

Report Title	Better Care Fund – Performance Reporting
Meeting	Health & Wellbeing Board
Date	Thursday, 25 July 2019
Lead Directors	Carlton Brand – Wiltshire Council Linda Prosser – Wiltshire CCG
Author	James Corrigan, Better Care Programme Manager
Proposal	This is a regular report on BCF performance; it is recommended that the report is reviewed and noted.

1. Purpose

- 1.1. This document sets out the Better Care Fund (BCF) performance reporting indicators for June 2019. It is split into three components:
 - Table 1: Overall performance trends.
 - Table 3: National BCF Indicators.
 - Table 4: Local BCF Indicators.
- 1.2. There is an additional table (Table 2) that sets out the schemes and their relationship to the performance measures, although this may not be included in the subsequent reports, as it would be repetitive.
- 1.3. This is the first month of this style of reporting and the format will be refined following feedback during this month's round of meetings.

2. **Overall Performance Trends**

- 2.1 The following high-level trends can be drawn from this month's data:
 - Acute trusts confirm the monthly increase of 3.9% is generally appropriate activity against overall increase of 11.5%. Demand for community and social care is also higher.
 - Activity growth is highest at RUH 11.2% with SFT at 3% while GWH reduced by 3.1%.
 - Quarterly and annual trends are showing Length of Stay falling with a level below ten days achieved for the first time in 12 months. Effective use of step-down facilities has contributed to this trend.
 - In May, there were 38 new permanent admissions to care homes (age 65+), which is above the monthly average in 2018-19 which was around 31. A simple forecast for the year end from here is around 400 permanent placements which is higher than 2018-19 (358).
 - Performance in reablement remains below projections but is still below the BCF target. Issues include the fact that not all people discharged to a reablement pathway are suitable and c.80% of people refusing to share data so not all council activity is captured.

- The number of delayed days increased by 3.3% (49 days) in April to 1,539 and remains 28.2% (339 days) above the trajectory target of 1,200. NHS attributable delays increased by 15.3%, ASC attributable delays decreased by 2.0% and are again over trajectory, waiting for Packages of Care reduced as a percentage while placements remain around a third. Weekly reporting data suggests May was also challenging but early signs in June are more positive.
- GWH, SFT and AWP have seen good reductions in delayed days compared to last year, while RUH has seen a small increase in the number of delayed days.
- Length of stay for step down rehab in IC beds decreased in April to 48.1 days from 51.5 days in March.
- The number of discharges from step up beds increased in April and the length of stay also increased to around 27 days from around 13 days in March.

3. Further reporting of this data

- 3.1 In accordance with the drive to make performance reporting for BCF schemes more meaningful, this reporting format is circulated to the following meetings in this cycle and feedback will be incorporated in the reporting for future cycles:
 - Wiltshire Commissioning Group.
 - Wiltshire Delivery Group.
 - Joint Commissioning Board.
 - CCG Finance and Performance Committee.
 - Members of the Wiltshire Integration Board (for information).
 - Wiltshire Health and Wellbeing Board.

Table	1: BCF	Performance	Trends
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Ref	Title	Commentary	Action		
Bette	r Performance				
2	NEL avoidable admission LoS.	Falling against annual and quarterly trends with effective step-down beds.	Detailed analysis of further opportunities as part of Intermediate Care Review.		
7	Discharges from IC step-up beds.	Relatively small volumes so there may be distortion in data.	Will be assessed as part of the Intermediate Care Review.		
10	Urgent Care at Home	Activity changed following the transfer from the HTLAH contract to the new Dom Care Framework. Volumes also increasing.	Continuing issues with packages of care but early success of the reablement service reducing the number of packages needed.		
Stead	ly Performance				
3	Permanent Admissions to Care Homes	Projections remain within targets but overall numbers are increasing.	IC Review will address alternatives to keep people living as independently as possible.		
8	Community Hospital Beds - Admissions	Performance is steady but can be improved.	Will be assessed as part of the Intermediate Care Review.		
11	Rehab Support Workers	Reported activity is Homefirst Plus performance, which should be monitored to ensure accuracy.	Homefirst Plus activity to be kept under review to ensure accuracy in reporting a different service under this heading.		
Perfo	rmance Should Be li	mproved			
1	Specific Acute NEL Admissions	Performance is improving but still vulnerable to escalation and system pressures.	Rapid Response project will address some areas and IC Review will address current effectiveness of scheme.		
4	Reablement 91- days post- discharge	Issues with performance reporting not giving accurate figures.	IC Review will address reporting issues and improve data.		
5	Delayed Transfers of Care	Performance still short of targets although improvements post- Winter.	IC Review will look at the effectiveness of BCF-funding schemes to support DToC.		
6	Discharges to IC Step Down beds.	Performance deteriorating but causes are not clear.	IC Review will look at the effectiveness of BCF-funding schemes to support DToC.		
9	Community Hospital Step Up - Admissions	Performance trend is downwards and on the threshold of turning from amber to red. Low volumes can distort performance.	Rapid Response project will address some areas and IC Review will address current effectiveness of scheme.		

