

BCF Metric	Monitoring Lead	Data Source	On Target Y/N	Issues	Actions
Non-elective admissions to General and Acute hospitals.	Helen	UNIFY2	Y		
ASCOF 2A Admissions of older people into permanent residential/nursing care	Caron	Carefirst	?	Technical guidance refers to ASCOF, which historically has generated this result from the ASC-CAR return. However, since April 2014, councils are to report in accordance with new SALT return. There are some significant variations in the construction, which may impact on our ability to meet original targets. Need clarity re which population data to be used for the denominator (MYE latest)??	Data in accord with the SALT report will not be available until end Q3. In the absence of this, JE's Team are running monthly admissions reports, in accord with old ASC-CAR.
Q10. Do you know how to contact this person if you have a concern about your care?	Caron	CQC - Annual Community MH Survey.	?	Awaiting response from email sent to CQC (29/10/14) asking for timescales of next survey. Estimate same timeframe as last year, which will be survey done in Jan 2015, and results published in Sept 2015.	CB to download the 2014 CQC Survey results for Shropshire. What specific actions are in place , to ensure residents remember that they have received information re who to contact? Timing? If survey is Jan, could lose this information with xmas post and it may also clash with annual User/Carer Survey scheduled for
ASCOF 2B Reablement - Older people discharged from hospital into reablement, who are still at home 91 days' later.	Caron	Callum.	?	Historically, this was reported for a sample period, specified by DH. However, Community Trust now have a single point of referral and will be able to monitor this on a monthly basis from Nov 2014. Alongside this monitoring, Callum needs to monitor separately , the data required nationally, for the ASCOF sample measure. CB to provide precise definition details to Callum. Ensure the correct denominator data is used (HES , not SUS). See email "Social Care Queries" 07/10/14.	Callum to build in a review mechanism to enable us to track where people are, after 91 days. Sarah Watson will send Callum the data from August to Oct. At the end of each calendar month, Callum will send number admitted into reablement and still at home 91 days' later. Because of the time delay for tracking clients, the first available data will be reported in December.
DTOC	Helen				
Dementia admissions	Helen	QoF		Provisional 13/14 data, dementia register size = 2367, compared to 2624 submitted in template dated 190914. No year to date performance data available.	Agree with KA what the 13/14 baseline is. HM to follow up obtaining the 14/15 performance data.

End of Year Report

BCF 1 - Non Elective Admissions:

	Jan - Mar 2015			Apr - Jun 2015			Jul - Sep 2015			Oct - Dec 2015		
2015	Actual	7199	G	Actual	7429	R	Actual	7375	R	Actual	7883	R
	Plan:	7252		Plan:	7143		Plan:	6559		Plan:	6684	
	Annual Plan 27,638									Cumulative Total 29886		
	Jan - Mar 2016											
2016	Actual	7762	R									
	Plan:	7380										

BCF 2 - Residential & Nursing Care Home Admissions

	Q4 2014/5	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2015/16	548.8	data unavailable during this period				239.55	282.23	363.46	414.40	468.4	475.4	475.4	550.7

BCF 3 - Reablement:

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2014/15						R	A	A	A	A	A	A
2015/16	A	G	G	G	G	G	G	G	G	G	G	

BCF 4 - Delayed transfers of care: delayed days

Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Apr-16
R	R	R	R	R	R	R	R	R	R	R	R	R

Status R Forecast R

BCF 5 - Patient / Service User Experience Metric.

