

**HEALTH AND WELLBEING BOARD: 12 JULY 2018**

**REPORT OF DIRECTOR OF HEALTH AND CARE INTEGRATION**

**BETTER CARE FUND PLAN REFRESH 2018/19**

**Purpose of report**

1. The purpose of this report is to provide the Health and Wellbeing Board with an update on the work in progress to refresh the Leicestershire Better Care Fund (BCF) plan for 2018/19.

**Recommendation**

2. The Board is requested to:
  - a) Note the content of the report;
  - b) Approve the provisional BCF outcome metrics, subject to any changes required following the publication of the BCF guidance.
  - c) Authorise the Chief Executive of Leicestershire County Council, following consultation with the Chairman of the Health and Wellbeing Board, to finalise the BCF plan refresh, in light of the national guidance, and submit to NHS England.
  - d) Note that the members of the Integration Executive (a subgroup of the Health and Wellbeing Board responsible for the day to day delivery of the BCF Plan), will be asked to indicate their agreement ahead of the final submission to NHS England.

**Policy Framework and Previous Decisions**

3. The BCF policy framework was introduced by the Government in 2014, with the first year of BCF plan delivery being 2015/16. The Cabinet in February 2014 authorised the Health and Wellbeing Board to approve the BCF Plan and plans arising from its use.
4. NHS England published the policy framework for 2017-19 on 31<sup>st</sup> March 2017 which was accompanied by the technical guidance document published on 4<sup>th</sup> July 2017.
5. The Integration Executive reviewed and approved the final BCF Plan at its meeting on 7<sup>th</sup> September 2017. The plan was submitted to the BCF National Team on 8<sup>th</sup> September, in line with the national BCF timetable.
6. The Health and Wellbeing Board, at its meeting on 16 March 2017, authorised the Chief Executive of Leicestershire County Council, following consultation with the Chairman of the Health and Wellbeing Board to make any amendments to the Better Care Fund Plan 2017/18 – 2019/20 in the light of the national guidance, prior to its submission to NHS England

7. Subsequently, East Leicestershire and Rutland and West Leicestershire Clinical Commissioning Groups Governing Bodies and Leicestershire County Council's Cabinet signed off the BCF Plan submission in September 2017.  
<http://politics.leics.gov.uk/documents/s132435/Final%20Cabinet%20Report%20TOCBFCF%20Assurance%20Oct%202017.pdf>

### **BCF Plans for 2018/19**

8. The current BCF plan covers both 2017/18 and 2018/19. The BCF National Team has confirmed that technical guidance for 2018/19 will be released soon, which will cover a number of revisions to the existing two year plan.
9. The delayed transfers of care target has been revised and provisional data was received in May 2017 to support this work. Further information is provided in paragraphs 20-24 of the report.
10. The current information received on the other three BCF metrics is that there will be an opportunity to revise these targets but it will not be mandatory. The Integration Team have reviewed and refreshed these metrics in readiness as detailed in paragraphs 12-19 and 25-28 below.
11. During Q4 2017/18, the BCF expenditure plan for 2018/19 was reviewed in line with annual financial planning arrangements in all three partner organisations. The Integration Executive agreed to not make any changes to the existing plan as it entered year two of the BCF plan. Work will continue to monitor and review progress against actual spend throughout the year, through the existing governance arrangements.
12. Following the publication of the BCF guidance, if there are any further changes required to the plan, this will be completed and an update provided at the next meeting.

### **BCF Outcome Metrics for 2018/19**

13. BCF Plans are assessed against four BCF outcome metrics. The tables below detail the BCF outcome metrics, progress against target for 2017/18 and the provisional target (subject to the BCF guidance) for 2018/19.

#### **Metric 1 – Residential Admissions**

	<b>2017/18 Target</b>	<b>2017/18 Actual</b>	<b>RAG At Q4</b>	<b>Provisional 2018/19 Target</b>
Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000 population, per year	630.6	659.7 (920)	<b>R</b>	<b>624.1 (890)</b>

15. The BCF target for the number of permanent admissions of older people into residential and nursing care homes was not achieved during 2017/18. There were

920 admissions against a target of 879. This was a 6% increase on the previous year.