ID	Scheme description	£k	Impact	Scheme impact on system				
				NEL	LOS (Acute)	LOS (Cmty)	Reab' ment	
High	Impact Change: Earl	y Discha	rge Planning					
1	Therapy support to Intermediate Care Beds via WHC	860	Contributes to WHC Block contract		x	х	x	
High	Impact Change: Sys	tems to N	Ianage Patient Flow					
2	Access to Care inc SPA	984	Medvivo provided service	х				
3	PT Flow Hub	160	Wiltshire Health & Care		x			
High	Impact Change: Mul	ti-discipli	inary / multi-agency dis	scharge t	eams			
4	Acute Trust Liaison Service	377	Contract with Medvivo		x			
6	Strengthening QA	350	Contribution to commissioning staffing		x			
High	Impact Change: Hon	ne first/di	ischarge to assess					
7	Step Up/Down Beds	2,988	70 ICT beds block contract (includes spot and 1:1)	х	x			
8	IC and Hospital Social Work Teams	1,627	Cost of ICT Social Work Team and SFT Discharge Team.		x	x		
9	Home First Plus	1,500	LA commissioned reablement service		x	x	x	
10	Step Up Beds (Wiltshire Health & Care)	900	WHC Block contract		x			
11	SHARP - Social Care Help & Rehabilitation Project	60	Service coordinated by Ramsbury GP Practice.	X				

Table 2: Impact of 2019/20 Better Care Schemes on National Performance Frameworks

ID	Scheme description	£k	Impact	Scheme impact on system				
	description			NEL	LOS (Acute)	LOS (Cmty)	Reab' ment	
12	GP Cover & ANP Cover for GP Pilot	406	Block arrangement with GPs to support the 70 ICT beds plus ANP for GP Cover		x			
13	Community Services	3,914	WHC Block contract		x	x		
14	Rehabilitation Support Workers	1,280	WHC Block contract		x		X	
15	Medical Room	6	Local arrangement with GP Practice				X	
16	Urgent Care at Home Domiciliary Care	863	Contract with Medvivo, enhanced Dom Care	x	x			
18	Integrated Cmty Equipment - Local Authority	1,841			x	x		
19	Integrated Cmty Equipment - CCG	3,633			x	x		
20	RUH Homefirst - Pathway 1	54			x			
20a	Basset House Beds	26	6 Beds for April block - £995 per bed		x			
High	Impact Change: Sev	en-Day s	ervices					
21	End of life care - 72-hour pathway	205	Dorothy House and Salisbury Hospice: the latter now ended due to recruitment difficulties.		x			
High	Impact Change: Foc	us on ch	oice					
22	Self-funder Support - CHS	300	Discharge progs and coordination for self- funders		x			
23	Info & Advice Portal content management	60	Funding Healthwatch patient information website		x			

ID	Scheme description	£k	Impact	Scheme impact on system				
	description			NEL	LOS (Acute)	LOS (Cmty)	Reab' ment	
High	Impact Change: Enh	ancing h	ealth in care homes					
24	Mental Health Liaison	219	AWP Block Contract	х				
25	Community geriatrics	117	WHC Block contract	x				
29	BCF Programme Direction, finance, performance and admin, etc.	552	Contribution to BCF Programme Direction.	x	x	х	x	
High	Impact Change: Prot	tecting A	dult Social Care					
30	Care Act	2,500			X		х	
31	Maintaining services	8,433			x			
32	Complex care packages	400				х		
High	Impact Change: Prev	ventative	Services					
26	Public Health Prevention - Training, etc.	100		х				
33	Carers - Pooled Budget	1,497		х				
34	Carers - Voyage respite	30	Respite contract paid direct by CCG.	X				
35	Telecare Response and Support	1,015	Contract with Medvivo	x			x	
Disab	oled Facilities Grant							
36	DFG	3,273		Х				
Conti	ngency							
37	Unallocated	351						
	Total BCF	40,882						