	13/14 Baseline	14/15 Plan	15/16 Plan
Plan		50%	70%
Result	50.0%	55.0%	62.0%
Num	146	136	171
Denom	292	247	276

Latest performance shows an improvement albeit lower than the planned profile. 2015 data did not include the numerator, only provided with the denominator, we have therefore made a calculation of the numerator from the result

BCF 6 - Local Metric

Local people admitted (unplanned) to Redwoods Hospital with a diagnosis of dementia as a proportion of those with a dementia diagnosis

	13/14 Baseline	14/15 Plan	15/16 Plan
Plan		1.4%	1.2%
Result	1.6%	1.4%	1.2%
Num	41	40	38
Denom	2624	2936	3258

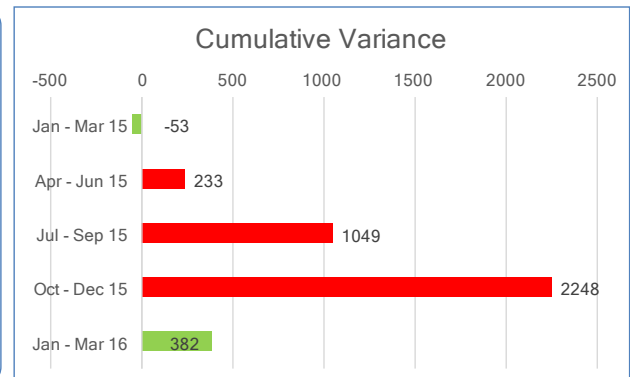
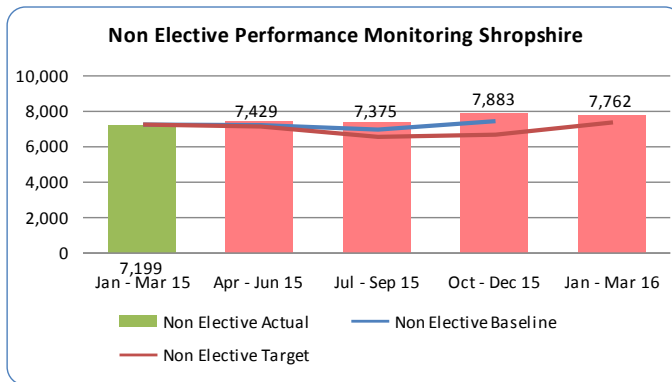
Summary: End of year performance shows a mix of positive and negative results. Positive performance has been achieved with residential and nursing admissions performance being better than planned. Re-ablement figures have continued to see a steady improvement throughout the year. Non elective admission figures and delayed transfer of discharge have both failed to meet the set standards. Local measures for patient services have improved but failed to meet the target whilst unplanned admissions to Redwoods hospital have remained on plan.

BCF 1 - Non Elective Admissions



Emergency Admissions to hospital

	Q1 14/15	Q2 14/15	Q3 14/15	Q4 14/15	Q1 15/16	Q2 15/16	Q3 15/16	Q4 15/16
Target				7,252	7,143	6,559	6,684	7,380
Actual	7,227	6,973	7,446	7,199	7,429	7,375	7,883	7,762



Rationale:

Performance Comments: Performance for the year 2015 is below plan by 2248. Target figures for 2016 are now agreed and quarter 1 performance remains to be below profile.

Cumulative performance plan is to achieve a reduction in Non Elective Admissions. This measure will be reported quarterly.

Definition: Sum of Non Elective FFCE's for the Contributing CCG's as per the BCF Template. Source: Unify2.

RAG Rating - Ratings used for this measure are based on - Red = non elective admissions is over target - Green = non elective admissions is under target

Note:

There have previously been two data sources to support NEL activity:

1) MAR (Monthly Activity Return). 2) SUS (Secondary Users Service). This is a return that the providers make via Unify2.

Shropshire CCG has used MAR data from the outset of the BCF and the original BCF Submission used MAR as the baseline (as per the original guidance). However, there has now been a national shift to the use of SUS data for the purposes of BCF planning and this data set (rather than MAR) will be the basis of planning and performance monitoring going forward.

