

**HEALTH AND WELLBEING BOARD COMMISSIONING SUB-COMMITTEE –**  
**20 JULY 2016**

<b>Title of paper:</b>	<b>Better Care Fund – Quarter 4 Performance Report</b>	
<b>Director(s)/ Corporate Director(s):</b>	Colin Monkton - Director of Strategy and Commissioning, Nottingham City Council Maria Principe - Director of Contracting and Transformation, NHS Nottingham City CCG	<b>Wards affected:</b> All
<b>Report author(s) and contact details:</b>	Joanne Williams – Assistant Director Health and Social Care Integration, Nottingham City CCG and Nottingham City Council <a href="mailto:Joanne.Williams@nottinghamcity.nhs.uk">Joanne.Williams@nottinghamcity.nhs.uk</a>	
<b>Other colleagues who have provided input:</b>	Charlotte Harris, Project Manager – Health & Social Care Integration, Nottingham City CCG and Nottingham City Council	
<b>Date of consultation with Portfolio Holder(s) (if relevant)</b>		
<b>Relevant Council Plan Strategic Priority:</b>		
Cutting unemployment by a quarter		<input type="checkbox"/>
Cut crime and anti-social behaviour		<input type="checkbox"/>
Ensure more school leavers get a job, training or further education than any other City		<input type="checkbox"/>
Your neighbourhood as clean as the City Centre		<input type="checkbox"/>
Help keep your energy bills down		<input type="checkbox"/>
Good access to public transport		<input type="checkbox"/>
Nottingham has a good mix of housing		x
Nottingham is a good place to do business, invest and create jobs		<input type="checkbox"/>
Nottingham offers a wide range of leisure activities, parks and sporting events		<input type="checkbox"/>
Support early intervention activities		<input type="checkbox"/>
Deliver effective, value for money services to our citizens		
<b>Relevant Health and Wellbeing Strategy Priority:</b>		
Healthy Nottingham - Preventing alcohol misuse		<input type="checkbox"/>
Integrated care - Supporting older people		x
Early Intervention - Improving mental health		<input type="checkbox"/>
Changing culture and systems - Priority Families		<input type="checkbox"/>
<b>Summary of issues (including benefits to citizens/service users and contribution to improving health &amp; wellbeing and reducing inequalities):</b>		
This report provides information on performance in relation to the Better Care Fund Performance metrics for the period Quarter 4 2015/16; the indicator report is included.		
<b>Recommendation(s):</b>		
<b>1</b>	That the Sub-Committee note the performance in relation to the Better Care Fund metrics as detailed in paragraph 2.4.	
<b>2</b>	That the Sub-Committee note the quarterly return (Quarter 4) submitted to NHS England on	

27 May 2016.

**How will these recommendations champion mental health and wellbeing in line with the Health and Wellbeing Board aspiration to give equal value to mental health and physical health ('parity of esteem'):**

## **1. REASONS FOR RECOMMENDATIONS**

- 1.1 To enable the Sub-Committee to consider current performance of the Better Care Fund (BCF) pooled budget against agreed national and local metrics on behalf of the Health and Well-being Board and consider whether any changes are required to BCF schemes as a result.

## **2. BACKGROUND (INCLUDING OUTCOMES OF CONSULTATION)**

- 2.1 The end of the financial year 2015/16 marks the end of the first year of implementation of the Better Care Fund which provided £3.8 billion worth of funding nationally (£23.297m Nottingham City). This funding has been used to fund health and social care services and drive closer integration and improve outcomes for patients and service users and carers. The emphasis of our approach has been a more generic model of care across the health and social community rather than single disease specific care pathways. Through this patients should be managed in the community more effectively and efficiently, reducing emergency admissions, re-admissions and supporting the discharge pathway.
- 2.2 The Nottingham City plan for 15/16 was approved in October 2014 and implementation through the last financial year has included:
- The development of section 75 pooled budget agreement which was approved by both Nottingham City Council and Nottingham City CCG. This included the governance arrangements for monitoring and reporting on performance and finance as well as the management of risks.
  - The development of a Better Care Fund indicator report to monitor performance against the national BCF metrics.
  - Submission of quarterly monitoring returns to NHS England detailing financial monitoring information and performance data against the key national metrics.
- 2.3 NHS England required the return for Q4 to be submitted to them by 27 May 2016. Due to a mismatch between the timing of the publication of performance data and the scheduling for this meeting the return for Q4 was shared with the Chair of the Health and Wellbeing Board, Councillor Alex Norris for virtual approval in this instance. A copy of the return is attached as Appendix B for information. A summary of the return is detailed below; this includes performance against the national conditions and performance metrics.

