

AGENDA SUPPLEMENT (1)

Meeting: Health Select Committee

Place: Council Chamber - County Hall, Bythesea Road, Trowbridge, BA14 8JN

Date: Wednesday 17 July 2024

Time: 10.30 am

The Agenda for the above meeting was published on Tuesday 9 July 2024. Additional documents are now available and are attached to this Agenda Supplement.

Please direct any enquiries on this Agenda to Lisa Pullin/Ben Fielding of Democratic Services, County Hall, Bythesea Road, Trowbridge, direct line: 01225 718656 or email: Benjamin.fielding@wiltshire.gov.uk

Press enquiries to Communications on direct lines (01225)713114/713115.

This Agenda and all the documents referred to within it are available on the Council's website at www.wiltshire.gov.uk

8 **Better Care Fund** *(Pages 3 - 32)*

DATE OF PUBLICATION: 15 July 2024

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Better Care Fund – A Wiltshire Overview

July 11th, 2024

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Bath and North East Somerset,
Swindon and Wiltshire
Integrated Care Board



Agenda Item 8

Wiltshire Council

Total Budget 24-25 - £68.2m

24-25 planning refresh submitted to National team on 10th June 2024.

BCF Plans must be agreed by the ICB (in accordance with ICB governance rules) and the local council chief executive, prior to being signed off by the HWB. Once the plan is agreed and approved, the funding must be placed into one or more pooled funds under section 75 of the NHS Act 2006.

Once plans are mutually agreed and assured by the national team, any variations must be mutually agreed.

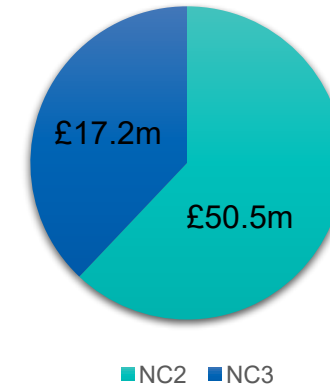


National Context

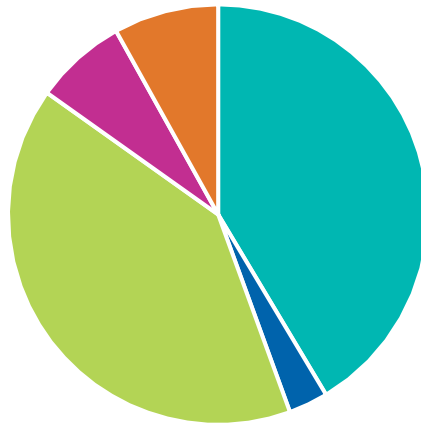
In 23-24 –

Of 58 schemes;

- 36 support **NC2: enabling people to stay well, safe and independent at home for longer**
- 22 support **NC3: providing the right care, at the right place, at the right time**



% of fund



■ Contractual ■ Contractual/In-House ■ System-Wide Support ■ NR ■ DFG

- **Type of spend:**
- 41% - Contractual (28m)
- 3% - Contractual/In-House (£2m)
- 40% - System-Wide Support (28m)
- 8% - DFG



Key Services/Contracts (all figures are approximate)

Scheme	Detail	2024-25 Budget
Community Equipment	Our largest contract. The contract covers adults, children's and continence products. Serves, on average, 1800 service users per month.	£7.6m
Pathway 0 Service – Home From Hospital	A service that supports people being discharged from hospital. Support can include welfare checks, shopping, meal prep assistance, community information and referrals to community groups.	£442,755
Pathway 1 Services – Reablement and HomeFirst ¹	A rehabilitative pathway that supports people to remain in their own homes and as independent as possible.	£3.2m (WHC), and £1.5m (Rb), UEC £1.64m
Pathway 2 Bedded care contracts	A short-term bedded setting that delivers a joint health and social care approach to rehabilitation and regaining independence. (GP support for these beds is also funded)	£3.8m (£257,890)
Crisis Response Services Rapid Response Service Urgent Care at Home ² Telecare Response and support ²	Services that provide in-home support at times of crisis with the aim of avoiding a hospital admission. Support includes a telecare service and response.	£1.4m £1m £1.3m
Carers Services 3 Contracts	Contracts cover digital, adults and young carers support.	£1.3m

¹ HomeFirst will be delivered as one service by Wiltshire Council from 2025-26.

² Brought in-house from Medvivo on 1st August 2024



Key Services/Contracts

Scheme	Detail	2024-25 Budget
Community Health Services	Several contracts are held with Wiltshire Health and Care, commissioned by ICB, delivering a range of community health services such as In-Reach, Community Geriatrics, Community Hospital beds, Discharge staff, Overnight nursing etc	£8.6m
Prevention and Wellbeing Team roles	Supports people in the community, preventing the need for more formal support. Enables people to find their own solutions and thrive in their communities.	£653,000
Providing additional capacity in Adult Social Care Services	Supports capacity in a range of ASC services.	£14m
Supporting Capacity in home care and complex cases	Providing support for the home care etc including domiciliary care and beds	£6.1m

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All contracts/schemes are monitored monthly for activity, demand, performance and spend



Bath and North East Somerset,
Swindon and Wiltshire
Integrated Care Board



Wiltshire Council



BCF Performance Metrics

Metric	2023-24 YE reported	2024-25 (planned)
Discharge to usual place of residence. Percentage of people, resident in the HWB, who are discharged from acute hospital to their normal place of residence.	91.6%	91.8%
Proportion of older people who were still at home 91 days after discharge from hospital into reablement or rehabilitation services ¹	92%	N/A ²
Admissions to residential and care home (per 100,000)	735	442 ³
Unplanned admissions for ambulatory sensitive chronic conditions	3,728	3,102
Emergency hospital admissions due to falls in people over 65yrs (per 100,000)	1,981	2,000

¹ Reablement figures only

² No longer required to submit data on this metric but expected to monitor locally.

³ The old metric was ASCOF related and included anyone returning to a care home if admitted from a care home. Local data collection is now required. Agreed to focus on new admissions only. The 24-25 figure is based on 23-24 'new' admissions.

NHS

Bath and North East Somerset,
Swindon and Wiltshire
Integrated Care Board



Wiltshire Council



Reporting

Group	Detail	Responsibility
National BCF Team	Require different reports at various times: Currently: fortnightly and monthly (ASCDF) Annual and six-monthly (Oct 23) planning and performance update (to include demand and capacity plan refresh).	Scrutinises and assures plans.
Health & Wellbeing Board	Oversees delivery of the BCF.	Responsible for sign-off of plans and performance reports.
ICA Partnership Committee	Brings together Wiltshire partners to progress work on the design and delivery of IC models.	No delegated budget or functions. Accountable for effective decision- making regarding Alliance programmes of work.
Localities Commissioning Group	A joint decision-making group, oversees management of joint investments and initiatives.	Delegated financial decision-making.
Health Select Committee	Provides scrutiny of matters relating to the planning, provision and operation of health services in Wiltshire.	To maintain an overview of the Council's role and responsibilities in relation to health and wellbeing.