BCF 2 - Residential & Nursing Care Home Admissions



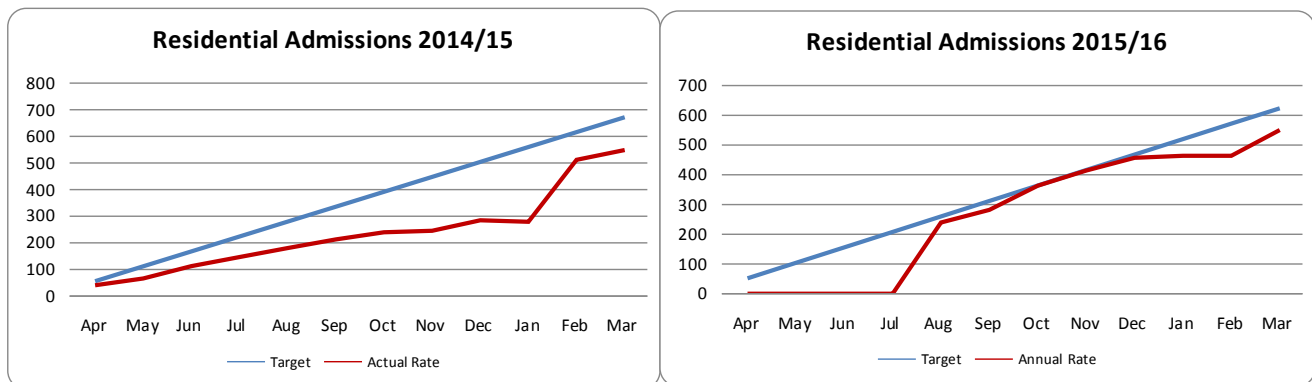
Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000 older population

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Target	52	104	156	208	260	312	364	416	468	520	572	623.7
Annual Rate	0	0	0	0	239.6	282.2	363.46	414.40	468.4	475.4	464.0	550.7
Number	0	0	0	0	174	205	264	301	332	337	337	400
Population	72635	72635	72635	72635	72635	72635	72635	72635	72635	72635	72635	72635

Monthly target 52

Status Forecast

Data in accordance with new paperwork in line with the SALT Return - provisional figure shown



Rationale: Avoiding permanent admissions into care homes is a good measure of delaying dependency. Our focus, therefore, is to keep admissions as low as possible, particularly inappropriate admissions.

Performance Comments:

End of year performance is better than target albeit slightly higher than the previous year. The long term trend remains positive.

Definition: Rate of admissions per 100,000 people

Numerator: Number of older people aged 65+, admitted into permanent residential/nursing care, during the year. Source: SALT Return.

Denominator: Total number of older people, aged 65+, in Shropshire. Source: ONS Mid Year Estimate.

BCF 3 - Reablement

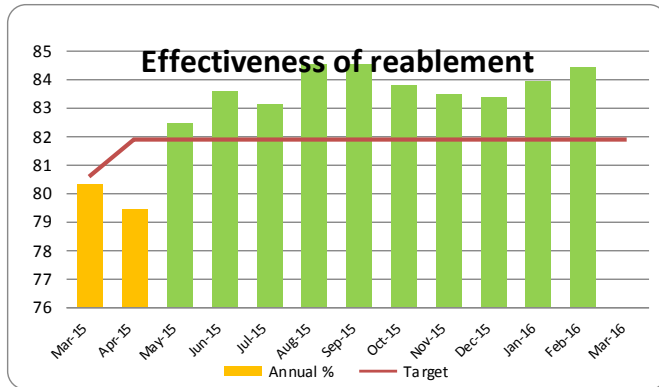
Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement



	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16
Target	81.9	81.9	81.9	81.9	81.9	81.9	81.9	81.9	81.9	81.9	81.9	81.9
Annual %	79.5	82.5	83.6	83.1	84.5	84.5	83.8	83.5	83.4	84.0	84.5	#DIV/0!
Number	116	221	336	444	563	673	771	855	948	1068	1184	0
Population	146	268	402	534	666	796	920	1024	1137	1272	1402	0

Status **G**

Forecast **G**



Note: In year data is cumulative.

Definition: Proportion of older people discharged from hospital into reablement services, who are still at home 91 days' later.

Numerator: Number of older people (65+), within the denominator, who are still at home 91 days' after their discharge.

Denominator: Total number of older people (65+) discharged from hospital into reablement services.