<b>NHS England Requirement</b>	<b>Nottingham City position</b>
Budget arrangements – tracks whether section 75s are in place for pooling funds.	We confirmed that a section 75 is in place to manage the pooled budget.
National conditions – the spending round established 6 national conditions to access the fund	We are on track for all 7 national conditions as per our BCF plan.
Non elective activity (Please note that in line with NHSE	During 2015/16 there were 29,422 NEL admissions in Nottingham City. Comparing

planning guidance a payment for performance target was not aligned to performance in Q4 of 15/16, instead performance was measured over quarter four of 2014/15 to quarter 3 of 2015/16).	activity to the four quarters which made up the baseline sees a reduction in admissions of 764. This is a reduction of 2.07% against the 14/15 baseline.
Income and expenditure	Finances have been transacted as detailed in the section 75.

## 2.4 Summary of performance

Performance against each BCF metric is described below; where applicable performance against the annual target is described first, followed by a description of performance against the monthly target.

### Q4 2015/16

<b>Metric</b>	<b>Performance</b>
Avoiding permanent residential admissions	During 15/16 289 citizens were permanently admitted into residential care, the annual target was 221 admissions. During March there were 18 admissions, the monthly BCF target was 23. The rate of admissions each month has consistently varied; this is linked to the frequency of data cleanses within the City Council reporting system. Data cleanses on the current IT system will continue to be required until the new IT system "Liquid Logic" is implemented in summer 2016. External support will be commissioned to produce a situation analysis and develop a residential admissions strategy. Progress on this work will be reported to the Integrated Care Board.
Increased effectiveness of reablement	Performance against this metric has improved; 74 % of citizens were still at home 91 days after discharge, the annual target was 66.7%. Looking specifically at the month of March 72.6% of citizens were at home 91 days after discharge from hospital, the monthly BCF target was also 66.7%. Performance will continue to be monitored closely as the integrated reablement service is implemented.
Reduced delayed transfer of care (DTOC)	There were 13,466 delayed days during 15/16, the annual target was 9,314 delayed days (across all providers). During March there were 1,134 delayed days, the target for this month was 634. We are conducting a local deep dive analysis into reasons for the recent increase in DTOCs across all providers, recognising that the issues for individual providers may vary, which will include findings from recent audits led by the Urgent Care Team. This will produce a local situation analysis which will include a review of interventions against national best practice and co-produce with providers a local DTOC action plan for 2016/17 which supports the system wide action plan. Through the BCF Finance and Performance group we will monitor the impact of the action plan on DTOC performance to ensure that a reduction is achieved and through the new monitoring mechanisms tackle system issues as they arise.
Increased uptake of Assistive Technology (AY)	A total of 6,087 citizens (aged 65+) were supported by Assistive Technology, the annual target was 6,000. During March 156 citizens were supported by AT, the monthly target was 100 citizens.
Improvement in health and social care outcomes	The third wave of surveys has been issued to citizens and collation and analysis is on-going. There has been a delay in reporting the survey results; this data has been requested as soon as possible.

Reduced non-electivity activity	During 2015/16 there were 29,422 NEL admissions for Nottingham City residents. Comparing activity to the four quarters which made up the baseline sees a reduction in admissions of 764. This is a reduction of 2.07% against the 14/15 baseline. During March there were 2,526 NEL admissions, the monthly target was 2,335.
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2.5 As part of the year end feedback required for the BCF Q4 Return, we were required to comment on what we felt were our greatest successes and challenges in delivering the BCF plan for 2015/16. To inform future decision making, it is important to note the challenges we have encountered along the past year to ensure that plans have been made and implemented to turn these challenges into future successes. Please find a summary of these below:

**Successes**

1. Implementation of CDGs and Neighbourhood Teams
2. Joint working and governance arrangements
3. Increasing independence for citizens through integrated assistive technologies

**Challenges**

1. Governance and contracting
2. Evaluating the impact of BCF schemes
3. Reducing delayed transfers of care

**3. OTHER OPTIONS CONSIDERED IN MAKING RECOMMENDATIONS**

None

**4. FINANCE COMMENTS (INCLUDING IMPLICATIONS AND VALUE FOR MONEY/VAT)**

None

**5. LEGAL AND PROCUREMENT COMMENTS (INCLUDING RISK MANAGEMENT ISSUES, AND LEGAL CRIME AND DISORDER ACT AND PROCUREMENT IMPLICATIONS)**

This report does not raise any significant legal issues.

**6. EQUALITY IMPACT ASSESSMENT**

6.1 Has the equality impact been assessed?

Not needed (report does not contain proposals or financial decisions) ✓

No

Yes – Equality Impact Assessment attached Page 16

Due regard should be given to the equality implications identified in the EIA.

**7. LIST OF BACKGROUND PAPERS OTHER THAN PUBLISHED WORKS OR THOSE DISCLOSING CONFIDENTIAL OR EXEMPT INFORMATION**

None

## 8. PUBLISHED DOCUMENTS REFERRED TO IN COMPILING THIS REPORT

None.

### Appendices

A:Nottingham City Better Care Fund Indicator Report v4.7 May 2016



Enc.2 Better Care  
Fund Indicators v4.7

B:Nottingham City Better Care Fund Q4 Quarterly Return



BCF Quarterly Data  
Collection Template Q