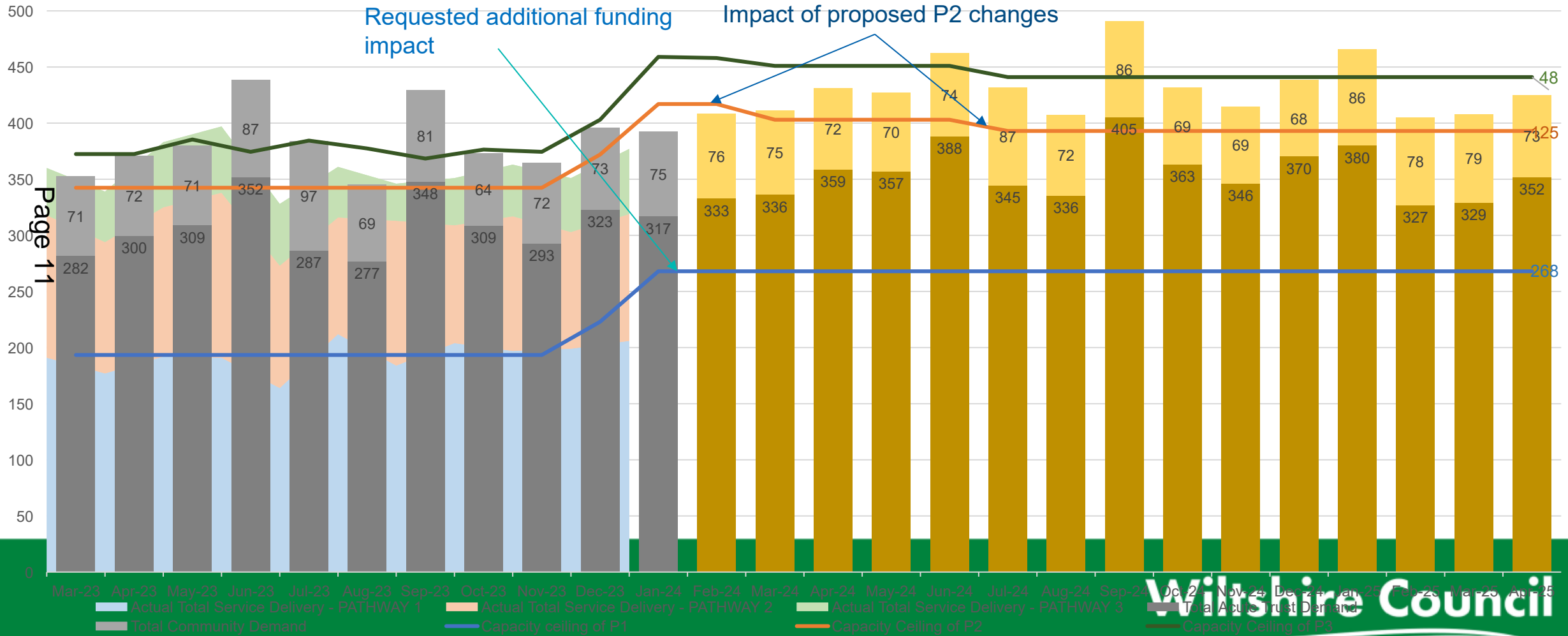
Reporting – Demand and Capacity

- Extensive work led by ICB – Emma Higgins
- Covers Hospital Discharge demand and Capacity to manage those discharges (across the pathways).
- Informs operational planning
- A BSW wide Demand and Capacity group established, alongside a Wiltshire sub-group.
- Modelling tool developed – to calculate and model scenarios. Outputs from the modelling inform operational and financial decision-making. Funds can be targeted where capacity is needed – eg 24-25 planning round – PW1 funding increase.
- Harmonisation across BSW for 24-25 quarterly returns and 25-27 BCF planning.

All Pathway Capacity – WITH ADDITIONAL FUNDING IMPACT

ALL SOURCE DEMAND, CAPACITY and PERFORMANCE STACKED to show TOTALS

Assumes:-
 P1 recurrent funding awarded
 Scenario 2b goes ahead
 Demand from P2 re-pathway'd



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Reporting – Demand and Capacity

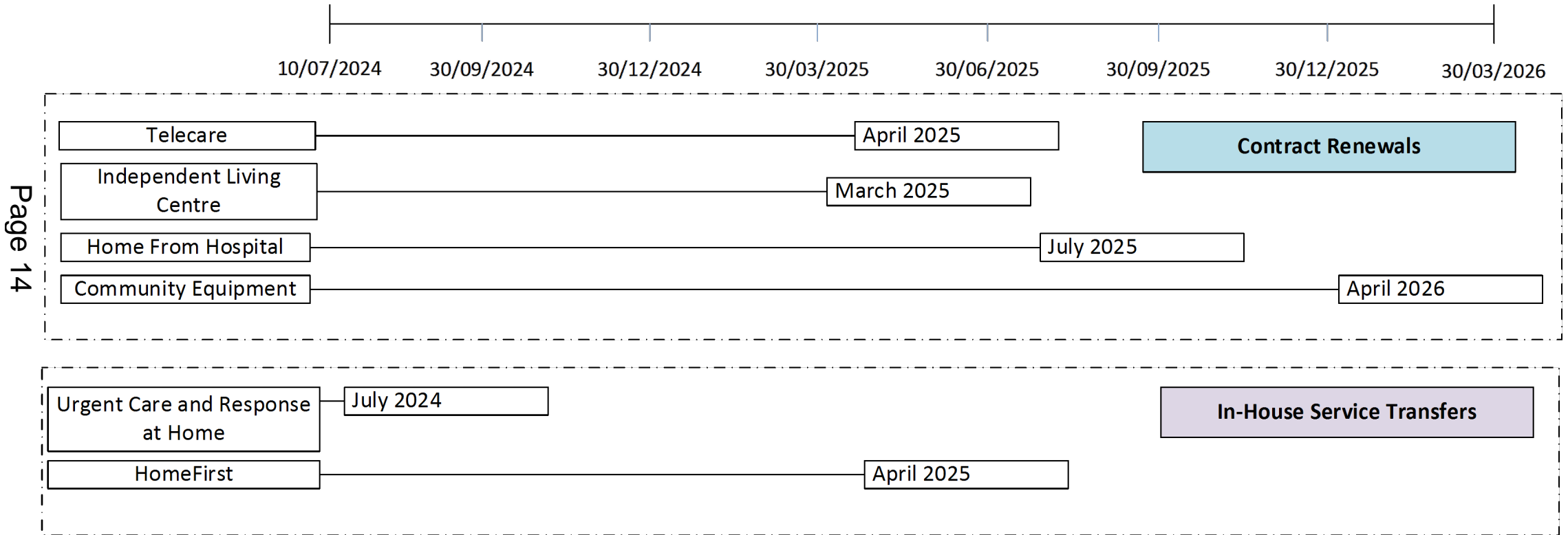
June 2023 - Pathway 1 Review	Whole service review undertaken; identified flow blocks, lack of capacity in certain areas, opportunities for role of Care Coordination Centres, new service model developed. Increased ICB UEC funding to match mapped demand.
PW2 Review - 2022	Resulted in the piloting and contracting of 30 'Hub' beds under a new delivery model. This model is already being reviewed to ensure LOS is achieved (to ensure capacity required is available) as well as how we might use them differently.
Community Equipment	Has seen an increase in users as we move to keep more people at home and support independence. Average of 1800 new users per month. One of the largest contracts the Council commissions. Additional Discharge funding was used to bolster spend.

Additional Discharge Funding

- Aim: to support additional discharges from hospital during peak winter pressures.
- We use the funds to deliver the following additionality;
 - Bolster community equipment supply
 - Capacity in bedded settings for complex discharges (PW3)
 - Packages of domiciliary care to support professional capacity in the PW1 discharge services.

Coming Up

The following contracts will be re-commissioned in the next 12-18 months. All provide opportunity to review the service requirement and how we deliver the best outcomes for Wiltshire residents:



Better Care Fund 2024-25 Update Template

3. Summary

Selected Health and Wellbeing Board:

Wiltshire

Income & Expenditure

[Income >>](#)

Funding Sources	Income	Expenditure	Difference
DFG	£4,050,899	£4,050,899	£0
Minimum NHS Contribution	£40,335,427	£40,362,726	-£27,299
iBCF	£10,242,097	£10,446,582	-£204,485
Additional LA Contribution	£5,080,155	£5,080,155	£0
Additional ICB Contribution	£2,102,263	£2,102,263	£0
Local Authority Discharge Funding	£2,393,210	£2,393,210	£0
ICB Discharge Funding	£2,687,702	£3,807,000	-£1,119,298
Total	£66,891,754	£68,242,835	-£1,351,081

[Expenditure >>](#)

NHS Commissioned Out of Hospital spend from the minimum ICB allocation

	2024-25
Minimum required spend	£11,462,185
Planned spend	£40,114,154

Adult Social Care services spend from the minimum ICB allocations

	2024-25
Minimum required spend	£22,465,242
Planned spend	£22,889,455

[Metrics >>](#)

Avoidable admissions

	2024-25 Q1 Plan	2024-25 Q2 Plan	2024-25 Q3 Plan	2024-25 Q4 Plan
Unplanned hospitalisation for chronic ambulatory care sensitive conditions (Rate per 100,000 population)	155.4	144.6	178.7	159.5

Falls

		2023-24 estimated	2024-25 Plan
Emergency hospital admissions due to falls in people aged 65 and over directly age standardised rate per 100,000.	Indicator value	2,227.0	1,883.0
	Count	2144	2000
	Population	121861	122226

Discharge to normal place of residence

	2024-25 Q1 Plan	2024-25 Q2 Plan	2024-25 Q3 Plan	2024-25 Q4 Plan
Percentage of people, resident in the HWB, who are discharged from acute hospital to their normal place of residence (SUS data - available on the Better Care Exchange)	92.1%	92.1%	92.1%	92.1%

Residential Admissions

		2022-23 Actual	2024-25 Plan
Long-term support needs of older people (age 65 and over) met by admission to residential and nursing care homes, per 100,000 population	Annual Rate	532	370

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Better Care Fund 2024-25 Update Template

4. Capacity & Demand

Selected Health and Wellbeing Board:

Wiltshire

Hospital Discharge	Capacity surplus. Not including spot purchasing													Capacity surplus (including spot purchasing)										
	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25
Capacity - Demand (positive is Surplus)																								
Reablement & Rehabilitation at home (pathway 1)	-25	-23	-55	-21	-12	-81	-39	-22	-52	-36	-3	-5	-25	-23	-55	-21	-12	-81	-39	-22	-52	-36	-3	-5
Short term domiciliary care (pathway 1)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Reablement & Rehabilitation in a bedded setting (pathway 2)	31	31	31	31	31	31	31	31	36	11	31	31	31	31	31	31	31	31	31	31	36	11	31	31
Other short term bedded care (pathway 2)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Short-term residential/nursing care for someone likely to require a longer-term care home placement (pathway 3)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Please briefly describe the support you are providing to people for less complex discharges that do not require formal reablement or rehabilitation – e.g. social support from the voluntary sector, blitz cleans. You should also include an estimate of the number of people who will receive this type of service during the year.