Performance for the cumulative year, April 2015 to February 2016, is better than target and year end performance will be better than target. The long term trend remains positive.

BCF 4 - Delayed transfers of care

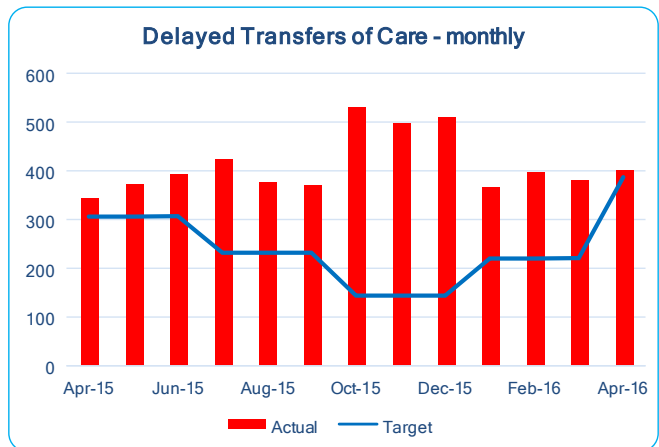
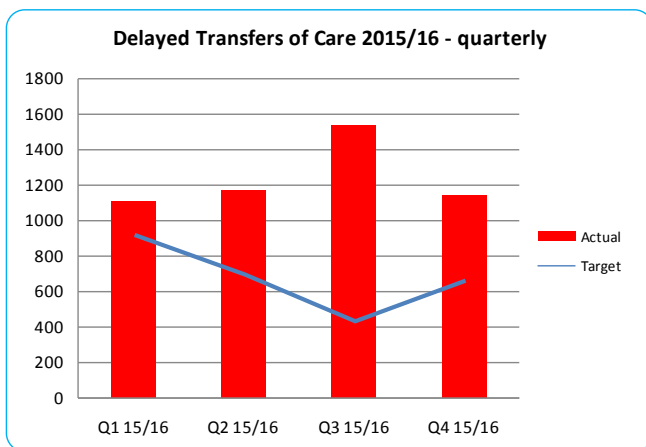


Delayed transfers of care (**delayed days**)
from hospital per 100,000 population
(aged 18+). Reported one month in

	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16
Target	306	306	307	232	232	232	144	144	144	220	220	221
Monthly Rate	343.0	372.0	393.4	424.0	377.1	369.6	529.6	498.2	509.7	365.5	396.7	381.3
Number of days	864	937	991	1068	950	931	1334	1255	1284	926	1005	966
Population	251893	251893	251893	251893	251893	251893	251893	251893	251893	253354	253354	253354

	Apr-16
Target	387
Monthly Rate	400.6
Number of days	1015
Population	253354

	Q1	Q2	Q3	Q4
Target 15/16	919.4	696.7	432.7	661.9
Quarterly Rate	1108.407	1170.735	1537.558	1143.459
Number of days	2792	2949	3873	2897
Population	251893	251893	251893	253354



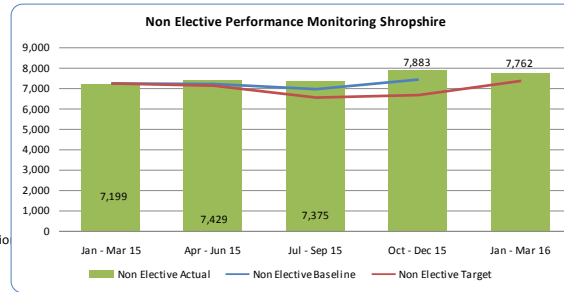
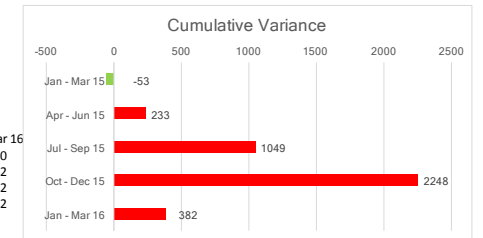
Rationale: This measures the effectiveness of joint working arrangements at the interface between Health and Social Care Services. Aim to keep delays to a minimum.

