# Dorset Health and Wellbeing Board

# **Dorset County Council**



Date of Meeting	13 <sup>th</sup> March 2019	
Subject of Report	Quarter 3 Better Care Fund Performance and Update	
Report Author Partner Organisation	Johnny Pigott, Dorset County Council	
Responsible Commissioning body	The Better Care Fund is jointly funded across the health and social care sector, underpinned by Section 75 agreements as stated in the plan.	
Delivery partner/s	Dorset CCG Dorset County Council Borough of Poole Bournemouth Borough Council	
Executive Summary	The Dorset Better Care Fund has continued to evolve throughout quarter three, particular highlights include the Dorset Care Framework being reopened in January 2019.	
	The Dorset Care Framework is a key element to achieving the BCF metrics as it offers the opportunity to gain some structure and control over a marketplace where the vast majority are self-funding, current joint spend on framework has now achieved 89% for domiciliary care.	
	The Home First Project has now been approved and various elements have been expedited to support winter pressures. A cohesive system of both increased social work capacity within Acute Hospitals, increased capacity within the domiciliary care market, and the incorporation of voluntary sector resources are in place to manage increase demand through the winter period.	
	The above initiatives have had significant impact on performance in particular regarding Delayed Transfers of Care. During December 2018 we recorded 112 adult social care delays, our lowest ever - this equates to 3.6 delays per day against a Better Care Fund target of 9 per day. Last December (2017) we recorded 345 Adult Social Care delays.	
Impact Assessment:	Equalities Impact Assessment (EqIA): N/A	

(Note: If this report contains a new strategy/policy/function has an EQIA screening form been completed?)

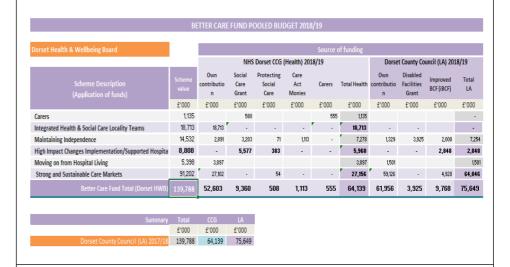
Locality Impact: N/A

# Budget:

The aligned budget for each scheme is as follows and agreed by the CCG and NHS in conjunction with NHS providers prior to Better Care Fund Plan approval:

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1)	Support for Carers	£ 1.135m
2)	Integrated Health and Social Care Pathways	£18.713k
3)	Maintaining Independence	£14.532m
4)	High Impact Changes	£ 8.808m
5)	LD Moving on from Hospital Living	£ 5.398m
6)	Strong and Sustainable Care Markets	£91.202m



### Risk Assessment:

There are a number of risks attached to the BCF. The top two risks as reported within DCC's Corporate Risk Register are:

- Capacity, capability and financial pressures on partner organisations impact negatively on the delivery of the Better Care Fund objectives
- Better Care Fund performance targets are not met placing funding at risk

Health and Wellbeing Implications:

The Health and Wellbeing Board are responsible for the performance and delivery of the Better Care Fund.

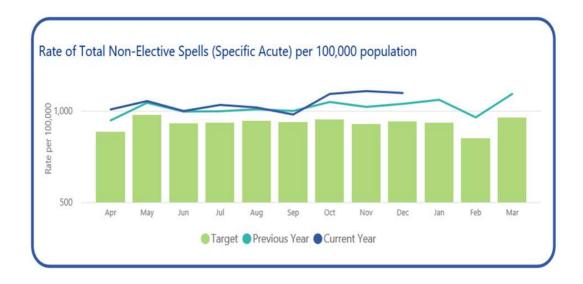
	Other Implications:	
	Performance associated with the Better Care Fund is a joint priority for health and social care and feed into the aims of the Sustainability and Transformation Plan.	
	There are overlaps with the Dorset County Council Property and Assets Programme as this links directly to accommodation capacity within the county.	
	LGR will impact on the current distribution of Disabled Facilities Grant monies and ways of working.	
Evidence Base and Strategic Alignment	Use of Evidence:  Local Business intelligence – metrics (local and approved data)  Delayed Transfers of Care performance dashboard (NHSE data)  National Guidance (published)  Input from operational colleagues, collected weekly  Key leads action/performance plans	
	Evidence base with Joint Strategic Needs Assessment:	
	The Joint Strategic Needs Assessment and other data sources support the understanding and development for the individual projects within the schemes which make up the Better Care Fund.	
	Community engagement / express needs:	
	Engagement is decided and conducted where necessary within the individual projects within the schemes of the Better Care Fund.	
	Alignment with the Joint Health and Wellbeing Strategy:	
	The vision for the Better Care Fund is aligned with the key priorities of the Joint Health and Wellbeing Strategy and Sustainability and Transformation Plan.	
Recommendation	<ul> <li>Consider the performance improvements that have been achieved, the Q3 submission report and the financial spend and advise on areas that they would wish to see further improvement.</li> <li>Discuss and advise where greater connectivity could be achieved with all partners to deliver the aspirations of the Better Care Fund</li> </ul>	
Reason for Recommendation	To discharge the Health and Well Being Board responsibilities for delivery of the Better Care Fund Plan	
Appendices	Appendix 1 Qtr.3 National BCF Submission	
Background Papers	National BCF Submission Better Care Fund Plan 2017-19 Better Care Fund Planning Template	
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# 1. Introduction