The BCF funded 'Home from Hospital' service supports, on average, 54 people per month. They support older patients with their discharge home following an admission to hospital. Support includes shopping, meal prep, signposting to further VCS support etc. Additionally, our minor adaptations service, funded by the BCF through the community equipment contract supports with minor adaptations such as grab rails in a timely manner to support discharge home.

Demand and Capacity analysis has identified a deficit, which additional funding has been secured to address. However we are preparing to monitor the situation closely to ensure seasonal variations do not result in a deficit of capacity.

The figures for reablement and rehabilitation in a bedded setting are static each month as it is based on a LOS target of 26 days or less and we have fixed contracts for 30 beds.

Row 25 - Reablement and Rehabilitation at Home Pathway 1 includes short term domiciliary care but we do not have the means to be able to break this down as it is wrapped into the HomeFirst pathway 1 service.

The Home First Improvement Programme has yielded a better understanding of service demand and capacity and delivered a number of process efficiencies and changes. Whilst the time from service referral to start date has reduced, this does not yield improved capacity for Home First but results

Capacity - Hospital Discharge	Metric	Refreshed planned capacity (not including spot purchased capacity)												Capacity that you expect to secure through spot purchasing											
		Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25
Service Area		193	193	193	193	193	193	193	193	193	193	193	0	0	0	0	0	0	0	0	0	0	0	0	
Reablement & Rehabilitation at home (pathway 1)	Monthly capacity. Number of new packages commenced.	193	193	193	193	193	193	193	193	193	193	193	0	0	0	0	0	0	0	0	0	0	0	0	
Reablement & Rehabilitation at home (pathway 1)	Estimated average time from referral to commencement of service (days). All packages (planned and spot purchased)	10.9	9.7	8.5	10.8	9	8.9	8.1	8.9	7.9	7.1	5.7	5.7												
Short term domiciliary care (pathway 1)	Monthly capacity. Number of new packages commenced.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Short term domiciliary care (pathway 1)	Estimated average time from referral to commencement of service (days). All packages (planned and spot purchased)	0	0	0	0	0	0	0	0	0	0	0													
Reablement & Rehabilitation in a bedded setting (pathway 2)	Monthly capacity. Number of new packages commenced.	135	135	135	125	125	125	125	125	125	125	125	0	0	0	0	0	0	0	0	0	0	0	0	
Reablement & Rehabilitation in a bedded setting (pathway 2)	Estimated average time from referral to commencement of service (days). All packages (planned and spot purchased)	10.5	14	13.6	16.8	11.6	11.4	8.5	4.9	4.4	4	3.3	3.4												
Other short term bedded care (pathway 2)	Monthly capacity. Number of new packages commenced.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Other short term bedded care (pathway 2)	Estimated average time from referral to commencement of service (days). All packages (planned and spot purchased)	0	0	0	0	0	0	0	0	0	0	0													
Short-term residential/nursing care for someone likely to require a longer-term care home placement (pathway 3)	Monthly capacity. Number of new packages commenced.	48	48	48	48	48	48	48	48	48	48	48	0	0	0	0	0	0	0	0	0	0	0	0	
Short-term residential/nursing care for someone likely to require a longer-term care home placement (pathway 3)	Estimated average time from referral to commencement of service (days). All packages (planned and spot purchased)	21	42	30.2	32.9	33.9	30.9	30.3	36.7	31.1	21.8	25	34.2												

Demand - Hospital Discharge		Please enter refreshed expected no. of referrals:											
Pathway	Trust Referral Source	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25
Total Expected Discharges:	Total Discharges	370	368	400	356	347	416	374	357	379	391	338	340
Reablement & Rehabilitation at home (pathway 1)	Total	218	216	248	234	205	274	232	215	245	229	196	198
	GREAT WESTERN HOSPITALS NHS FOUNDATION TRUST	72	72	82	71	68	91	77	71	81	76	65	66
	ROYAL UNITED HOSPITALS BATH NHS FOUNDATION TRUST	73	72	83	71	68	91	77	72	82	76	65	66
	SALISBURY NHS FOUNDATION TRUST	73	72	83	72	69	92	78	72	82	77	66	66
	OTHER	0	0	0	0	0	0	0	0	0	0	0	0
Short term domiciliary care (pathway 1)	Total	0	0	0	0	0	0	0	0	0	0	0	0
	GREAT WESTERN HOSPITALS NHS FOUNDATION TRUST	0	0	0	0	0	0	0	0	0	0	0	0
	ROYAL UNITED HOSPITALS BATH NHS FOUNDATION TRUST	0	0	0	0	0	0	0	0	0	0	0	0
	SALISBURY NHS FOUNDATION TRUST	0	0	0	0	0	0	0	0	0	0	0	0
	OTHER	0	0	0	0	0	0	0	0	0	0	0	0
Reablement & Rehabilitation in a bedded setting (pathway 2)	Total	104	104	104	94	94	94	94	94	89	114	94	94
	GREAT WESTERN HOSPITALS NHS FOUNDATION TRUST	33	33	33	31	31	31	31	31	29	38	31	31
	ROYAL UNITED HOSPITALS BATH NHS FOUNDATION TRUST	36	36	36	32	32	32	32	32	30	38	32	32
	SALISBURY NHS FOUNDATION TRUST	35	35	35	31	31	31	31	31	30	38	31	31
	OTHER	0	0	0	0	0	0	0	0	0	0	0	0
Other short term bedded care (pathway 2)	Total	0	0	0	0	0	0	0	0	0	0	0	0
	GREAT WESTERN HOSPITALS NHS FOUNDATION TRUST	0	0	0	0	0	0	0	0	0	0	0	0
	ROYAL UNITED HOSPITALS BATH NHS FOUNDATION TRUST	0	0	0	0	0	0	0	0	0	0	0	0
	SALISBURY NHS FOUNDATION TRUST	0	0	0	0	0	0	0	0	0	0	0	0
	OTHER	0	0	0	0	0	0	0	0	0	0	0	0
Short-term residential/nursing care for someone likely to require a longer-term care home placement (pathway 3)	Total	48	48	48	48	48	48	48	48	48	48	48	48
	GREAT WESTERN HOSPITALS NHS FOUNDATION TRUST	10	10	10	10	10	10	10	10	10	10	10	10
	ROYAL UNITED HOSPITALS BATH NHS FOUNDATION TRUST	18	18	18	18	18	18	18	18	18	18	18	18
	SALISBURY NHS FOUNDATION TRUST	20	20	20	20	20	20	20	20	20	20	20	20
	OTHER	0	0	0	0	0	0	0	0	0	0	0	0

Better Care Fund 2024-25 Update Template

4. Capacity & Demand

Selected Health and Wellbeing Board:

Wiltshire

Community		Refreshed capacity surplus:											
Capacity - Demand (positive is Surplus)		Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25
Social support (including VCS)		4	4	4	4	4	4	4	4	4	4	4	4
Urgent Community Response		304	304	304	304	304	304	304	304	304	304	304	304
Reablement & Rehabilitation at home		212	214	211	207	205	194	213	212	211	197	204	206
Reablement & Rehabilitation in a bedded setting		0	0	0	0	0	0	0	0	0	0	0	0
Other short-term social care		0	0	0	0	0	0	0	0	0	0	0	0

Average LoS/Contact Hours	
Full Year	Units
390	Contact Hours
247	Contact Hours
21	Contact Hours
0	Average LoS
0	Contact Hours