Performance Comments: Annual performance for this measure is significantly worse than target. Targets for 2016/17 have been established. Data for the first month of the reporting year shows that performance remains below the standard. It should be noted that this measure is different to the CCG's standard DTOC target of delays of no more than 3.5% of occupied bed days at our acute provider for NHS responsible, Social Care responsible and jointly responsible delays.

For the purposes of the Better Care Fund, the measure is based on all Shropshire residents wherever they are occupying a bed standardized by 100,000 of population. It also focuses only on those delays which are an NHS responsibility removing from the equation any delays that are a Social Care or joint responsibility. It also makes an adjustment for population growth. The RAG rating tolerance for this measure is rated as - Red = below the performance standard, Green = better than the performance standard

Total non-elective admissions (general & acute), all-age

	Q1 13/14	Q2 13/14	Q3 13/14	Q4 13/14	Q1 14/15	Q2 14/15	Q3 14/15	Jan - Mar : Apr - Jun : Jul - Sep : Oct - Dec : Jan - Mar 16
Non Elective Baseline	6,824	6,668	7,408	7,250	7,258	6,965	7,416	7,252 7,227 6,973 7,446
Non Elective Target								7,252 7,143 6,559 6,684 7,380
Non Elective Actual					7,227	6,973	7,446	7,199 7,429 7,375 7,883 7,762
								-53 286 816



	Jan - Mar : Apr - Jun : Jul - Sep : Oct - Dec : Jan - Mar 16
cumulative	7,252 14,395 20,954 27,638 7380
cumulative	7,199 14,628 22,003 29,886 7762
variance	-53 286 816 1199 382
cumulative	-53 233 1049 2248 382

Definition:-

Everyone Counts: Planning for Patients 2014/15 - 2018/19: Technical Definition Commissioning Groups and Area Teams

E.C.4: Non-elective FFCes (First Finished Consultant Episode)

DEFINITIONS Detailed Descriptor:

Total number of non-elective FFCes in general & acute (G&A) specialties in a month. Lines Within Indicator (Units):

Number of G&A non-elective FFCes in the period. Data Definition:

Non-Elective FFCes data are derived from the Monthly Activity Return, which is collected from the NHS. It is collected from providers (both NHS and IS) who provide the data broken down by Commissioner.

Number of first finished consultant episodes (FFCEs) for the G&A specialties (see below) relating to hospital provider spells for which:

- patient classification = ordinary admission;
- admission method = emergency admission, maternity admission, other admission (codes 21-83);

Exclude "well babies". These are defined as having admission method = other and neonatal level of care = normal care.

General & Acute specialties;

- include: 100-192, 300-460, 502, 800-831, 900 and 901
- exclude: 501, 700-715.

Monthly Activity Return guidance is available here: <http://www.england.nhs.uk/statistics/statistical-work-areas/hospital-activity/monthly-hospital-activity/>

MONITORING Monitoring Frequency:

Monthly Monitoring Data Source:

Monthly Activity Returns

ACCOUNTABILITY What success looks like, Direction, Milestones:

There should be a reduction in the growth of the number of non-elective FFCes. Timeframe/Baseline:

Ongoing

Everyone Counts: Planning for Patients 2014/15 - 2018/19: Technical Definitions for Clinical Commissioning Groups and Area Teams

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Rationale:

Where clinically appropriate, it is better for patients to be treated or continue their treatment at home or in their community rather than in hospital.

The local NHS should be looking to treat patients in the most clinically appropriate way.

PLANNING REQUIREMENTS Are plans required and if so, at what frequency?

CCG – Yes, monthly for 2014/15 and 2015/16 and annual from 2016/17 to 2018/19 via ProvCom template.

