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ADDITIONAL / TO FOLLOW AGENDA ITEMS

This is a supplement to the original agenda and includes reports that are additional to the original agenda or which were marked 'to follow'.

NOTTINGHAM CITY COUNCIL HEALTH AND WELLBEING BOARD COMMISSIONING SUB COMMITTEE

Date: Tuesday, 8 September 2015

Time: 2.00 pm

Place: Ground Floor Committee Room - Loxley House, Station Street, Nottingham,

NG2 3NG

Governance Officer: Phil Wye Direct Dial: 0115 8764637

AGENDA Pages

5 BETTER CARE FUND - PERFORMANCE REPORT

Report of the Director of Primary Care Development and Service Integration





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Better Care Fund Performance Report – August 2015

Period covered: Q1 2015/16

Better Care Fund Metrics Dashboard Q1 2015/16

		NHS Nottingham City CCG		Meets target	Within 0.1% - 5% of target	>5% from target						
		Better Care Fund Metrics Dashboard								Version at	28-Aug-15	
		Indicator	2015/16 Target	2015/16 Year to Date Target	2015/16 year to Date Actual	Year to date Performance		Month Target	Month Actual	Month Performance	What trend is best	Month on Month trend
Summary	1	Residential Admissions	221	74	84	10	Jul-15	18	28	10	Lower	~~\\
	2	Reablement - still at home 91 days after discharge	66.7%	66.7%	57.9%	-8.8%	Jul-15	66.7%	56.9%	-9.8%	Higher	$\sim\sim$
	3	Delayed Transfers of Care	9,314	2,416	2,340	-76	Jun-15	806	857	51	Lower	~~~
	4a	Non Elective Admissions to Hospital (G&A) - Payment for Performance	29,465	7,593	7,413	-180	Jun-15	2,531	2,544	13	Lower	MW
	4b	Non Elective Admissions to Hospital (G&A) - local target	28,562	7,326	7,413	87	Jun-15	2,442	2,544	102	Lower	\mathcal{M}
	5	Proportion of 65yrs + Population Supported by Assistive Technology	6,000	5,200	5,002	-198	Jul-15	100	141	41	Higher	
	6	Improvement in Citizen Health & Social Care Outcomes	83%	83%	83%	0.0%	Jul-15	83%	83%	0.0%	Higher	

Summary of Performance

Avoiding permanent residential admissions

This metric is under-performing against the year to date BCF target with 84 admissions against a planned 74. During July 28 citizens were permanently admitted into residential care, this metric under-performed against the monthly BCF target of 18 admissions.

The LA analyst team have advised that the fluctuations in admissions this quarter is likely to continue as work continues to revise reporting processes.

Actions:

• The Local Authority are working with business units to revise their reporting processes

Increased effectiveness of reablement

The measure combines data from the Local Authority and CityCare reablement services. This metric is underperforming against the year to date BCF target, with 57.9% of citizens still at home 91 days after discharge against a planned 66.7%. During July 56.9% of citizens were still at home 91 days after discharge from hospital, this is underperforming against the monthly BCF target of 66.7%.

Actions:

- A clinical utilisation review of both reablement services has been completed by an external organisation. The findings of the review will be presented to the Independence Pathway Implementation Group in September. We expect that this review will capture the complexity of needs the services are treating and enable us to determine if there are inefficiencies in the services and support future commissioning decisions.
- CityCare have been tasked with separating step up and step down activity as well reviewing the follow up process for evaluating the number of citizens at home 91 days after discharge from hospital. They have also been tasked with reviewing the follow up process to establish the location of citizens 91 days after discharge from hospital.



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Reduced delayed transfers of care (DTOC)

This metric is over-performing against the year to date BCF target with 2,340 delayed days against a planned 2,416 delayed days. During July there was 857 delayed days, this metric under-performed against the BCF monthly target of 806 delayed days. Reports at the provider level show that this increase in delayed days has been mainly at NUH.

Reduced non-elective admissions to hospital

The general trend in admissions is still downwards compared to performance in previous years. During June there were 2,544 non-elective admissions, this was 13 admissions above the 1.6% target. However, over-performance during April means that the end of Quarter 1 position is positive and the pay for performance target has been met. The performance and associated payment are detailed below.

Payment for Performance Fund- Quarter 1 2015/16

Q1 15/16 Target	7593		
Q1 15/16 Actual performance QTD	7413		
Variance against quarterly target	-180		
Cumulative number of admissions	-303		
reduced			
Payment available during Quarter	£183,949		
Payment achieved	£183,949		
Payment not available	£0		

Non – elective activity by CDG

There is continued variation in non-elective activity by CDG. The biggest increase in non-elective activity during June was in CDGs 1, 3 and 5.

Actions:

• The CDG implementation group will be monitoring and responding to changes in non-electivity. Actions will be recorded through the CDGIG work plan.

Increase in the uptake of citizens supported by Assistive Technology

This metric is under-performing against the year to date BCF target with 5,002 current AT users aged 65 and over, against a planned 5,200. During July 141 citizens were supported with AT, this metric over-performed against the BCF monthly target of 100 users.

Actions:

There are 2 Telehealth projects under development which once implemented will positively increase the
number of users: Four Care Homes will be monitoring their patients using a 'virtual ward round' model to
gather regular vital signs in the same way as Telehealth patients already do in their own homes; Secondly,
Primary Care is being encouraged to use Flo (text messaging) as a medication reminder or memory tool. We
would expect to see patient uptake increase by the end of 2015 as a result of these 2 projects.

Improvement in citizen's health and social care outcomes

The next round of surveys has been returned and are being analysed. This metric will be reported in September 2015. A target will be set by the commissioning executive group (CEG) of the Health and Wellbeing Board.

Charlotte Harris

Project Manager – Health & Social Care Integration Nottingham City CCG August 2015