Capacity - Community		Please enter refreshed expected capacity:											
Service Area	Metric	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25
Social support (including VCS)	Monthly capacity. Number of new clients.	60	60	60	60	60	60	60	60	60	60	60	60
Urgent Community Response	Monthly capacity. Number of new clients.	900	900	900	900	900	900	900	900	900	900	900	900
Reablement & Rehabilitation at home	Monthly capacity. Number of new clients.	257	257	257	257	257	257	257	257	257	257	257	257
Reablement & Rehabilitation in a bedded setting	Monthly capacity. Number of new clients.	0	0	0	0	0	0	0	0	0	0	0	0
Other short-term social care	Monthly capacity. Number of new clients.	0	0	0	0	0	0	0	0	0	0	0	0

Demand - Community		Please enter refreshed expected no. of referrals:											
Service Type		Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25
Social support (including VCS)		56	56	56	56	56	56	56	56	56	56	56	56
Urgent Community Response		596	596	596	596	596	596	596	596	596	596	596	596
Reablement & Rehabilitation at home		45	43	46	50	52	63	44	45	46	60	53	51
Reablement & Rehabilitation in a bedded setting		0	0	0	0	0	0	0	0	0	0	0	0
Other short-term social care		0	0	0	0	0	0	0	0	0	0	0	0

Better Care Fund 2024-25 Update Template

5. Income

Selected Health and Wellbeing Board:

Wiltshire

Local Authority Contribution	
Disabled Facilities Grant (DFG)	Gross Contribution
Wiltshire	£4,050,899
DFG breakdown for two-tier areas only (where applicable)	
Total Minimum LA Contribution (exc iBCF)	£4,050,899

Local Authority Discharge Funding	Contribution
Wiltshire	£2,393,210

ICB Discharge Funding	Previously entered	Updated	Comments - Please use this box to clarify any specific uses or sources of funding
NHS Bath and North East Somerset, Swindon and Wiltshire ICB	£2,687,702	£3,807,000	
Total ICB Discharge Fund Contribution	£2,687,702	£3,807,000	

iBCF Contribution	Contribution
Wiltshire	£10,242,097
Total iBCF Contribution	£10,242,097

Local Authority Additional Contribution	Previously entered	Updated	Comments - Please use this box to clarify any specific uses or sources of funding
Wiltshire	£5,080,155	£5,080,155	
		£204,485	Carry Forward iBCF
		£27,298	Carry Forward BCF
Total Additional Local Authority Contribution	£5,080,155	£5,311,938	

NHS Minimum Contribution	Contribution
NHS Bath and North East Somerset, Swindon and Wiltshire ICB	£40,335,427
Total NHS Minimum Contribution	£40,335,427

Additional ICB Contribution	Previously entered	Updated	Comments - Please use this box clarify any specific uses or sources of funding
NHS Bath and North East Somerset, Swindon and Wiltshire ICB	£2,102,263	£2,102,263	
Total Additional NHS Contribution	£2,102,263	£2,102,263	
Total NHS Contribution	£42,437,690	£42,437,690	

	2024-25
Total BCF Pooled Budget	£68,242,835

Funding Contributions Comments
Optional for any useful detail e.g. Carry over

Better Care Fund 2024-25 Update Template

To Add New Schemes

6. Expenditure

Selected Health and Wellbeing Board:

Wiltshire

<< Link to summary sheet

Running Balances	2024-25		
	Income	Expenditure	Balance
DFG	£4,050,899	£4,050,899	£0
Minimum NHS Contribution	£40,335,427	£40,362,726	-£27,299
iBCF	£10,242,097	£10,446,582	-£204,485
Additional LA Contribution	£5,311,938	£5,080,155	£231,783
Additional NHS Contribution	£2,102,263	£2,102,263	£0
Local Authority Discharge Funding	£2,393,210	£2,393,210	£0
ICB Discharge Funding	£3,807,000	£3,807,000	£0
Total	£68,242,835	£68,242,835	£0

Required Spend

This is in relation to National Conditions 2 and 3 only. It does NOT make up the total Minimum ICB Contribution (on row 33 above).

	2024-25		
	Minimum Required Spend	Planned Spend	Under Spend
NHS Commissioned Out of Hospital spend from the minimum ICB allocation	£11,462,185	£40,114,154	£0
Adult Social Care services spend from the minimum ICB allocations	£22,465,242	£22,889,455	£0

Checklist

Column complete:

Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes
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>> Incomplete fields on row number(s):

276, 277, 278, 279

Scheme ID	Scheme Name	Brief Description of Scheme	Scheme Type	Sub Types	Please specify if 'Scheme Type' is 'Other'	Previously entered Outputs for 2024-25	Updated Outputs for 2024-25	Units	Planned Expenditure		Commissioner	% NHS (if Join)	% Provider (if ICB)	Source of Funding	Previously entered Expenditure for 2024-25 (£)	Updated Expenditure for 2024-25 (£)	% of Overall Spend (Average)	Do you wish to update?	Comments if updated e.g. reason for the changes made
									Area of Spend	Please specify if 'Area of Spend' is 'other'									
1	IC Therapy (Wiltshire Health and Care ASC)	Intermediate Care Therapies	Bed based Intermediate Care Services (Reablement,	Bed-based intermediate care with rehabilitation (to support discharge)		370	391	Number of placements	Community Health		NHS		NHS Community	Minimum NHS Contribution	£977,935	£991,137	100%	Yes	Increase in outputs related to the embedding of Pathway 2 contract with stakeholders across the system as well as contract providers. The service length of stay
2	Access to Care inc SPA	Systems to manage patient flow	Integrated Care Planning and Navigation	Care navigation and planning			0		Community Health		NHS		Private Sector	Minimum NHS Contribution	£1,158,139	£1,086,519	100%	Yes	Inflation
3	Patient Flow (WHC ACS)	Systems to manage patient flow	High Impact Change Model for Managing Transfer of Care	Multi-Disciplinary/Multi-Agency Discharge Teams supporting discharge			0		Community Health		NHS		NHS Community	Minimum NHS Contribution	£182,027	£184,485	100%	Yes	Inflation
4	Acute Trust Liaison b	Discharge Teams	High Impact Change Model for Managing Transfer of Care	Early Discharge Planning			0		Acute		NHS		NHS Community	Minimum NHS Contribution	£245,261	£248,572	100%	Yes	Inflation
5	Intermediate Care Beds GP Cover	Home first /discharge to assess	Other	Bed-based intermediate care with rehabilitation (to support discharge)	GP support to cover temp residents		0		Primary Care		NHS		NHS	Additional NHS Contribution	£520,963	£162,263	100%	Yes	Scheme total £257,890, £95,627 funded min ICB cont scheme 68 below
6	Step Up Beds (WHC ACS) Community Hospital Beds	Community Hospital beds	Bed based Intermediate Care Services (Reablement,	Bed-based intermediate care with rehabilitation (to support discharge)		751	616	Number of placements	Community Health		NHS		NHS Community	Minimum NHS Contribution	£1,023,712	£1,037,532	100%	Yes	Inflation
7	Community Services - Community contract (WHC ACS)	Community Services	Community Based Schemes	Integrated neighbourhood services			0		Community Health		NHS		NHS Community	Minimum NHS Contribution	£4,453,122	£4,513,239	100%	Yes	Inflation

