



Shropshire Clinical Commissioning Group



Health & Wellbeing Board 4th December 2015

BETTER CARE FUND – SERVICE TRANSFORMATION UPDATE NOVEMBER 2015

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1. Summary

- 1.1. The June 2013 Spending Round announced that £3.8billion would be utilised to deliver closer integration between health and social care. The Better Care Fund in Shropshire has been developed as a conduit for integrated working across health and social care around the delivery of a set of national metrics and utilising a pooled budget arrangement
- 1.2. This report highlights activity and performance to date and sets out the planning that is currently underway to develop the Better Care Fund (BCF) plan for 2016/17

2. Recommendations

- 2.1. To note the content of the report.
- 2.2. To note the content of the performance submission.
- 2.3. To support the principles of the planning to date for 2016/17

REPORT

3. Report

3.1 Performance

In line with national requirements a performance report was submitted to NHS England on 27 November. This was submitted on the prescribed template, a copy of which has been attached to this report. Headline information to note from this report is focused on the following:

- Reducing Non Elective (NEL) admissions to hospital remains a challenge. Shropshire has not met its BCF target for Q2 with a variance of XXX from target. The implications of this are that payment by performance funds cannot be released into the BCF pool to support transformation activity but must be retained by the CCG to pay for the NEL performance, a proportion of which will be supported by the input of the Integrated Community Scheme (ICS)
- For the first time we have been asked to revisit the NEL target for Q4 2015/16 (January to March) To date as the BCF year runs from January to December and therefore the focus has been on the quarterly targets for this period. Now that actual activity figures are emerging and we are nearing the end of the first year of

BCF we have been asked to confirm our position for the following quarter. Given that our current performance is at variance with our target and that the original target was revised in line with a national request to CCG's within year a revised projection has been calculated based on year to date intelligence.

- Performance for the Reablement and Admissions to Residential Care metrics have achieved target in Q2 and are rated as green.
- In terms of our local metrics. Unplanned admissions to Redwoods with a diagnosis of dementia is an annually reported figure and as such will report in Q3. Reporting on the mental health out of hours crisis number is based on an annual patient survey. Results show an improvement on 2014/15 and an increased rate of responses. However, performance falls short of the 2015/16 target and is rated as amber
- We have not been asked to report on the Delayed Transfers of Care metric. However, local monitoring suggests that this area remains a challenge and is currently rated red. This area continues to be the subject of focused work to reverse this position, also linked to the A&E recovery plan.
- For the first time the submission requests information on a number of new Integration Metrics these focus on integrated digital records, use of risk stratification and CCG's delivery of Personal Health Budgets

3.2 Planning for 2016/17 and Current Year Activity

- a. Following approval from the last Health & Wellbeing Board to refine the BCF governance structures, these will be implemented from December 2015. As a result of this the Service Transformation Group met for the last time in November. A stocktake of the current status of all schemes was taken and the majority of the schemes are now fully implemented with further work to be carried out on the Integrated Falls Prevention, Team Around the Practice and Integrated Carer Support Schemes to bring them to a point of full implementation.
- b. Confirmation has been received from NHS England that the BCF will continue into 2016/17 and local planning is underway. The BCF Task & Finish group originally set up to oversee the development of the BCF plan has been reconvened to oversee planning for 2016/17. A number of themes were identified for further focus: prevention, carers, mental health, delayed transfers of care, complex care and housing. Themed planning sessions have taken place with key stakeholders on these areas. From these sessions focused work is emerging and further sessions will be held as required. It is anticipated, but as yet unconfirmed, that a first draft of the 2016/17 BCF plan will need to be submitted to NHS England in mid February 2016.
- c. Information contained in Appendix A sets out the headline mapping that has emerged from the planning sessions to date. This one page summary aims to articulate current work underway or in development across, health, social care, housing and public health to address admission avoidance and building capacity in the community. These areas remain key in addressing the rising demand at the acute end of the spectrum whilst developing initiatives in the community to stem future demand. Cross cutting themes are beginning to emerge and further work is needed in particular to develop plans around the prevention theme. This work will link into the development underway on the Health & Wellbeing strategy and the formulation of its exemplar projects. The Health & Wellbeing Board is asked to support the principles of this planning in developing the 2016/17 BCF plan

List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)

Cabinet Member (Portfolio Holder)

Local Member

Appendices