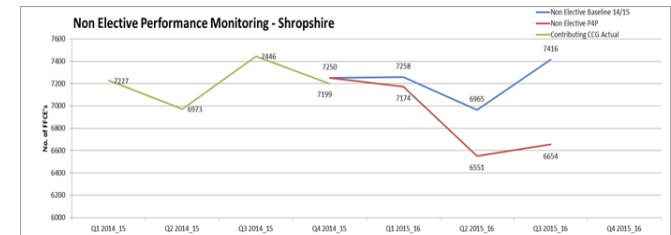
Area Team – Yes, monthly for 2014/15 and 2015/16 and annual from 2016/17 to 2018/19, via ProvCom template.

Please note: Data entered regarding Area Team activity should be based on the activity that is commissioned by an Area Team irrespective of the location of the provider .

For those Area Teams with responsibility for Specialised Commissioning, this will include activity in line with the contractual arrangements i.e all activity based on a provider footprint not a registration basis.

FURTHER INFORMATION

This information will be used to reconcile with data collected in the finance planning template.

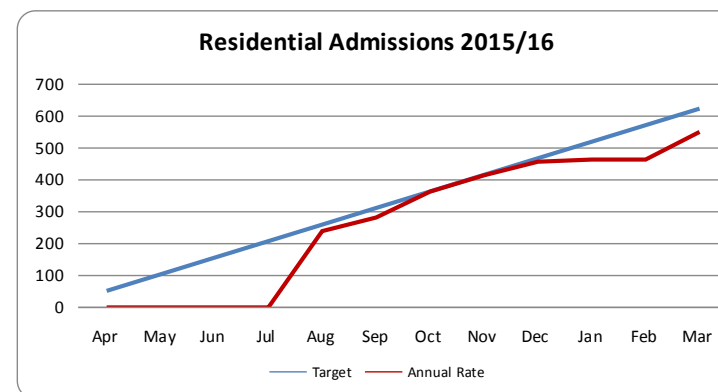
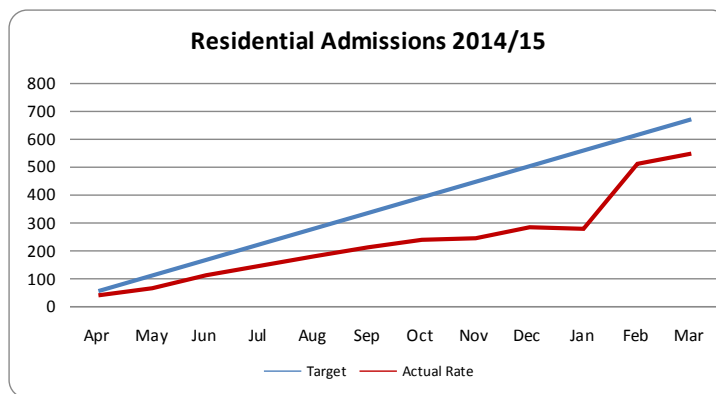


Residential admissions

	13/14 Bas	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	15/16
Permanent admissions of older people (aged 65 and over) to residential and nursing care homes,														
Target	749.2	56	112	168	224	280	336	392	448	504	560	616	672	623.7
Actual Rate	749.2	40.9	66.3	112.9	146.7	180.6	213.0	239.8	245.5	285.0	279.3	512.1	548.8	623.7
Number	498	29	47	80	104	128	151	170	174	202	198	363	389	453
Population	66475	70883	70883	70883	70883	70883	70883	70883	70883	70883	70883	70883	70883	72635

	14/15 Bas	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	15/16
Target	672	52	104	156	208	260	312	364	416	468	520	572	623.7	
Annual Rate	548.8	0.0	0.0	0.0	0.0	239.6	282.2	363.5	414.4	457.1	464.0	464.0	550.7	#DIV/0!
Number	389	0	0	0	0	174	205	264	301	332	337	337	400	0
Population	70883	72635	72635	72635	72635	72635	72635	72635	72635	72635	72635	72635	72635	

Note: BCF figures and Shropshire Council annual rate figures vary due to use of different population figures