8	Rehabilitation Support Workers (WHC ACS)	Home first /discharge to assess	High Impact Change Model for Managing Transfer of Care	Home First/Discharge to Assess - process support/core costs			0		Community Health		NHS		NHS Community	Minimum NHS Contribution	£1,455,981	£1,475,637	100%	Yes	Inflation
9	Integrated Equipment - CCG (excluding continence)	Home first /discharge to assess	High Impact Change Model for Managing Transfer of Care	Housing and related services			0		Community Health		NHS		Private Sector	Minimum NHS Contribution	£4,497,116	£2,824,304	100%	Yes	£2,015,755 now funded through S75 arrangements
10	Integrated Equipment - CCG (excluding continence)- Discharge	Home first /discharge to assess	High Impact Change Model for Managing Transfer of Care	Housing and related services			0		Community Health		NHS		Private Sector	ICB Discharge Funding	£841,140	£800,343	100%	Yes	It totality with line above
11	EOL - 72 hour pathway Discharge Service (Dorothy House)	Seven-Day services	High Impact Change Model for Managing Transfer of Care	Early Discharge Planning			0		Community Health		NHS		Charity / Volunt	Minimum NHS Contribution	£222,192	£225,191	100%	Yes	Inflation
12	Mental Health Liaison	Enhancing health in care homes	Integrated Care Planning and Navigation	Care navigation and planning			0		Mental Health		NHS		NHS Mental Health	Minimum NHS Contribution	£243,148	£0	0%	Yes	£246,431 funded through S75 arrangements
13	Community geriatrics (WHC ACS)	Enhancing health in care homes	Integrated Care Planning and Navigation	Assessment teams/joint assessment			0		Community Health		NHS		NHS Community	Minimum NHS Contribution	£133,257	£135,056	100%	Yes	Inflation
14	Home first WHC	Home first/ reablement	High Impact Change Model for Managing Transfer of Care	Home First/Discharge to Assess - process support/core costs			0		Community Health		NHS		NHS Community	Additional NHS Contribution	£835,106	£0	100%	Yes	New scheme below as now Min ICB cont
15	Discharge service staffing WHC	Discharge service staffing	High Impact Change Model for Managing Transfer of Care	Home First/Discharge to Assess - process support/core costs			0		Community Health		NHS		NHS Community	Minimum NHS Contribution	£423,655	£429,374	100%	Yes	Inflation
16	Overnight Nursing WHC	Overnight Nursing WHC	Personalised Care at Home	Physical health/wellbeing			0		Community Health		NHS		NHS Community	Additional NHS Contribution	£723,100	£0	100%	Yes	New scheme below as now Min ICB cont
17	Integrated Equipment - Local Authority (Adults)	Home first/ discharge to assess	High Impact Change Model for Managing Transfer of Care	Housing and related services			0		Social Care		LA		Private Sector	Additional LA Contribution	£1,547,500	£1,635,089	100%	Yes	Inflation
18	Integrated Equipment - Local Authority (Children)	Home first/ discharge to assess	High Impact Change Model for Managing Transfer of Care	Housing and related services			0		Social Care		LA		Private Sector	Additional LA Contribution	£293,500	£310,112	100%	Yes	Inflation
19	Homefirst Plus- Local Authority Contribution	Home first/ discharge to assess	Home-based intermediate care services	Reablement at home (accepting step up and step down users)	216	825	Packages	Social Care		LA			Local Authority	Additional LA Contribution	£664,898	£414,994	100%	Yes	Scheme 19 and scheme 52 are pooled together to fund Homefirst activity. Decision has been taken to bring both scheme outputs together to show one consistent figure.
20	Carers - LA contribution to pool (Adults)	Carers	Carers Services	Carer advice and support related to Care Act duties	560	470	Beneficiaries	Social Care		LA			Charity / Volunt	Additional LA Contribution	£668,583	£706,425	100%	Yes	Decrease in output can be attributed to performance issues with contract provider. The contract has subsequently been retendered with an alternative
21	Carers - LA contribution to pool (Childrens)	Carers	Carers Services	Carer advice and support related to Care Act duties	560	428	Beneficiaries	Social Care		LA			Charity / Volunt	Additional LA Contribution	£72,674	£76,787	100%	Yes	Decrease in output can be attributed to performance issues with contract provider. The contract has subsequently been retendered with an alternative
22	Protecting Adult Social Care - maintaining services A	Protecting Adult Social Care	Community Based Schemes	Integrated neighbourhood services			0		Social Care		LA		Local Authority	Additional LA Contribution	£1,833,000	£1,936,748	100%	Yes	Inflation
23	Disabled Facilities Capital Grant	Disabled Facilities Grant	DFG Related Schemes	Adaptations, including statutory DFG grants	2800	146	Number of adaptations funded/people	Social Care		LA			Private Sector	DFG	£3,713,864	£4,050,899	100%	Yes	New Year allocation
24	Protecting Adult Social Care - maintaining services B	Protecting Adult Social Care	Care Act Implementation Related Duties	Other	Maintaining social care capacity		0		Social Care		LA		Local Authority	Minimum NHS Contribution	£8,215,774	£8,680,786	100%	Yes	Inflation
25	Care Act - maintaining services C	Protecting Adult Social Care	Care Act Implementation Related Duties	Other	Maintaining social care capacity		0		Social Care		LA		Local Authority	Minimum NHS Contribution	£3,112,035	£3,288,177	100%	Yes	Inflation
26	Medvivo - Telecare Response and Support	Preventative Services	Assistive Technologies and Equipment	Assistive technologies including telecare	3600	2562	Number of beneficiaries	Social Care		LA			Private Sector	Minimum NHS Contribution	£1,268,238	£1,285,359	100%	Yes	Change in output attributed to previous estimated output including sheltered housing customer who use the Telecare service but are funded seperately. The
27	Website Data Admin & Content Officers	Focus on choice	Integrated Care Planning and Navigation	Support for implementation of anticipatory care			0		Social Care		LA		Local Authority	Minimum NHS Contribution	£64,947	£67,869	100%	Yes	Inflation

28	Complex Care packages	Protecting Adult Social Care	Home Care or Domiciliary Care	Domiciliary care packages		228	275	Hours of care (Unless short-term in which	Social Care		LA		Private Sector	Minimum NHS Contribution	£497,926	£526,108	100%	Yes	Funding is pooled together for scheme 28 and 57 so outputs have also been pooled together to show consistent figure. Outputs are higher due to changes
29	ASC transformation	Discharge teams	Integrated Care Planning and Navigation	Assessment teams/joint assessment			0		Social Care		LA		Local Authority	Minimum NHS Contribution	£390,577	£408,153	100%	Yes	Inflation
30	Hospital Social Care Discharge Services	Home first/ discharge to assess	Integrated Care Planning and Navigation	Assessment teams/joint assessment			0		Social Care		LA		Local Authority	Minimum NHS Contribution	£1,838,140	£1,920,856	100%	Yes	Inflation
31	Homefirst Plus - ICB Contribution	Home first/ discharge to assess	High Impact Change Model for Managing Transfer of Care	Home First/Discharge to Assess - process support/core costs			0		Social Care		LA		NHS Community	Minimum NHS Contribution	£664,398	£694,296	100%	Yes	Inflation
32	Carers - ICB contribution to pool (CCG)	Preventative Services	Carers Services	Respite services		53	956	Beneficiaries	Social Care		LA		Charity / Volunt	Minimum NHS Contribution	£821,067	£858,015	100%	Yes	Figure given in output is the number of individuals who have attended a support group over the past 12 months as unit number is beneficiaries instead of number of
33	Public Health Prevention - Warm & Safe	Preventative Services	Housing Related Schemes				0		Social Care		LA		Local Authority	Minimum NHS Contribution	£40,000	£0	0%	Yes	Scheme no longer in BCF
34	Trusted Assessors	Home first/ discharge to assess	High Impact Change Model for Managing Transfer of Care	Trusted Assessment			0		Social Care		LA		Charity / Volunt	Minimum NHS Contribution	£188,463	£196,944	100%	Yes	Inflation
35	BCF Support Team	Programme Office, internal staff	Workforce recruitment and retention				0	WTE's gained	Other	Staff costs to support BCF programme	LA		Local Authority	Minimum NHS Contribution	£150,739	£157,522	100%	Yes	Inflation
36	Resource Specialist	Integrated Brokeridge	Other				0		Other	Staff costs to support integrated	LA		Local Authority	Minimum NHS Contribution	£325,820	£340,482	100%	Yes	Inflation
37	Urgent Care at Home Domiciliary Care	Rapid Response Service	Urgent Community Response				0		Community Health		LA		Private Sector	Minimum NHS Contribution	£992,786	£1,006,189	100%	Yes	Inflation
38	Home from Hospital - ageing well	Home first/ discharge to assess	Enablers for Integration	Voluntary Sector Business Development			0		Social Care		LA		Charity / Volunt	Minimum NHS Contribution	£423,689	£442,755	100%	Yes	Inflation
39	Intensive Support Service	Intensive Support Service (MH) IES	Community Based Schemes	Multidisciplinary teams that are supporting independence, such as			0		Community Health		LA		NHS Community	Minimum NHS Contribution	£309,701	£0	0%	Yes	Scheme no longer in BCF, now anaged through S75 arrangement
40	Bed Review Co-ordinator	Home first/ discharge to assess	Enablers for Integration	Other	Community Assest Mapping		0		Social Care		LA		Local Authority	Additional NHS Contribution	£10,861	£0	100%	Yes	See below new scheme 40 as now Min ICB
41	Step Up/Down Beds - IR Beds	Home first/ discharge to assess	Bed based intermediate Care Services (Reablement,	Bed-based intermediate care with rehabilitation (to support discharge)		1300	391	Number of placements	Social Care		LA		Private Sector	Minimum NHS Contribution	£3,517,284	£3,723,748	100%	Yes	Increase in outputs related to the embedding of Pathway 2 contract with stakeholders across the system as well as contract providers. The service length of stay
42	Block Beds D2A additional bed capacity - Non Recurrent	Buffer beds	Bed based intermediate Care Services (Reablement,	Bed-based intermediate care with reablement (to support discharge)		550	246	Number of placements	Social Care		LA		Private Sector	Additional LA Contribution	£0	£0	0%	Yes	Decrease in output can be attributed to the changes made to the Pathway 2 discharge pathway. D2A bed cohort was reduced as part of the changes made to the
43	Council reablement	Home first/ reablement	Home-based intermediate care services	Reablement at home (to support discharge)		575	266	Packages	Community Health		LA		Local Authority	Minimum NHS Contribution	£414,510	£433,163	100%	Yes	This covers staff roles and cannot be attributed to the purchasing of care packages.
44	TF Dom Care - in house - a - Discharge Fund - ICB	Dom Care - Rapid response	Home-based intermediate care services	Reablement at home (accepting step up and step down users)		218	380	Packages	Social Care		LA		Local Authority	ICB Discharge Funding	£793,663	£829,378	100%	Yes	Increase in outputs due to funding for scheme 44 and 45 being pooled together for Wiltshire Support at Home service. Outputs have been brought together to show
45	TF Dom Care - in house - a	Dom Care - Rapid response	Home Care or Domiciliary Care	Domiciliary care to support hospital discharge (Discharge to Assess pathway 1)		1510	2128	Hours of care (Unless short-term in which	Social Care		LA		Local Authority	Minimum NHS Contribution	£259,236	£270,901	100%	Yes	Increase in outputs due to funding for scheme 44 and 45 being pooled together for Wiltshire Support at Home service. Outputs have been brought together to show
46	Dom Care - Rapid response a Discharge Fund ICB	Dom Care - Rapid response (WS@H)	Home Care or Domiciliary Care	Domiciliary care to support hospital discharge (Discharge to Assess pathway 1)		180	199	Hours of care (Unless short-term in which	Social Care		LA		Local Authority	ICB Discharge Funding	£1,052,899	£1,100,279	100%	Yes	Increase in outputs due to funding for scheme 44 and 45 being pooled together for Wiltshire Support at Home service. Outputs have been brought together to show
47	EOL & Non CHC complex/ spot- non recurrent	EOL & Non CHC complex/ spot - non recurrent	Home Care or Domiciliary Care	Domiciliary care to support hospital discharge (Discharge to Assess pathway 1)		212	291	Hours of care (Unless short-term in which	Social Care		LA		Private Sector	Additional LA Contribution	£0	£0	0%	No	

