
<p>Commentary: Data collected between January and March and reported at year end only</p>								

4. Delayed Transfers of Care

Source: NHS England, <https://www.england.nhs.uk/statistics/statistical-work-areas/delayed-transfers-of-care/>

Indicator	RAG	Previous Years			Previous Target	Current Year (to date)	Current Target	Trend
		2013/14	2014/15	2015/16	2015/16	Qtr1 2016/17	Qtr1 2016/17	
Total delayed transfers of care from hospital (NHS, ASC, Joint)		6.7	7.6	9.8	10	10.5	2.5	
<p>Definition: This measures the impact 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. A delayed transfer of care occurs when a patient is ready for transfer from a hospital bed, but is still occupying such a bed. A patient is ready for transfer when:</p> <p>(a) a clinical decision has been made that the patient is ready for transfer AND</p> <p>(b) a multi- disciplinary team decision has been made that the patient is ready for transfer AND</p> <p>(c) the patient is safe to discharge/transfer.</p> <p>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.</p> <p>Denominator: Size of adult population in area (aged 18 and over)</p> <p>Numerator: The average number of delayed transfers of care (for those aged 18 and over) on a particular day taken over the year. This is the average of the 12 monthly snapshots collected in the monthly Situation Report</p>								
<p>Commentary: Performance is below target for Quarter One - however as the target is calculated as the average of a snapshot this does not imply that we will not meet the year end target. In 2015/16 our performance for Quarter One was slightly lower at 8.9 and within target at year end. Our current performance ranks as 3rd best in our comparator group</p>								

5. Patient Experience (Social Care)

Source: BCC Adult Social Care Service-User Survey

Indicator	RAG	Previous Years			Previous Target	Current Year (to date)	Current Target	Trend
		2013/14	2014/15	2015/16	2015/16	Qtr1 2016/17	Qtr1 2016/17	
Overall satisfaction of people who use care and support with services		56%	58%	61%	60%	~	65%	
Definition: This indicator is derived from the annual Adult Social Care Survey, Question 1: "Overall, how satisfied or dissatisfied are you with the care and support services you receive." This indicator is aligned to Domain Three of the Adult Social Care Outcomes Framework: Ensuring that people have a positive experience of care and support The survey is run annually between January and March with performance metrics available from April								
Commentary: Data collected between January and March and reported at year end only								

6. Patients aged 65+ discharged to the same address

Source: NHS South, Central And West Commissioning Support Unit

Indicator	RAG	Previous Years			Previous Target	Current Year (to date)	Current Target	Trend
		2013/14	2014/15	2015/16	2015/16	Qtr1 2016/17	Qtr1 2016/17	
Patients (65 and over) discharged to the same place from which they were admitted				92.0%	92.2%	92.8%	93.0%	
Definition: This is a local metric and the rate is expressed as a % of those admitted to hospital who are discharged to the same address from where they were admitted.								
Commentary: Q1 performance is slightly below the target of 93%, at 92.8%, but is moving in the correct direction								