Reablement

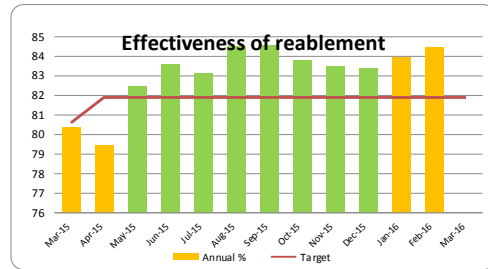
	2013/14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	
Target		80.6	80.6	80.6	80.6	80.6	80.6	80.6	80.6	80.6	80.6	80.6	80.6	81.9	81.9	81.9	81.9	81.9	81.9	81.9	81.9	81.9	81.9	81.9	81.9	81.9
Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement	Annual %	77.4	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	72.4	78.5	79.7	79.5	79.7	80.3	79.5	82.5	83.6	83.1	84.5	84.5	83.8	83.5	83.4	84.0	84.5	#DIV/0!
	Number	120							76	164	243	346	444	552	116	221	336	444	563	673	771	855	948	1068	1184	
	Denominator	155							105	209	305	435	557	687	146	268	402	534	666	796	920	1024	1137	1272	1402	

79.03226 80.76923 82.30088 80.64516

98 84 93 275
124 104 113 341

ASCOF Oct - Dec = 80.6%

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	2016/17
Target	81.9	81.9	81.9	81.9	81.9	81.9	81.9	81.9	81.9	81.9	81.9	81.9	
Annual %													
Number													
Denominator													



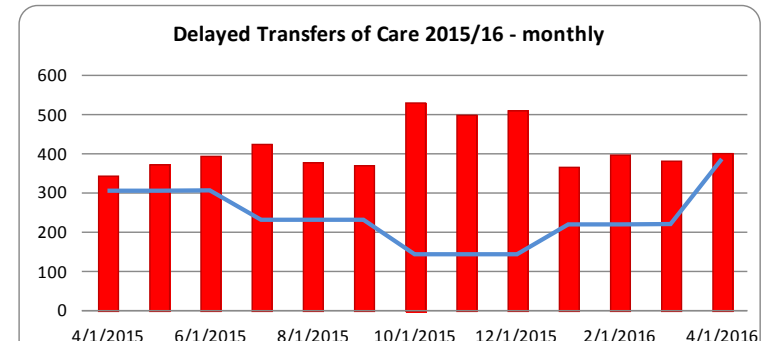
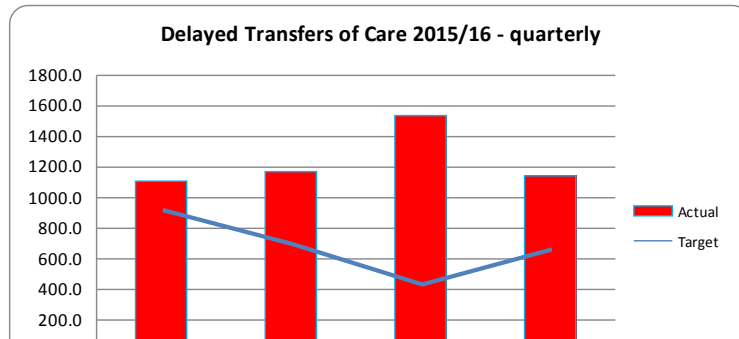
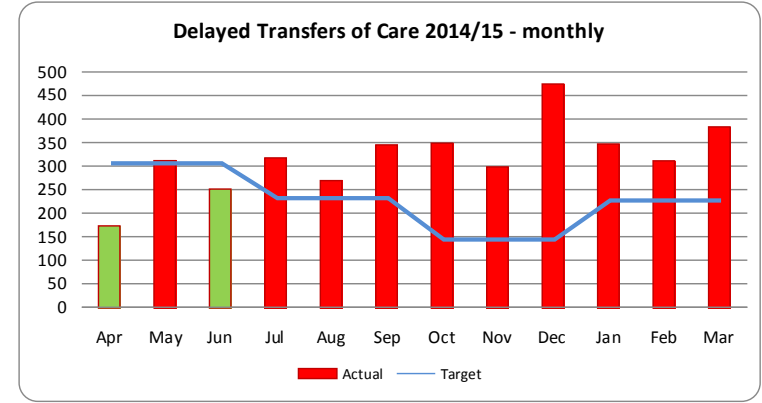
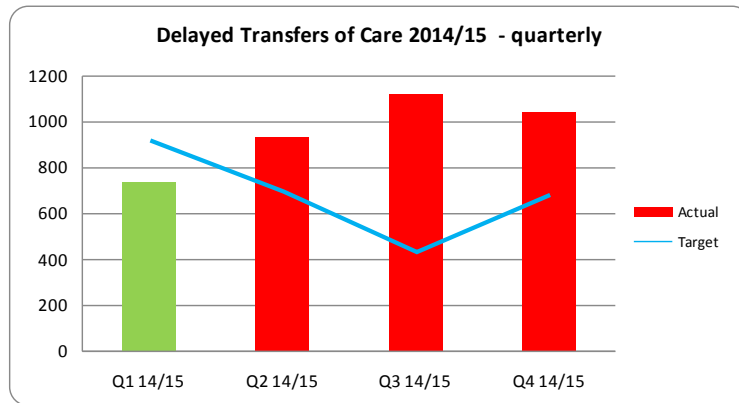
Delayed transfers of care