48	Wiltshire Council Discharge Fund	Discharge Fund	High Impact Change Model for Managing Transfer of Care	Early Discharge Planning			0		Social Care		LA		Local Authority	Local Authority Discharge Funding	£1,435,926	£2,393,210	100%	Yes	New Year allocation
49	Brokerage Support - Non recurrent	Programme Office, internal staff	Workforce recruitment and retention					WTE's gained	Other	Staff costs to support BCF programme	LA		Local Authority	Additional LA Contribution	£0	£0	0%	No	
50	Increase staff in Wiltshire Flow Hub - non recurrent	Systems to manage patient flow	High Impact Change Model for Managing Transfer of Care	Home First/Discharge to Assess - process support/core costs					Community Health		Joint	### #	NHS Community	Additional LA Contribution	£0	£0	0%	No	
51	Additional staff capacity to Support flow - non recurrent	Systems to manage patient flow	Workforce recruitment and retention					WTE's gained	Other	Additional staffing capacity	LA		Local Authority	Additional LA Contribution	£0	£0	0%	No	
52	Home First Plus - WHC	Home first/ discharge to assess	Home-based intermediate care services	Reablement at home (to support discharge)		575	825	Packages	Community Health		LA		NHS Community	IBCF	£915,300	£938,640	100%	Yes	Scheme 19 and scheme 52 are pooled together to fund Homefirst activity. Decision has been taken to bring both scheme outputs together to show one consistent figure.
53	Providing stability and extra capacity in the local care system -	IBCF Protecting Adult Social Care	Workforce recruitment and retention				0	WTE's gained	Social Care		LA		Private Sector	IBCF	£2,803,174	£2,803,170	100%	Yes	Do you wish to update' filter selected as yes due to issue with excel. Funding allocated was not pulling through on k34. Better Care Manager is aware and suggested fix.
54	Investigating Officers	IBCF Protecting Adult Social Care	Integrated Care Planning and Navigation	Support for implementation of anticipatory care			0		Social Care		LA		Local Authority	IBCF	£133,781	£139,800	100%	Yes	Do you wish to update' filter selected as yes due to issue with excel. Funding allocated was not pulling through on k34. Better Care Manager is aware and suggested fix.
55	Providing stability and extra capacity in the local care system -	IBCF Preventative	Other				0		Social Care		LA		Private Sector	IBCF	£927,180	£927,200	100%	Yes	Do you wish to update' filter selected as yes due to issue with excel. Funding allocated was not pulling through on k34. Better Care Manager is aware and suggested fix.
56	Prevention & wellbeing Team	IBCF Preventative	Prevention / Early Intervention	Social Prescribing			0		Social Care		LA		Local Authority	IBCF	£462,375	£652,900	100%	Yes	Do you wish to update' filter selected as yes due to issue with excel. Funding allocated was not pulling through on k34. Better Care Manager is aware and suggested fix.
57	New: Providing stability and extra capacity in the local care system -	IBCF Protecting Adult Social Care	Home Care or Domiciliary Care	Domiciliary care packages		227	275	Hours of care (Unless short-term in which	Social Care		LA		Private Sector	IBCF	£1,014,741	£1,014,700	100%	Yes	Funding is pooled together for scheme 28 and 57 so outputs have also been pooled together to show consistent figure. Outputs are higher due to changes
58	Providing stability and extra capacity I the local care system -	IBCF Protecting Adult Social Care	Residential Placements	Nursing home		185	247	Number of beds	Social Care		LA		Private Sector	IBCF	£972,927	£972,900	100%	Yes	Inflation
59	Providing stability and extra capacity in the local care system -	IBCF Protecting Adult Social Care	Residential Placements	Nursing home		185	190	Number of beds	Social Care		LA		Private Sector	IBCF	£1,342,348	£1,342,300	100%	Yes	Inflation
60	Commissioning Transformation	IBCF Preventative	Enablers for Integration	Joint commissioning infrastructure					Social Care		LA		Local Authority	IBCF	£0	£0	0%	No	
61	Pilot for Transitional Safeguarding	IBCF Preventative	Care Act Implementation Related Duties	Safeguarding			0		Social Care		LA		Local Authority	IBCF	£0	£11,000	100%	Yes	Carry Forward from 23/24
62	CHC Training	IBCF Preventative	Enablers for Integration	Workforce development			0		Continuing Care		LA		Local Authority	IBCF	£0	£38,000	100%	Yes	Carry Forward from 23/24
63	Transformational Staff Charges - IBCF	Other	Enablers for Integration	Workforce development			0		Social Care		LA		Local Authority	IBCF	£0	£151,800	100%	Yes	Inflation
64	Quality Assurance & Inspection Prep	IBCF Preventative	Other				0		Other	Quality Assurance & Inspection Prep	LA		Local Authority	IBCF	£0	£34,200	100%	Yes	Carry Forward from 23/24
65	Contribution to System Management Role	IBCF Preventative	Other				0		Other	Contribution to System Management	LA		Local Authority	IBCF	£0	£100,000	100%	Yes	Inflation
66	Additional Adult Care LA Provision	Protecting Adult Social Care	Enablers for Integration	Integrated models of provision			0		Social Care		LA		Private Sector	IBCF	£1,670,175	£1,319,972	100%	Yes	Inflation
67	2024/25 expected uplifts	2024/25 expected uplifts	Other				0		Social Care		Joint	### #	Local Authority	Minimum NHS Contribution	£2,160,690	£234,315	100%	Yes	Reflected in schemes, balance is expected requests for additional uplifts

Adding New Schemes:

