ITEM **9(d)**

HEALTH AND WELLBEING BOARD

10 SEPTEMBER 2015

Milton Keynes Clinical Commissioning Group

Better Care Fund Performance Report Aug 2015

Together for the health of MK

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1 Better Care Fund

The Better Care Fund (BCF) was announced by the Government in the June 2013 spending round, to ensure a transformation in integrated health and social care. The BCF is one of the most ambitious ever programmes across the NHS and Local Government. It creates a local single pooled budget to incentivise the NHS and local government to work more closely together around people, placing their well-being as the focus of health and care services.

The BCF is a critical part of the NHS 2 year operational plans and the 5 year strategic plans as well as local government planning.

The BCF introduced 6 metrics against which improvement would be measured.

1.1 Non-elective admissions (general & acute)

Definition: CCG operational plan figures are based on the CCG registered population and the mapping used directly maps between this population and the associated Health and Wellbeing Board (HWB) resident population. Because the CCG registered population will not fall within clear geographical boundaries then this means that in some cases the HWB resident activity is mapped from a large number of CCG plans.

The performance-related funding will be made on the basis of performance over the final quarter of 2014/15 and the first three quarters of 2015/16, against the trajectory as set out in the plans. HWBs are therefore required to set an annual target (from Q4 2014/15 until end of Q3 2015/16), with quarterly milestones, in the finance and activity plan template.

	2013/14				2014/15					2015/16			
Indicator	**Q1**	**Q2**	**Q3**	**Q4**	**Q1**	**Q2**	**Q3**	**Q4**	**YTD**	**Q1**	**Q2**	**Q3**	**Q4**
Planned FFCEs				6,607	7,244	7,104	7,121	6,375	27,844	6,990	6,855	6,871	6,151
Planned rate per 100K				2,546	2,792	2,738	2,745	2,423		2,657	2,606	2,612	2,306
Bedfordshire CCG	136	134	137	135	141	139	155	150	585	155			
Milton Keynes CCG	7,026	6,957	7,088	6,385	6,442	5,890	6,109	5,988	24,430	6,503			
Nene CCG	79	81	88	88	92	90	98	93	373	95			
Actual Non-Elective FFCEs	7,242	7,172	7,313	6,607	6,675	6,119	6,362	6,231	25,387				
Variance against plan				0%	-7.9%	-13.9%	-10.7%	-2.3%	-8.8%				
Population (ONS)				259457	259457	259457	259457	263051		263051	263051	263051	266701
Quarterly rate per 100K				2547	2573	2358	2452	2369					

Comments: The plans shown for Q4 2013/14 to Q3 2014/15 are based on Bedfordshire, Milton Keynes and Nene CCGs annual planning submissions. Milton Keynes HWB is attributed 1.5% of Bedfordshire non-elective admissions, 95.4% of Milton Keynes, and 0.6% of Nene. Data for Q3 shows that the rate of non-elective admissions per 100,000 population was 2,452 compared to a plan of 2,745.

1.2 Residential admissions

Definition: Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000 population. Number of council-supported permanent admissions of older people to residential and nursing care divided by the size of the older people population in the area multiplied by 100,000 (aged 65 and over).

Indicator	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16 Q1
Planned Rate					**699.6**	**600**
Permanent admissions	255	240	230	200	193	46
Population aged 65+	27,455	27,895	29,490	30,875	30,877	32,285
Annual Rate	936.0	867.5	779.9	641.3	625.1	569.9
National Ranking	**136**	**116**	**105**	**71**		
National average	*686.6*	*694.2*	*697.2*	*650.6*		

Comments: Local data for Q1 2015/16 shows that there were 46 permanent admissions to residential homes in Milton Keynes. This equates to a rate of 569.9, which is worked out by applying the quarters data over the year.

Kindly note 2015-16 planned rate of 600 yet to be confirmed.

1.3 REABLEMENT

Definition: The proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into rehabilitation services.

Indicator	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16 Q1
Planned Rate	-	-	-	-	93.3%	93.4%
At home 3 months after discharge	65	60	215	80	57	73
Offered rehab after discharge	75	70	235	80	59	89
Discharged from hospital	4,085	4,210	4,300	4,640	4,641	4,641
Offered rehab %	1.8%	1.7%	5.5%	1.7%	1.3%	1.9%
Still at home 3 months later %	84.2%	84.1%	91.5%	97.5%	96.6%	82%
National average	**82.0%**	**82.7%**	**81.4%**	**82.5%**		

Comments: In Q1 2015-16, 82% of older people aged 65 and over discharged from hospital to their own home or to a residential or nursing care home or extra care housing for rehabilitation, with a clear intention that they will move on/back to their own home were still at home or in extra care housing or an adult placement scheme setting three months after the date of their discharge from hospital.

Quarterly data is only for internal monitoring.
Published data (denominator) is collected for the period 1st October to 31st December each year. Numerator data is collected between 1st January and 31st March of the relevant year for all cases in the denominator.

Please note: HES 2013 data is the latest data available to use. 2014 data will be published soon and that will affect 2014-15 and 2015-16 performance.

1.4 DELAYED TRANSFERS OF CARE

A delayed transfer of care from acute or non-acute (including community and mental health) care occurs when a patient is ready to depart from such care and is still occupying a bed. A patient is ready for transfer when:

- A clinical decision has been made that the patient is ready for transfer and;
- A multi-disciplinary team decision has been made that the patient is ready for transfer and;
- the patient is safe to discharge/transfer.

The table below shows the number of reported delayed days split by provider.

Comments: In 2014/15, there were 8,861 delayed days from hospital, which equates to a rate of 1,125 per 100,000 population. The Better Care Fund planned for a rate of 868 or less.

In 2015/16 Q1, there were 3,269 delayed days from hospital (DTOC's for Milton Keynes referred patients where the provider not MKUHFT) against the monthly planned rate of 1,386. Which equates to a quarterly rate of 1,660 per 100,000 population. The Better Care Fund planned for a quarterly rate of 704 in 2015/16 Q1.

	2013/14				2014/15					2015/16				
Indicator	**Q1**	**Q2**	**Q3**	**Q4**	**Q1**	**Q2**	**Q3**	**Q4**	**YTD**	**Q1**	**Q2**	**Q3**	**Q4**	**YTD**
Planned quarterly rate	**579**	**1,086**	**765**	**862**	**704**	**1,167**	**765**	**862**	**866**	**704**	**1,085**	**765**	**862**	**857**
Planned number of days delayed	1,109	2,080	1,466	1,676	1,369	2,268	1,487	1,697	6,821	1,386	2,137	1,506	1,719	6,748
Population aged 18+	191511	191511	191511	194336	194336	194336	194336	196885	196885	196885	196885	196885	199457	196885
Buckinghamshire NHS Trust							8		8					
Central North West London FT	258	268	102	109	113	274	254	221	862	382				382
Luton & Dunstable NHS Trust			19	9		11		14	25					
Milton Keynes FT	829	1,795	1,279	1,545	1,244	1,971	2,493	2,200	7,908	2,887				2,887
Oxford University NHS Trust		1	42	5		12	13	13	38					
Other providers	22	16	24	8	12		8		20					
Total number of days delayed	1,109	2,080	1,466	1,676	1,369	2,268	2,776	2,448	8,861	3,269	0	0	0	3,269
Quarterly rate	579	1,086	765	862	704	1,167	1,428	1,243	1,125	1,660	0	0	0	415

1.5 PATIENT/SERVICE USER EXPERIENCE METRIC

CCGs in partnership with Health & Well Being Boards were asked to select a local or national metric relating to improving patient experience.

The following metric, from the GP Patient Survey, was selected: Does your GP, nurse or other health professional review your written care plan with you regularly? Performance is based on the percentage of respondents answering 'yes' to this question.

Indicator	Jan13-Sep13	Jul13-Mar14	BCF Baseline	Jan14-Sep14	Jul14-Mar15	Jan15-Sep15
BCF Planned Rate	-	-	Jan13-Mar14	-	60.0%	62.5%
Yes	25	59	84	69		
No	15	21	36	18		
Don't know	10	16	26	10		
Total responses	50	96	146	97		
Yes %	50.0%	61.5%	57.5%	71.1%		
National average	61.3%	60.8%		60.5%		

Comments: The Better Care Fund baseline was based on the survey results between January 2013 and March 2014 (the latest information available at the time of submission). Recently published data for January to September 2014 shows that 71.1% of respondents said that their GP, nurse or other health professional reviews their written care plan with them regularly. This is above (better than) the planned rate required for achieving this metric and outperforms the national average.

For context, the following table compares performance across the Central Midlands Sub-Region for the period January to September 2014:

Organisation	Is your care plan reviewed with you regularly?					
	Resp's	Yes	No	Don't know	Yes %	CCG Rank
Bedfordshire CCG	155	106	40	9	68.7%	30
Corby CCG	27	14	9	4	51.6%	179
East and North Hertfordshire	197	128	45	24	65.2%	52
East Leicestershire & Rutland CC	168	88	54	27	52.2%	176
Herts Valleys CCG	242	147	66	28	60.7%	98
Leicester City CCG	185	115	46	24	62.3%	81
Lincolnshire East CCG	101	63	27	11	62.3%	83
Lincolnshire West CCG	91	54	26	11	59.4%	116
Luton CCG	131	84	33	14	63.9%	62
Milton Keynes CCG	97	69	18	10	71.4%	21
Nene CCG	266	172	54	39	64.8%	59
South Lincolnshire CCG	47	31	7	9	66.1%	44
South West Lincolnshire CCG	57	36	14	7	62.8%	80
West Leicestershire CCG	126	80	31	15	63.6%	66
Central Midlands Sub-Region	1,890	1,188	470	232	62.5%	-
Nationl Average	25,335	15,334	6,805	3,196	60.5%	-

Comments: Based on the latest survey results, Milton Keynes are ranked 21st best out of 211 CCGs.

1.6 LOCAL METRIC

Definition: The number of new people supported by both community alarm and additional sensors over the baseline of previous years new connections for both services.

Indicator	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16 Q1
Planned Rate	-	-	-	-	1.44	1.72
New telehealth users				174	277	61
Previous year				150	174	277
New telehealth users %				1.16	1.59	0.22

Comments: Data for Q1 2015/16 shows that 61 new people were supported by Telecare/telehealth. This is set against the denominator of 277 new connections seen in 2014/15 giving a rate of 0.22

Please note this is bound to increase at the end of the year and quarterly reporting is just for monitoring. However **planned target seems to be very high. The achievable target will be 1.04 considering that we aim to have 288 new telehealth users at the end of the year.**