Table	Table 3: National Indicators									
Ref	Indicator	RAG vs Target	Monthly performance		Quarterly trend			Commentary	Principal BCF schemes addressing this indicator	
1	Specific Acute NEL Admissions	Apr '19 Actual: 4,269 Red RAG threshold: 4,250	↓ 3.9%	Ļ	4.3%	Î	3.9%	Acute trusts confirm the monthly increase is generally appropriate activity against overall increase of 11.5%. Demand for community and social care is also higher. Activity growth highest at RUH (11.2%) with SFT at 3%. GWH reduced by 3.1%.	 Step-up beds. Rapid response review. Access to Care (SPoA). Urgent Care at Home Reablement & Rehabilitation (iBCF) 	
2	Specific Acute NEL Admissions (LoS) – LoS = two days or more.	Apr '19 Actual: 9.9 Next RAG threshold: 10	↓ 4.8%	Ļ	5.4%	Ţ	8.0%	Quarterly and annual trends are showing LoS falling with a level below ten days achieved for the first time in 12 months. Effective use of step-down facilities has contributed to this trend.	 Patient Flow Hub Acute Trust Liaison Service Trusted Assessment Step-down beds. 	
3	Permanent Admissions to Care Homes	Year End Forecast (M2): 396 next RAG threshold: 500	↑ 35.7%	% ↑	40.7%	Ţ	58.3%	In May, there were 38 new permanent admissions to care homes (age 65+), which is above the monthly average in 2018-19 which was around 31. A simple forecast for the year end from here is around 400 permanent placements which is higher than 2018-19 (358).	 Acute Trust Liaison Service Trusted Assessment Protecting Social Care Rehab Support Workers Reablement & Rehabilitation (iBCF) 	
4	At Home 91 days post discharge with reablement	Q3 Discharges 66.7 Red RAG threshold: 80.0%	Not available, a this is a quarter performance indicator.		2.1%	Ţ	0.5%	 Performance remains below projections but is still below the BCF target. Issues include: Not all people discharged to a reablement pathway are suitable. c.80% of people refusing to share data so not all council activity is captured. 	 Rehab Support Workers Step-down beds Reablement & Rehabilitation (iBCF) 	
5	Delayed transfers of Care	Apr '19 Actual: 1,539 Red RAG threshold: 1,350	↑ 3.3	Ţ	18.1	Ţ	0.1%	The number of delayed days increased by 3.3% (49 days) in April to 1,539 and remains 28.2% (339 days) above the trajectory target of 1,200. NHS attributable delays increased 15.3%, ASC attributable delays decreased 2.0% and are again over trajectory. Waiting for Packages of Care redcued as a percentage while Placements remain around a third. GWH, SFT and AWP have seen good reductions in delayed days compared to last year, while RUH has seen a small increase in the number of delayed days.	 Patient Flow Hub Acute Trust Liaison Service Trusted Assessment Step-down beds. Rehab Support Workers Reablement & Rehabilitation (iBCF) 	

 so that people can live as independently as possible for as long as possible. Recruitment issues in the south continue. There are clearly several issues around performance reporting in reablement, which will be addressed within the Intermediate Care Review that is about to start. More robust data gathering will provide a clearer picture of the genuine issues to be addressed. The number of delayed days has risen in the last 3 months and May looks like it will see further increases. The trend remains similar to last year and return to a reducing trajectory may be achievable in June. The Intermediate Care Review has a specific focus on the effectiveness of many of the BCF schemes that relate to supporting timely and effective discharges both from acute care and 		_
tioncovers schemes affecting avoidable admissions: project scoping under way. IC review addressing step-up bed availability: looking to re-procure from Q3, 2019/20 to go live in Q1, 2020/21ceThe BCF supports several schemes to reduce Los and the WIB priority to implement county-wide processes trusted assessment for care homes IC placements will support the reduction in LoS further.ceThe trusted assessment process in the south will support better admissions to care homes but avoiding admissions is supported by good rehab and reablement so that people can live as independently as possible for as long as possible. Recruitment issues in the south continue.ationThere are clearly several issues around performance reporting in reablement, which will be addressed within the Intermediate Care Review that is about to start. More robust data gathering will provide a clearer picture of the genuine issues to be addressed.ceThe number of delayed days has risen in the last 3 months and May looks like it will see further increases. The trend remains similar to last year and return to a reducing trajectory may be achievable in June.tionThe Intermediate Care Review has a specific focus on the effectiveness of many of the BCF schemes that relate to supporting timely and effective discharges both from acute care and		Action
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community nospital beds.	_ •	specific focus on the effectiveness of many of the BCF schemes that relate to supporting timely and effective