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Scheme ID	Scheme Name	Brief Description of Scheme	Scheme Type	Sub Types	Please specify if 'Scheme Type' is 'Other'	Outputs for 2024-25	Units (auto-populate)	Area of Spend	Please specify if 'Area of Spend' is 'other'	Commissioner	% NHS (if A)	% Local Authority	Source of Funding	Expenditure for 2024-25 (£)	% of Overall Spend	
68	Intermediate Care Beds GP Cover	GP cover for PW2 beds	Bed based intermediate Care Services (Reablement, Services)	Bed-based intermediate care with rehabilitation (to support discharge)	GP support to cover temp residents	0	Number of placements	Primary Care		NHS		NHS	Minimum NHS Contribution	£95,627	100%	linked to scheme 5 above
14	Home first WHC	Home first/Reablement	High Impact Change Model for Managing Transfer of Care	Home First/Discharge to Assess - process support/core costs				Community Health		NHS		NHS Community	Minimum NHS Contribution	£846,380	100%	replaces scheme 14 above
16	Overnight Nursing WHC	Overnight Nursing WHC	Personalised Care at Home	Physical health/wellbeing				Community Health		NHS		NHS Community	Minimum NHS Contribution	£732,862	100%	replaces scheme 16 above
69	Homefirst Plus- Local Authority Contribution	Home first/Reablement	Home-based intermediate care services	Reablement at home (accepting step up and step down users)		825	Packages	Social Care		LA		Local Authority	Minimum NHS Contribution	£279,824	100%	linked to scheme 19 above
70	Brokerage Support	Programme Office, internal staff	Workforce recruitment and retention	improve retention of existing workforce		0	WTE's gained	Other	Staff costs to support BCF programme	LA		Local Authority	ICB Discharge Funding	£190,000	100%	Prev scheme 49
71	WC In Reach (Discharge Hubs)	Staffing support to coordinate hospital discharges	Integrated Care Planning and Navigation	Care navigation and planning				Primary Care		LA		Local Authority	ICB Discharge Funding	£339,000	100%	
72	Urgent Community Response (Flow staffing supports rapid)	Rapid response service	Urgent Community Response					Community Health		LA		Local Authority	ICB Discharge Funding	£320,000	100%	
73	WC Reablement Staffing	HomeFirst/Reablement	Home-based intermediate care services	Rehabilitation at home (to prevent admission to hospital or residential care)		825	Packages	Community Health		LA		Local Authority	ICB Discharge Funding	£228,000	100%	Output link to scheme 69
74	Urgent Community Response (Carer Breakdown)	Rapid response service	Urgent Community Response					Community Health		LA		Local Authority	Minimum NHS Contribution	£400,000	100%	
75	Wiltshire P1 (Home First Winter)	Homefirst/Reablement additional capacity	Home-based intermediate care services	Reablement at home (to support discharge)		825	Packages	Primary Care		LA		Local Authority	Additional NHS Contribution	£1,640,000	100%	Output link to scheme 69
76	P1 Complex (Winter)	Homefirst/Reablement additional capacity	Home-based intermediate care services	Reablement at home (to support discharge)		825	Packages	Primary Care		LA		Local Authority	Additional NHS Contribution	£300,000	100%	Output link to scheme 69
77	WH&C In Reach	Avoidable admission support	Integrated Care Planning and Navigation	Care navigation and planning				Community Health		NHS		NHS Community	Minimum NHS Contribution	£310,000	100%	
40	Bed Review Co-ordinator	Home first/ discharge to assess	Enablers for Integration	Workforce development				Social Care		LA		Local Authority	Minimum NHS Contribution	£11,349	100%	Was addnt now min ICB

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Better Care Fund 2024-25 Update Template

7. Narrative updates

Selected Health and Wellbeing Board:

Wiltshire

Please set out answers to the questions below. No other narrative plans are required for 2024-25 BCF updates. Answers should be brief (no more than 250 words) and should address the questions and Key lines of enquiry clearly.

2024-25 capacity and demand plan

Please describe how you've taken analysis of 2023-24 capacity and demand actuals into account in setting your current assumptions.

The Bath and North East Somerset, Swindon and Wiltshire Intergrated Care Board has made significant investment in demand and capacity modelling and there is clear evidence of it influencing Wiltshire decisions.

The demand and capacity planning work is presented to the Health and Wellbeing Board so members are familiar with the work and its application to decisions. One example is the review of the HomeFirst service and the subsequent increase in funding to support the required capacity. The demand and capacity work enabled us to model the impact of proposed capacity increases alongside suggested changes to Pathway 2 care, to see if it would meet hospital discharge needs.

Have there been any changes to commissioned intermediate care to address any gaps and issues identified in your C&D plan? What mitigations are in place to address any gaps in capacity?

Yes, the HomeFirst (PW1) service has received additional funding to increase capacity to support the modelled demand increase in hospital discharge. The HomeFirst service was reviewed in 2023-24 and underwent a programme of transformation (ongoing into 2024-25) to support the increased capacity longer term. We are currently awaiting a funding decision from Intergrated Care Board in regard to continued support for the pathway.

The next stage in the transforming Integrated Care will be the programme of improvements to PW2. Some beds will be decommissioned and others will be re-purposed to ensure the right people get the support they need to maintain independence. There will be a focus across service in PW2 to reduce Length of Stay to ensure the capacity needed is available.

What impacts do you anticipate as a result of these changes for:

i. Preventing admissions to hospital or long term residential care?

The Demand and Capacity template demonstrates the increased capacity in PW1 and PW2 transformation will increase capacity in PW2. This is to ensure services can meet the demand for hospital discharge in a manner that supports long-term independence. PW1 and 2 services focus on rehabilitation and reablement and aim to provide the right support to ensure independent living as well as long term health. The PW0 service (Home from Hospital) supports PW1 and 2 by providing emotional and practical support that enables people to engage with their communities and frees up rehabilitation and reablement professionals to support demand in the other pathways.

Our Rapid Response, Urgent Care at Home and Telecare Response services provide 24/7 cover to support people in a crisis and help to prevent admission to hospital. The Intensive Enablement service also prevents admissions by supporting people in a mental health crisis.

ii. Improving hospital discharges (preventing delays and ensuring people get the most appropriate support)?

As above

Please explain how assumptions for intermediate care demand and required capacity have been developed between local authority, trusts and ICB and reflected in BCF and NHS capacity and demand plans.

A Bath and North East Somerset, Swindon and Wiltshire wide Demand and Capacity Group was established and a Wiltshire sub-group was formed which included representatives from all three acute trusts, community services, local authority partners and the ICB. Operational and BI colleagues participated. A modelling tool was developed and verified which was used across the system to calculate demand and capacity as well as model the impact of various potential scenarios. Assumptions and data inputs were jointly agreed through this group and were based on historical data available and calculated assumptions factored for the impact of known planned developments or interventions. The outputs from this modelling have been used to inform operational and financial decision making, the BCF capacity and demand template and the NHS England return.

Have expected demand for admissions avoidance and discharge support in NHS UEC demand, capacity and flow plans, and expected demand for long term social care (domiciliary and residential) in Market Sustainability and Improvement Plans, been taken into account in you BCF plan?

Yes

Please explain how shared data across NHS UEC Demand capacity and flow has been used to understand demand and capacity for different types of intermediate care.

The model described in the previous answer included calculating demand and capacity for services provided across discharge pathways 1, 2 and 3 (services at home, in a care home and in community hospital settings). To reach a point of clarity on whether capacity was sufficient to meet demand it was necessary to include population growth information and the impact of acute trust improvement programmes, virtual wards, Urgent Community Response, step-up services, overnight nursing, hospice care, Early Supported Discharge Teams and others. The demand and capacity modelling outputs have been used to inform and shape capacity for those services.

Linked KLOEs (For information)

Checklist

Complete:

Does the HWB show that analysis of demand and capacity secured during 2023-24 has been considered when calculating their capacity and demand assumptions?

Yes

Does the plan describe any changes to commissioned intermediate care to address gaps and issues?

Does the plan take account of the area's capacity and demand work to identify likely variation in levels of demand over the course of the year and build the capacity needed for additional services?

Yes

Has the plan (including narratives, expenditure plan and intermediate care capacity and demand template set out actions to ensure that services are available to support people to remain safe and well at home by avoiding admission to hospital or long-term residential care and to be discharged from hospital to an appropriate service?

Yes

Has the plan (including narratives, expenditure plan and intermediate care capacity and demand template set out actions to ensure that services are available to support people to remain safe and well at home by avoiding admission to hospital or long-term residential care and to be discharged from hospital to an appropriate service?

Yes

Does the plan set out how demand and capacity assumptions have been agreed between local authority, trusts and ICB and reflected these changes in UEC activity templates and BCF capacity and demand plans?

