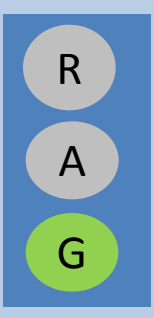


# Health and Care Integration Programme September/October 2017

## Programme Highlight Report



## Programme Status – September/October 2017

Overall Status		Status	Change	Summary of Programme Progress against plan
	Plan	A	↔	<ul style="list-style-type: none"> <li>Overall programme status AMBER – key programme delivery risks 1) risk of non-achievement of national condition to reduce number of delayed transfers of care by 3.5% by Nov 2017 and potential financial consequences. 2) Integrated Points of Access business case.</li> <li>BCF budget £42.6m and iBCF £9.5m for 2017/18. Cost improvement plan of £1.3m, expected to be delivered through in-year review of services and other underspends. Currently identified £223k savings. Further savings expected to be reported at next Integration Finance and Performance Group meeting (20<sup>th</sup> Nov). Budget status remains amber in light of low savings identified to date.</li> </ul>
	Benefits	G	↔	
	Budget	A	↔	

### Key achievements and successes this period

- 2017/19 BCF plan was submitted to NHSE on 8<sup>th</sup> Sept. Following correspondence with NHSE, the DTOC metric was adjusted to show that the 3.5% target will be achieved by Nov 2017. Received informal confirmation that the BCF Plan has been approved.
- Integrated Points of Access (IPOA) – Gateway Review report was presented to partners and key stakeholders at Programme Board on 29<sup>th</sup> Sept. The key recommendation highlighted the need to refresh the original Business Case produced by 4OC and provide an increased level of detail for the case for change to include various options (benefits, risks, costs, timescales for delivery) on how this can be achieved. Options appraisal event was held at 11<sup>th</sup> Oct Programme Board where stakeholders and partners considered the inclusion of Partners within the option appraisal combinations provided via a scoring matrix.
- The LLR Falls Steering Group has now been disbanded, following approval to move to proof of concept implementation. It has been replaced by the LLR Falls Commissioning Group and the LLR Falls Delivery Group. Discussions are underway to enable the Falls prevention schemes to commence by the end of November 2017. New leaflets, incorporating strengthening exercises to do at home, posters and GP information for patients available at <http://ow.ly/UrFf30gdMka>
- The LLR carers draft strategy has been developed with partners as an LLR strategy but is still subject to formal sign-off by all partners prior to consultation. Further discussions are ongoing with Leicester City Council regarding the structure and content of the draft strategy. The respective positions and views of all the commissioning partner organisations will be outlined clearly within the public consultation.
- Unified Prevention – three main projects have been identified under the “keep well” outcome for the next twelve months, these are joined up communications, ensuring every contact counts in promoting health and wellbeing/preventing crisis, and healthy workplaces. The UPB LGA grant and LGA prevention at scale programmes are getting underway.
- HTLAH – the final 3 Lots went live on 6<sup>th</sup> November.
- New Lightbulb county wide service commenced 2<sup>nd</sup> Oct. The interim accommodation project for people leaving the Bradgate Mental Health Unit goes live 6<sup>th</sup> November. Transformation work taking place in October with the In Reach Team at the Bradgate Unit as part of an LPT project to improve processes and eliminate waste in the system.

## Programme Level Milestone Progress

Key Milestone	Baseline target date	Status	Comments and mitigation	Revised target date
BCF Plan 2017-19 Submission	Sept 2017	<b>G</b>	BCF Plan submitted to NHSE on 8 <sup>th</sup> Sept. Adjustment to DTOC target made (see key risk slide). Received informal confirmation that the BCF Plan has been approved. Awaiting formal letter.	
BCF Section 75 Agreement	Sept 2017	<b>G</b>	Draft s75 agreement reviewed and edited. To be submitted to CCG Boards and Health and Wellbeing Board in November. National deadline November 2017.	Nov 2017
Produce Unified Prevention Strategy	Nov 2017	<b>G</b>	The Unified Prevention Board's (UPB's) current priorities are developing the model per the 4 agreed prevention outcomes, assimilating learning from Braunstone Blues and mapping approaches to workplace health across all organisation. The next stage of the work will be developing the wrap around prevention offer for Integrated Locality Teams.	
Help to Live at Home - reprocurement of 3 lots	July 2017	<b>G</b>	The 3 remaining contracts were awarded on 22 <sup>nd</sup> August. There will be a 3 month transition period through to 6 <sup>th</sup> November.	August 2017
Market Appraisal for Assistive Technology (AT)	March 2018	<b>G</b>	Initial review of AT market appraisal approach reviewed at 7 <sup>th</sup> Sept IE. Engagement with Districts during Oct. Intention to tender for market appraisal during November.	
Approach to joint nursing & residential homes provision	May 2017	<b>G</b>	IE approved at its 3 <sup>rd</sup> Oct meeting the proposed changes in the scope of the work for commissioning of care homes (agreed post meeting by WLCCG). More detailed proposals are now in progress and will follow governance processes of each organisations.	Oct 2017
LLR Integrated Points of Access Phase One	Revised to August 2017	<b>A</b>	Refresh of the Business case to be completed by 31 <sup>st</sup> Oct to include mapping of cashable/non-cashable benefits aligning with the options appraisal. Governance planner in place for Nov/Dec with a view to final decision at December Programme Board.	
Outcomes Framework for Prevention & Social Prescribing interventions (LGA grant) - (supports UPB)	Mar 2018	<b>G</b>	Project scope approved in October 2017, data reporting plan being developed should the LLR DARS approval be delayed. The measurements and outcomes will be developed as part of a partnership between LCC, MLCSU and EMAHSN. Reports via UPB.	

