

Health and Wellbeing Board

4 July 2018



Better Care Fund Quarter 4 2017/18 Performance

Report of Paul Copeland, Strategic Programme Manager, Better Care Fund and Integration, Adult and Health Services, Durham County Council

Purpose of the Report

- 1 The purpose of this report is to provide the Health and Wellbeing Board with a summary of the Better Care Fund (BCF) Q4 2017/18 performance metrics.

Background

- 2 The BCF allocation for Durham in 2017/18 was £45.7m plus additional monies through the Improved Better Care Fund (iBCF) to support adult social care. The iBCF consists of two elements, a planned allocation which was included in the local government finance settlement 2017/18 (£2.378m) and additional funding for adult social care announced in the Spring Budget 2017 (£13.112m).
- 3 The BCF Plan for 2017/19 was required to meet four conditions:
 - The BCF plan including the minimum contribution to the pooled fund specified in the BCF allocations, must be signed off by the health & Wellbeing Board (HWB) and by the constituent Local Authority and Clinical Commissioning Groups (CCGs).
 - The plan must demonstrate how the area will maintain in real terms, the level of spending on social care services from the minimum CCG minimum contribution to funding in line with inflation.
 - That a specific proportion of the areas allocation is invested in NHS commissioned out of hospital services, or retained pending release as part of a local risk share agreement.
 - All areas to implement the High Impact Change Model for managing Transfers of Care to support system wide improvements in relation to transfers of care.
- 4 The Durham Better Care Fund Plan 2017/19 was formally approved by NHS England on 27th October 2017.

National Metrics

- 5 The BCF policy framework established the national metrics for measuring progress through the BCF and include:
- Permanent admissions to residential and nursing care homes
 - Non-elective admissions
 - The effectiveness of reablement
 - Delayed Transfers of Care (DToC)

Performance Update

- 6 Performance against the four key metrics and deliverables are measured against current targets and historical performance. BCF Q4 2017/18 indicates positive performance in 3 of the key metrics. The exception being Delayed Transfers of Care (DToC) which did not meet the target.
- 7 A traffic light system is used in the report, where 'green' refers to 'on' or 'better than target', amber is within 2.0% of target and red is 'below' the target.
- 8 Permanent admissions of older people (aged 65 years+) to residential/ nursing care homes per 100,000 population

Indicator	Historical	Actual	Target	Performance against target
	Q4 2016/17	Q4 2017/18	Q4 2017/18	
Permanent admissions of older people (aged 65 years+) to residential/ nursing care homes per 100,000 population	768.8	750.6	738.5	

- 9 The Q4 2017/18 rate for older people (aged 65 years+) permanently admitted into residential or nursing care homes per 100,000 population was 750.6 which is marginally above target for Q4 but within 2%.
- 10 The number of bed days commissioned remains relatively stable as older people are admitted into residential or nursing care homes later in life.
- 11 Exacting scrutiny of all permanent admissions to residential or nursing care homes continues to remain a high priority in order to ensure that only those people who are unable to support safely in their own homes are admitted to residential or nursing care homes.

Non-Elective admissions/100,000 population (per 3 month period)

Indicator	Historical	Actual	Target	Performance against target
	Q4 2016/17	Q4 2017/18	Q4 2017/18	
Non-elective admissions per 100,000 population (per 3 month period)	3009	3061	3055.7	

- 12 The Q4 2017/18 outturn figure for non-elective admissions was 3061 per 100,000 population against a target of 3055.7. Performance was marginally outside of the target for Q4 but within a 2% tolerance.
- 13 High levels of Chronic Obstructive Pulmonary Disease (COPD), Lobar Pneumonia, Sepsis, Urinary Tract Infections (UTI's) and Viral infections have been particularly significant and impacted upon emergency non elective admissions during the winter months.
- 14 It should be noted that whilst the BCF programme is essentially focussed around adults 16.1% of emergency non-elective admissions in Q4 2017/18 relate to children (0-18 years).
- 15 Further work on patient segmentation has recently been commissioned by North Durham and Durham Dales, Easington and Sedgefield CCG's which includes more detail around non-elective admissions data.

Percentage of older people (aged 65 years+) who were still at home 91 days after discharge from hospital into reablement/rehabilitation

Indicator	Historical	Actual	Target	Performance against target
	Q4 2016/17	Q4 2017/18	Q4 2017/18	
Percentage of older people (aged 65 years+) who were still at home 91 days after discharge from hospital into reablement/ rehabilitation	87.8%	89.1%	85.9%	

- 16 Performance in Q4 2017/18 at 89.1% is above the target of 86.0% and is better than the same period in 2016/17 (87.8%).

Delayed Transfers of Care (DTOC) delayed days per 100,000/3 month period

Indicator	Historical	Actual	Target	Performance against target
	Q4 2016/17	Q4 2017/18	Q4 2017/18	
DTOC (delayed days) from hospital per 100,000 population/ 3 month period	311	325	309.9	

- 17 Q4 2017/18 performance at 325 per 100,000 population is above the target of 309.9.
- 18 73.0% of all delays in Q4 2017/18 were attributable to the NHS and 14.0% related to Social Care, the remaining 13.0% were attributable to both the NHS and Social Care.
- 19 The main reason for NHS delays in Q4 2017/18 involved 'Patients Awaiting further Non-Acute Care'.
- 20 The main reason for social care delays in Q4 2017/18 concerned patients awaiting residential care home placement.
- 21 For the period April 2017 to March 2018, Durham had the 4th lowest rate for delayed transfers of care (per population) in England.

Recommendations

The Health and Wellbeing Board is recommended to:

- i. Note the contents of this report
- ii. Agree to receive further updates in relation to BCF quarterly performance for 2018/19.

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Appendix 1: Implications

Finance – The BCF 2017/18 pooled budget for Durham was £45.7m.

Staffing – None.

Risk – No requirement for risk sharing agreement.

Equality and Diversity / Public Sector Equality Duty – The Equality Act 2010 requires the Council to ensure that all decisions are reviewed for their potential impact upon people.

Accommodation – None.

Crime and Disorder – None.

Human Rights – None.

Consultation – As necessary through the Health and Wellbeing Board.

Procurement – None.

Disability Issues – see commentary on Equality and Diversity.

Legal Implications – Any legal implications concerning the BCF programme have been considered as necessary.