Yes

Yes

Has the area described how shared data has been used to understand demand and capacity for different ty

Yes

Approach to using Additional Discharge Funding to improve

Briefly describe how you are using Additional Discharge Funding to reduce discharge delays and improve outcomes for people.

Funding was used for the following:

- To bolster community equipment supply to meet increased demand in pathways 1 and 2.
- To provide additional capacity in bedded settings (PW3) for complex discharges.
- To fund packages of domiciliary care to support professional capacity in the pathway 1 discharge services

Please describe any changes to your Additional discharge fund plans, as a result from

- o Local learning from 23-24
- o the national evaluation of the 2022-23 Additional Discharge Funding (Rapid evaluation of the 2022 to 2023 discharge funds - GOV.UK (www.gov.uk))

The plan for 2024/25 takes into account the learning from the impact of previous years for Additional Discharge Funding. The spend on domiciliary care was well supported with ongoing work to ensure market capacity (Local framework arrangement). With healthy capacity in the private market we are able to broker packages of care in a timely manner to support Pathways 1 and 2.

Ensuring that BCF funding achieves impact

What is the approach locally to ensuring that BCF plans across all funding sources are used to maximise impact and value for money, with reference to BCF objectives and metrics?

BCF metrics are monitored monthly in accordance to the governance structure demonstrated in the narrative plan. Wider links to services outside the BCF are made in related governance groups, for example the Ageing Well and Urgent Care Board is ICB led but will debate the services that are impacting on BCF metrics such as the Avoidable Admissions metric. Public Health colleagues are also consulted on this, where appropriate.

Wiltshire works in partnership with BaNES and Swindon BCF colleagues to review performance across the system and also reviews performance against similar authorities regionally and nationally.

Does this plan contribute to addressing local performance issues and gaps identified in the areas capacity and demar

is the plan for spending the additional discharge grant in line with grant conditions?

Yes

Does the plan take into account learning from the impact of previous years of ADF funding and the national evaluation of 2022/23 funding?"

Yes

Does the BCF plan (covering all mandatory funding streams) provide reassurance that funding is being used in a way that supports the objectives of the Fund and contributes to making progress against the fund's metric?

Yes

Better Care Fund 2024-25 Update Template

7. Metrics for 2024-25

Selected Health and Wellbeing Board:

Wiltshire

8.1 Avoidable admissions

*Q4 Actual not available at time of publication

		2023-24 Q1 Actual	2023-24 Q2 Actual	2023-24 Q3 Plan	2023-24 Q4 Plan	Rationale for how the ambition for 2024-25 was set. Include how learning and performance to date in 2023-24 has been taken into account, impact of demographic and other demand drivers. Please also describe how the ambition represents a stretching target for the area.	Please describe your plan for achieving the ambition you have set, and how BCF funded services support this.
Indirectly standardised rate (ISR) of admissions per 100,000 population (See Guidance)	Indicator value	156.6	145.0	157.4	140.3	Planned indicator value has been calculated by increasing the 2023/24 population data by 0.3% as per the predicted population increase per year as sent out in the JSNA. The avoidable admission number was calculated by using the admissions for 2023/24 as set out in the SUS data. Average taken for Q4 as not all data available at national level	Following analysis of the top 5 conditions most frequently admitted (within the metric definition), work is planned in 24-25 to bring together professionals at acute sites, public health and primary care to determine actions to reduce admissions. Virtual Ward capacity is increasing and planned to be at planned capacity in 24-25 which will impact positively on avoidable admissions.
	Number of Admissions	977	905	-	-		
	Population	513,411	513,411	-	-		
	Indicator value	2024-25 Q1 Plan	2024-25 Q2 Plan	2024-25 Q3 Plan	2024-25 Q4 Plan		
		155.4	144.6	178.7	159.5		

>> [link to NHS Digital webpage \(for more detailed guidance\)](#)

8.2 Falls

		2023-24 Plan	2023-24 estimated	2024-25 Plan	Rationale for how the ambition for 2024-25 was set. Include how learning and performance to date in 2023-24 has been taken into account, impact of demographic and other demand drivers. Please also describe how the ambition represents a stretching target for the area.	Please describe your plan for achieving the ambition you have set, and how BCF funded services support this.
Emergency hospital admissions due to falls in people aged 65 and over directly age standardised rate per 100,000.	Indicator value	2,227.0	2,227.0	1,883.0	Currently Q4 data not complete so average has been taken from previous quarters (536 per quarter) This is a projected 2,144 admissions due to falls in 24/25. 24/25 plan has been calculated by taking average from last three years. Conservative target set given issues described in adjacent cell. Population has been increased by 0.3 as per the JSNA.	While Wiltshire does not have a Falls programme per se (and we recognise our need to prioritise this in 24-25) there is work being done in areas of the county, such as neighbourhood collaboratives and falls prevention exercise classes that will help to reduce injurious falls. We recognise the need to consider falls prevention strategically, alongside other services such as the fracture liaison service in acute trusts. BCF funds some falls related things such as Raizer chairs for the Reablement and Telecare Response services. The Telecare
	Count	2,227	2144	2000		
	Population	121,497	121,861	122,226		

[Public Health Outcomes Framework - Data - OHID \(phe.org.uk\)](#)

8.3 Discharge to usual place of residence

*Q4 Actual not available at time of publication

		2023-24 Q1 Actual	2023-24 Q2 Actual	2023-24 Q3 Actual	2023-24 Q4 Plan	Rationale for how the ambition for 2024-25 was set. Include how learning and performance to date in 2023-24 has been taken into account, impact of demographic and other demand drivers. Please also describe how the ambition represents a stretching target for the area.	Please describe your plan for achieving the ambition you have set, and how BCF funded services support this.
Percentage of people, resident in the HWB, who are discharged from acute hospital to their normal place of residence (SUS data - available on the Better Care Exchange)	Quarter (%)	90.5%	91.8%	92.1%	92.1%	National average is 92.7%. Average for Wiltshire (Q1 to Q3) was 91.5%. Aspiration to meet the national average, therefore aim is 91.8% with aspirations to improve year on year. Denominator - population used is as per JSNA which has an average increase of 0.3% per year to the population. Plan for 24-25 is to maintain 23-24 performance levels as it is felt this is likely to be challenging.	Increase in funding and resulting increase in capacity in PW1 will provide resources to support more people to return home. Transformation work planned for PW2 in 24-25 will focus on reducing LOS to maximise throughput in therapy based bedded settings after hospital discharge. This will further support as many people as possible to return to their usual place of residence.
	Numerator	8,971	9,449	9,340	9,363		
	Denominator	9,917	10,298	10,136	10,164		
	2024-25 Q1 Plan						
	2024-25 Q2 Plan						
	2024-25 Q3 Plan						
Quarter (%)	92.1%	92.1%	92.1%	92.1%			
Numerator	9,160	9,512	9,362	9,388			
Denominator	9,946	10,328	10,166	10,194			

8.4 Residential Admissions

		2022-23 Actual	2023-24 Plan	2023-24 estimated	2024-25 Plan	Rationale for how the ambition for 2024-25 was set. Include how learning and performance to date in 2023-24 has been taken into account, impact of demographic and other demand drivers. Please also describe how the ambition represents a stretching target for the area.	Please describe your plan for achieving the ambition you have set, and how BCF funded services support this.
Long-term support needs of older people (age 65 and over) met by admission to residential and nursing care homes, per 100,000 population	Annual Rate	531.7	374.7	607.5	370.0	Up to the end of February 2024 that have been 710 admissions into residential and nursing settings. However, 503 of these are new admissions into the care setting. In 24-25 Wiltshire' CLD collection will focus on new admissions to residential and care homes settings. This is a lower figure than the SALT data collection so while it looks like a significant reduction it	Increase in funding and resulting increase in capacity in PW1 will provide resources to support more people to return home. Transformation work planned for PW2 in 24-25 will focus on reducing LOS to maximise throughput in therapy based bedded settings after hospital discharge. This will reduce reliance on bedded settings as a long-term support option.
	Numerator	598	438	710	442		
	Denominator	112,461	116,879	116,879	119,469		

Long-term support needs of older people (age 65 and over) met by admission to residential and nursing care homes, per 100,000 population (aged 65+) population projections are based on a calendar year using the 2018 based Sub-National Population Projections for Local Authorities in England:

<https://www.ons.gov.uk/releases/subnationalpopulationprojectionsforengland2018based>

Please note, actuals for Cumberland and Westmorland and Furness are using the Cumbria combined figure for the Residential Admissions metrics since a split was not available; Please use comments box to advise.