16. During 2018/19, the target is to not exceed 890 admissions (or 624.1 per 100,000 population).
17. The council is looking to increase the provision of extra care and supported living places to reduce reliance on residential care and to offer more choice and independence.
18. **Metric 2 – Reablement**

	<b>2017/18 Target</b>	<b>2017/18 Actual</b>	<b>RAG At Q4</b>	<b>Provisional 2018/19 Target</b>
Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/ rehabilitation services	87.0%	86.1%	<b>A</b>	<b>87.0%</b>

19. The target for the proportion of older people who were still at home 91 days after discharge was statistically similar to the target but fell just short of the target. During the past 12 months, performance has varied from 84% (Feb-Apr 2017 discharges) to 92% (Jul-Sept discharges).
20. The target remains at 87% for 2018/19.
21. **Metric 3 – Delayed Transfers of Care**

	<b>Category</b>	<b>2017/18 Target</b>	<b>2017/18 Actual</b>	<b>RAG At Q4</b>	<b>Provisional 2018/19 Target</b>
Delayed transfers of care from hospital per 100,000 population	NHS	*5.04 (10,066)	6.83 (13,637)	<b>R</b>	<b>5.50 (10,906)</b>
	ASC	*1.38 (2,756)	1.13 (2,261)	<b>G</b>	<b>1.25 (2,487)</b>
	Joint	*1.53 (3,056)	1.08 (2,154)	<b>G</b>	<b>1.13 (2,242)</b>
	<b>Total</b>	<b>*7.96 (15,878)</b>	<b>9.04 (18,052)</b>	<b>R</b>	<b>7.88 (15,635)</b>

22. A target has been set to achieve no more than 7.88 delayed transfers of care in September 2018. This equates to no more than 15,635 delayed transfers of care during 2018/19.

23. The target will continue to be divided across NHS attributable delays, social care attributable delays and jointly attributable delays per the proportions and thresholds set by NHS England.
24. A profile of the monthly target for 2018/19 is provided in Appendix A. Figures for April have been set as actuals, as this data is already available.
25. Performance at September 2018 is set at achieving 7.88, but there is variability before and after this date to account for seasonal trends in performance.
26. Performance data for April 2018 was a rate of 6.04.
27. Metric 4 – Non-Elective Admissions

	<b>2017/18 Target</b>	<b>2017/18 Actual</b>	<b>RAG At Q4</b>	<b>Provisional 2018/19 Target</b>
Total non-elective admissions into hospital (general and acute), per 100,000 population, per month	737.92 (60,582)	895.88 (67,018)	<b>R</b>	<b>780.36 (64,761)</b>

28. For the period April 2017 to March 2018 there was 67,018 non-elective admissions, against a target of 60,582 – a variance of 6,436. A proportion of the over-performance was due to a significant coding and counting change in the Children's Assessment Unit.
29. The plan for 2018/19 is to not exceed 64,761 non-elective admissions (780.36 per 100,000 population). This target is set by the Clinical Commissioning Groups in their Operational Plans and the BCF plan is required to replicate that figure.
30. Based on the data received in April 2018, there have been 353 admissions above target in the first month of the new financial year, so it is anticipated this target will remain challenging to achieve in 2018/19.

### **Circulation under the Local Issues Alert Procedure**

None

### **Officer to Contact**

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### **Relevant Impact Assessments**

Equality and Human Rights Implications

31. The BCF aims to improve outcomes and wellbeing for the people of Leicestershire, with effective protection of social care and integrated activity to reduce emergency and urgent health demand.
32. An equalities and human rights impact assessment has been undertaken which is provided at <http://www.leicestershire.gov.uk/sites/default/files/field/pdf/2017/1/11/better-care-fund-overview-ehria.pdf>. This finds that the BCF will have a neutral impact on equalities and human rights.
33. A review of the assessment was undertaken in March 2017.

#### Partnership Working and associated issues

34. The delivery of the BCF plan and the governance of the associated pooled budget is managed in partnership through the collaboration of commissioners and providers in Leicestershire.
35. Day to day oversight of delivery is via the Integration Executive through the scheme of delegation agreed via the Integration Executive's terms of reference which have been approved by the Health and Wellbeing Board.
36. The delivery of the Leicestershire BCF ensures that a number of key integrated services are in place and contributing to the system wide changes being implemented through the five year plan to transform health and care in Leicestershire, known as the Sustainability and Transformation Partnerships <http://www.bettercareleicester.nhs.uk/>

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