Table	Table 4: Local Indicators										
Ref	Indicator	RAG vs Target	Monthly performance		Quarterly trend		Annual trend		Commentary	Principal BCF schemes addressing this indicator	
6	IC Bed (Discharges) - Step Down (Care Homes)	Apr '19 Actual: 35 Red RAG threshold: <45	ţ	10.3%	Ţ	10.3%	Ļ	27.1%	Discharges are below 2018/19 levels. Length of stay for step down rehab in IC beds decreased in April to 48.1 days from 51.5 days in March.	 Patient Flow Hub Acute Trust Liaison Servi Trusted Assessment Step-down beds. Rehab Support Workers Urgent Care at Home 	
7	IC Bed - Step Up (Care Homes - South)	Apr '19 Actual: 7 Red RAG threshold: <7	Ť	133.3%	Ţ	12.5%	Î	40.0%	The number of discharges from step up beds increased in April and the length of stay also increased to around 27 days from around 13 days in March.	 Step-up beds. Rapid response review. Access to Care (SPoA). Urgent Care at Home Reablement & Rehabilitation (iBCF) 	
8	Community Hospital Beds - Admissions	Apr '19 Actual: 75 next RAG threshold: Red = 59	Ţ	8.5%	↔	0.0%	Ţ	8.5%	Part-funding of the WCH contract through BCF, as this contributes to DToC targets.	 Step-down beds. Access to Care (SPoA). Rehab Support Workers 	
9	Community Hospital Step Up - Admissions	Apr '19 Actual: 12 next RAG threshold: Red = 11	Ļ	29.4%	Ţ	14.3%	Ţ	20.0%	Part-funding of the WCH contract through BCF, as this contributes to NEL admission avoidance targets.	 Step-up beds. Rapid response review. Access to Care (SPoA). Urgent Care at Home Reablement & Rehabilitation (iBCF) 	
10	Urgent Care at Home	Apr '19 Actual: 59 Red RAG threshold: <60	Ţ	7.3%	Ţ	7.3%	Î	3.5%	Activity has changed following the transfer from the previous Help to Live at Home contract to the new Dom Care Framework contract, which has changed the underlying data. The substantial drop in new cases reflects difficulties in agreeing packages but also early success of the new reablement service reducing the number needing packages of care. The number of people supported is also increasing.	 Rapid response review. Access to Care (SPoA). Urgent Care at Home Reablement & Rehabilitation (iBCF) 	
11	Rehab Support Workers	Apr '19 Actual: 141 next RAG threshold: Amber = 81	Ļ	10.2%	Ţ	22.1%	Î	80.8%	This activity is the Homefirst Plus performance, which is why there is a significant increase against the equivalent month in 2018//19.	 Reablement & Rehabilitation (iBCF) Rehab Support Workers. (Homefirst Plus). 	

	Action
vice	The Intermediate Care Review has a specific focus on the effectiveness of many of the BCF schemes that relate to supporting timely and effective discharges both from acute care and community hospital beds.
	The Intermediate Care Review has a specific focus on the effectiveness of many of the BCF schemes that relate to supporting rapid response in crisis and step-up intermediate care.
S	The Intermediate Care Review will review the effectiveness of BCF schemes that relate to supporting timely and effective discharges from community hospital beds.
	The Intermediate Care Review has a specific focus on the effectiveness of many of the BCF schemes that relate to supporting rapid response in crisis and step-up intermediate care.
	There are continuing issues around securing packages of care, particularly in the south of the County. The intermediate care review will touch on this scheme but it will not comprise a principle focus.
5.	The scheme will continue to be reviewed as it moves into business as usual.