Key activity, milestones over next three months	Oct	Nov	Dec
<b>BCF Programme Management</b>			
Sign-off BCF section 75 agreement			
Quarterly review of BCF financial position for 2017/18 (Integration Finance & Performance Group)			
Full review of integration risk register and programme plan			
Review of BCF equalities impact (EHRIA) plan with Integration Operational Group			
IBCF Quarterly Report to DCLG			
BCF Quarterly Report to NHSE			
<b>BCF Schemes</b>			
Leicestershire Unified Prevention Strategy – develop the “Keep Safe” implementation plan			
Prevention at Scale (LGA) – initiation meeting with national consultant (Oct). Agree 2 demonstrator sites (Nov).			
First Contact Plus Service Review evaluation – report findings			
New Falls Programme – awareness raising with key professionals			
Falls – postural stability programme to commence			
DTOC – undertake a self-assessment against the CQC methodology for Local Area Reviews			
HTLAH service review – review of health activity data and report to November IFPG			
HTLAH – new lots commence			
Dementia Service Procurement – launch of new service			
Lightbulb – full roll-out of the service across Leicestershire			
<b>BCF Enablers</b>			
LLR Points of Access – business case completed			
– final sign-off of the business case following partner engagement			
DARS application to restore Local Authority access to SUS data – renew dataflow (if application approved)			

## BCF Outcome Metrics

Metric	Target	Forecast	Data RAG	Trend	DOT
1. Permanent admissions of older people (aged 65 and over) to residential & nursing care homes, per 100,000 population, per year	630.6	602.9	G		↔
2. Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services	87.0%	89.2%	G		↔
3. Delayed transfers of care from hospital per 100,000 population	278.57	294.95	R		↔
4. Total non-elective admissions into hospital (general & acute), per 100,000 population, per month	737.92	807.59	R		↔

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## Performance Summary

**Metric 1** – the BCF target for 2017/18 is a maximum of 879 admissions to residential and nursing care. The current full year forecast is 840 admissions (or 602.9 per 100,000 population). Performance is statistically similar to the target. (The RAGed data shows the September forecast for 2017/18 based on CPLIs).

**Metric 2** – the latest position (hospital discharges between April and June 2017) is 89.2% of people discharged from hospital into reablement / rehabilitation services were still at home after 91 days. This is above the 2017/18 target and better than the previous year.

**Metric 3 – (adjusted to NHSE target)** in August there were 1,611 days delayed for Leicestershire residents, a rate of 294.95 per 100,000 population aged 18+ against a target of 278.57. This is RAGed as red and statistically significantly worse than the target, with a lower confidence interval of 280.7 and an upper confidence interval of 309.7.

**Metric 4** – for the period April to August 2017, there have been 26,913 non-elective admissions, against a target of 25,196 – a variance of 1,717. This is RAG-rated red. Furthermore, the forecast for the end of the 2017/18 financial year is that there could be 65,701 admissions, against a target of 60,582. This is below the lower confidence interval of 752.90, and is therefore, RAG-rated red. There are no additional funded priorities targeted to admissions avoidance within the BCF plan beyond those commissioned recurrently within the new urgent care model.

# Better Care Fund Spending Plan

## Budget Overview

2017/18 Budget  
BCF

**£42.6m**

iBCF

**£9.5m**

2017/18 Forecast Outturn

**£42.6m**

**£9.5m**

2017/18 Forecast under/overspend

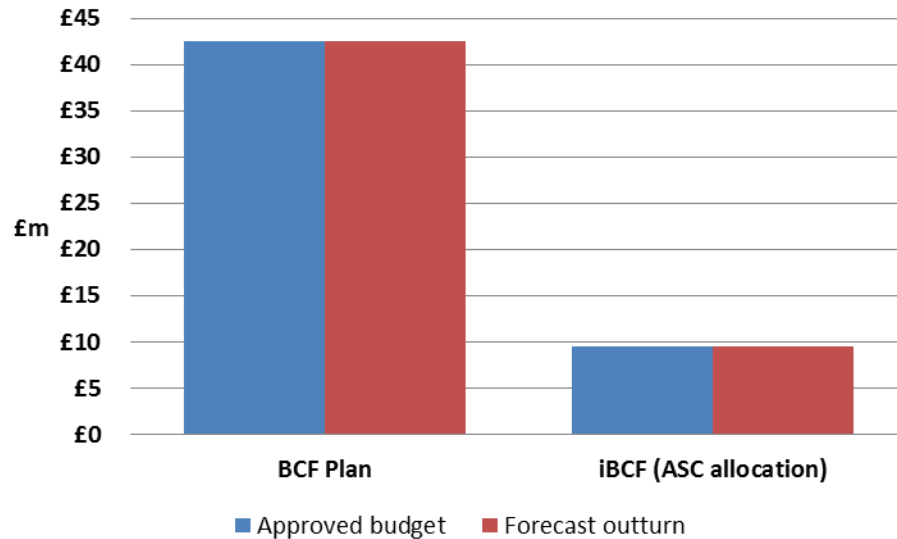
**£0m**

**£0m**

Protection of Services

**£7.7m** NHS

**£22m** Social Care Maintenance



Cost Improvement Plan Progress




**£1.3m**

**£223k**

## Financial Summary

- Current progress shows that £223k has been achieved towards the £1.3m cost improvement plan target through in-year savings/underspends.
- HTLAH health reablement (£1.81m) – on going discussions are taking place between LCC and CCG Finance Leads to propose a revised (reduced) allocation against this BCF investment line, ahead of the IFPG meeting in November, where a decision will be taken . This adjustment of this figure has a material impact on the achievement of the CIP.
- £1m has been set aside as a contingency against not achieving the CIP.
- £3.3m DFG passported to District Councils per BCF national conditions.
- Leicestershire County Council is implementing £9.5m of improved Better Care Fund (additional ASC grant allocation) in line with grant conditions, of which £5m is targeted to improving DTOC.

# Programme Key Risks

Risk Ref	Risk	Update on key mitigating actions	Current Risk Score
BCF1	If Health and Care partners fail to deliver the integration programme then it could lead to the non-achievement of a number of national conditions and performance thresholds which could result in elements of the BCF being withheld.	Multi-agency governance process in place at strategic and operational level. S75 agreement approved and appropriate governance in place. Quarterly national submission to NHSE re progress against the metrics & national conditions is in place. Monitor performance of programme monthly. Detailed programme plan – reviewed monthly (See Risk BCF12)	<p><b>Worsen</b></p> 
BCF2	If BCF delivery costs are greater than estimated, or reviews of schemes do not identify sufficient financial benefits, then the programme will not achieve the cost improvement plan required.	Maximise use of the IBCF in support of financial pressures. Good level of confirm and challenge into financial assumptions across partners, review of Business Cases and investment proposals on a multiagency basis. Proactive financial management across BCF schemes monthly. Re-profile spending plan where applicable within service lines to better match milestones if any significant variances occur. Agreement in section 75 to be able to off-set an overspend in one scheme against underspends in other schemes. Engagement as needed in internal/external audit processes and reviews to test controls and improve processes based on recommendations where applicable.	<p><b>No Change</b></p> 
BCF 10	If the NHS England target for DTOC reduction is not achieved by November 2017 (reported January 2018) then Leicestershire will be escalated via NHS England which may result in a financial penalty for the Local Authority and a CQC review.	Intensive work is underway across all settings of care , per the existing AEDB LLR DTOC action plan, to achieve this target. The action plan is supported by specific activities and investments funded from the Leicestershire BCF plan/IBCF allocation, as detailed in the BCF plan submission. There is a particular focus on tackling delays in non-acute settings. Work underway to complete a local assessment, using the CQC methodology, using an independent assessor to prepare for potential CQC review. Outputs expected December 2017. Regular review of DTOC progress/performance. Review the implications of any further guidance on how the funding allocation might be withheld in the case of poor performance (when known) and complete a risk assessment of the impact of the loss of IBCF/BCF funding is in progress.	<p><b>Increase</b></p> 

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