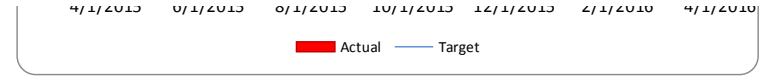
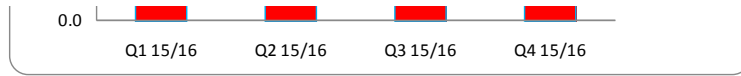
Delayed transfers of care (delayed days) from hospital per 100,000 population (aged 18+).

	13/14 Bas	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	15/16
Target		306	306	306	232	232	232	144	144	144	227	227	227	
Actual		173.0	311.6	251.3	317.6	269.2	345.1	348.7	298.4	474.6	347.0	311.2	383.5	
Number		433	780	629	795	674	864	873	747	1188	874	784	966	
Denominator		250337	250337	250337	250337	250337	250337	250337	250337	250337	251893	251893	251893	253354

	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Apr-16
Target	306	306	307	232	232	232	144	144	144	220	220	221	387
Actual	343.0	372.0	393.4	424.0	377.1	369.6	529.6	498.2	509.7	365.5	396.7	381.3	400.6
Number	864	937	991	1068	950	931	1334	1255	1284	926	1005	966	1015
Denominator	251893	251893	251893	251893	251893	251893	251893	251893	251893	253354	253354	253354	253354

	Q1 14/15	Q2 14/15	Q3 14/15	Q4 14/15	Q1 15/16	Q2 15/16	Q3 15/16	Q4 15/16
Target	919.6	697.1	433	682.2	919.4	696.7	432.7	661.9
Actual	735.8	931.9	1121.7	1041.7	1108.4	1170.7	1537.6	1143.5
Number	1842	2333	2808	2624	2792	2949	3873	2897
Denominator	250337	250337	250337	251893	251893	251893	251893	253354





Patient / Service User Experience Metric

	13/14 Baseline	14/15	15/16
Target		50%	70%
Q10. Do you know how to contact this person if you have a concern about your care?	Metric Value	50%	50.00%
	Numerator	5	5
	Denominator	10	10

<http://www.cqc.org.uk/provider/RRE/survey/6#undefined>

Local Metric

	13/14 Baseline	14/15	15/16
Local people admitted (unplanned) to Redwoods Hospital with a diagnosis of dementia as a proportion of those with a	Target	1.4%	1.2%
	Metric Value	1.6%	1.4%
	Numerator	41	40
	Denominator	2624	2936

Non Elective Admissions:

	13/14 Baseline	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	15/16
Target														
Actual														
Number														
Denominator														

title: