

# Buckinghamshire Integrated Care System

**Better Care Fund, Improved Better Care Fund and  
Delayed Transfers of Care**

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**Health & Wellbeing Board March 2019**

  
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## Developing a new plan for 2019/20

The national Better Care Fund Framework (BCF) is just drawing to the end of its 2 year plan on 31<sup>st</sup> March 2019.

We are currently evaluating the effectiveness of the BCF schemes in preparation for a national announcement on funding for the new plan for 2019/20. Alongside this announcement a set of new planning guidance around the criteria and metrics that will apply.

We have continued to successfully deliver on the BCF Plan through integrated working through the ICET Joint Board where key metrics and performance around key areas such as Delayed Transfers of Care have been regularly reviewed.

# DTOC headlines

As reported in September 2018 to the Health & Wellbeing Board the national target for Delayed Transfers Of Care rose mid way through the plan. National expectations from central Government to NHS England to encourage greater systems leadership and performance for DTOC through integrated working.

The revised metric had been assessed at a time when Buckinghamshire was performing high, added increased pressure to achieve even better local performance. In the past 3 consecutive months on record DTOC has decreased across Buckinghamshire.

The latest news is that for the first time in this financial year the Better Care Fund targets for DTOC in December for All delays, Health and for Adult Social Care are below the targets set for the month. This is particularly positive given this reduction was achieved during the height of the winter pressures in December 2018.

As a snapshot, the total number of bed days delayed for Buckinghamshire in December 2018 fell to **964 days** in the month compared to in 1,241 days November 2018.

# Buckinghamshire's DTOC performance

Month	No of days delayed per month	Direction of travel from previous month
April 2018	1567	↑ + 73
May 2018	1969	↑ + 402
June 2018	1593	↓ - 376
July 2018	1554	↓ - 39
August 2018	1245	↓ - 309
September 2018	1806	↑ + 561
October 2018	1464	↓ - 342
November 2018	1241	↓ - 223
December 2018	964	↓ - 277

The most frequent reason for an ASC delay in December 2018 was Delay reason E – Care Package In Home accounting for 95 days delayed attributable to ASC (80%).

# Highlights

- Continued robust systems wide leadership and focus has assisted Buckinghamshire improve its DTOC and BCF wider performance.
- Simultaneously strong integrated plans and relationship management on the front line has made a difference.
- A new integrated re-ablement team at Frimley has seen shared accountability for joint delays and local DTOC codes to better understand delays.
- Continued joint work with the Community & Voluntary Sector such as the Red Cross “Care Navigator” role working with the long stayers to try and best support a timely discharge.
- Shared accountability and transparency at ICET for positive integrated outcomes.
- Enablers such as Winter Discharge to Assess (D2A) have seen plans focusing on embedding “home first” ethos for people coming out of hospital.
- The iBCF improvement plan has seen a focus on preventative services, stabilising the market place and supporting self funders best navigate the choices available to them.

# Challenges

1. None Elective Admissions continue to grow across several localities.
2. A need to increase the utilisation of Buckinghamshire's community assets to reduce potential hospital admissions.
3. Out of County hospital attendances and admissions remain a challenge.
4. Continued need to focus on the reduction of admissions into residential care.
5. DTOC numbers are still higher at Frimley Health NHS Foundation compared to Buckinghamshire Healthcare Trust.
6. The complexity of service users often with a range of long term conditions is ever growing often leading to more DTOC.
7. Family/service user choices at the point of discharge can cause delay while options about the future can be protracted.
8. Trying to focus on hospital avoidance schemes to prevent unnecessary admissions.

# System Wide Initiatives

*There are a range of evidence based “High Impact Changes” to improve performance:*

- Daily 09:00 call with partners to discuss all patients on the medically fit list, which includes CCG presence. Plans to incorporate other out of area providers
- The establishment of a discharge to assess (D2A) programme of support including beds, domiciliary care and 24/7 care at home.
- BHT re-launch and roll out of ‘get up, get dressed, get moving’
- Implement the learning from the ‘Fabulous fortnight’ (at Stoke Mandeville hospital, 19th Nov for two weeks) providing the opportunity to embed good practice with system wide support and input.
- Further development of the system multi-disciplinary team (MDT) action squad to help support a reduction in long stay patients and DToCs
- The Red Cross Team onsite to help support the process of patient re-settlement and repatriation to home. At the front door, on the wards (long stayers) and at the point of discharge.
- Local DToC (and stranded and long stay patients) escalation process, based on the Oxfordshire model, is being rolled out.

# Continued....

- BHT refocus to ensure the choice policy is robustly implemented.
- Weekly Escalation Call to review the top 20 longest stay patients across the Trust, with senior system leaders.
- A system deep dive to understand the delays for September, what the key issues are and actions to support an improved position.
- Update the process of how medically fit for discharge (MFFD) and DToC patients are reported through the system to understand current information and action to support and escalate where appropriate.
- Winter Director in post and will be providing director led support and escalation where appropriate.
- Multi Agency Discharge Events (MADE) being planned to support collective drive and ownership support improved patient flow across the system. The exercise focuses on:
  - \* Recognising and unblocking delays
  - \* Supporting improved patient flow across the system.



# The Health & Well-Being Board is asked to:

- Note the positive progress around reducing DTOC in Buckinghamshire. Evidently achieved through the integrated care system initiatives.
- To continue to approve that ICET will continue to oversee the BCF Plan and accompanying quarterly BCF returns.