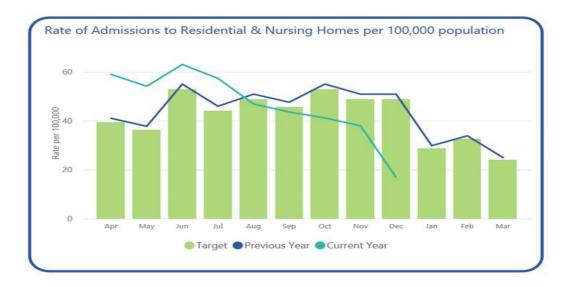
- 1.1 This report has been written to provide an update of the key Better Care Fund metrics to members of the Health and Wellbeing Board. The report focuses on the quarter three return, submitted to NHS England and the Ministry of Housing, Communities and Local Government (see appendix 1), with visual representations of the data available for this period.
- 1.2 The National Delayed Transfers of Care (DToC) targets for 2018/19 were released in May 2018, dictating that both health and social care delays will need to be significantly reduced:
  - NHS reduce by 30%;
  - Adult social care reduce to 2.6 daily delays per 100,000 18+ population (9 sole delays per day).
- 1.3 It has been understood that both health and social care will work to achieve a decline in days over the months to achieve the target by September.
- 1.4 The targets for the remaining three metrics have not been changed from the 2017/19 plans.

# 2. Performance

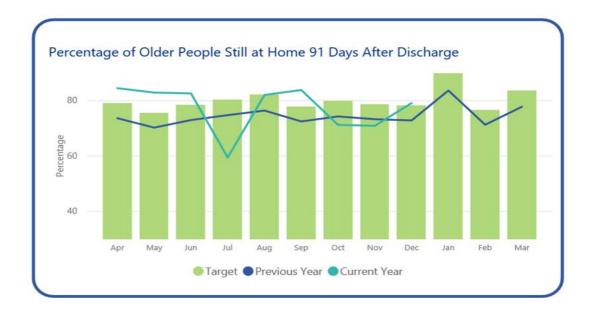
- 2.1 Metric One Non-Elective Admissions
  - Metric: Total non-elective spells (specific acute) per 100,000 population
  - Outcome sought: A reduction in the number of unplanned acute admissions to hospital



- 2.2 Non-Elective activity continues to increase, when compared to the previous year, this together with increased levels of frailty and acuity is challenging for all health and social care providers.
- 2.3 Metric 2 Admissions to Residential & Nursing Homes
  - **Metric:** Long term support of older people (aged 65 or over) met by admission to residential and nursing homes per 100,000 population.
  - Outcome sought: Reducing inappropriate admissions of older people into residential care



- 2.4 Dorset County Council is currently looking like it is not quite on track to meet target. Whilst our monthly BCF submission appears to paint a positive picture (a full-year rate projection of around 475 against a target of 513.7), we continue to experience issues with data lag. Once this is resolved, we expect the true full year picture to be slightly over target. We are implementing a number of approaches to tackle these issues which should allow for a more accurate picture each month and a better flow of data.
- 2.5 Metric 3 Proportion of Older People Still at Home 91 days after discharge from Hospital in to Reablement/Rehabilitation Service
  - Metric: Proportion of older people who were still at home 91 days after discharge from hospital into reablement or rehabilitation services.
  - Outcome sought: Increase in effectiveness of these services whilst ensuring that those offered the service does not decrease.

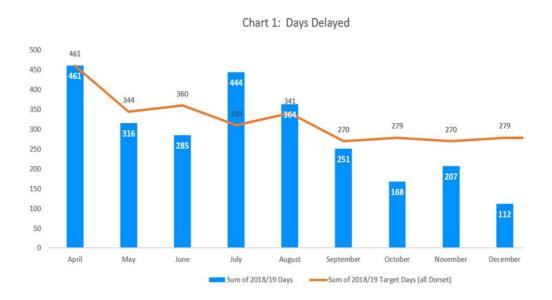


- 2.6 The Health and Wellbeing Area is currently only 1.7% points below target between April 2018 and December 2018. The year to date actuals for this indicator are currently underreported due to a delay in data entry. The figures will be refreshed throughout the year. Whilst Dorset's year to date figure is 2.9% below target (77.1% against 80%), the more recent months are affected by an element of data lag. Once this has 'caught up', we expect our performance to just about meet target.
- 2.7 Metric 4 Delayed Transfers of Care
  - Metric: Delayed Transfers of Care from hospital per 100,000 population
  - Outcome sought: Effective joint working of hospital services (acute, mental health and non-acute) and community-based care in facilitating timely and appropriate transfers from all hospitals for all adults.



2.8 Although the Health and Wellbeing area is not on track to meet the target, the number of delayed days year to date in 2018/19 is almost 3,000 fewer than the same period in 2017/18. The Dorset system continue to work jointly to reduce

- delayed days. Real time data reports identifying long stay and stranded patients within the Dorset acute Trusts are accessible across the Dorset system.
- 2.9 In addition to the above, the following graph highlights the considerable progress made within Adult Social Care, recent data depicts lower numbers of delays than have ever been recorded. A number of approaches are still being adopted to further reduce delays.



### 3. Scheme Activity

- 3.1 The Better Care Fund Highlight Report has been included as Appendix 1, to outline the current activity within the Better Care Fund schemes.
- 3.2 Homefirst and Discharge To Assess (D2A) is embedded in daily practice and the use of the winter money has enabled homefirst / D2A to have a good responsiveness. The LAs have in place services that are accessed for discharge in line with the principles of homefirst and these are now up and running and these once again are linked to the LAs' winter plans.
- 3.3 The Dorset Care Framework is a key element to achieving the BCF metrics as it offers the opportunity to gain some structure and control over a marketplace where the vast majority are self-funding, current joint spend on framework has now achieved 89% for domiciliary care.
- 3.4 The council and CCG have jointly agreed future approach for development of carers offer and delivery is now being planned for a go live date around May / June 2019.
- 3.5 Two specific initiatives being progressed this quarter relate to:

GP Practice accreditation scheme which sets out best practice in providing appropriate support for carers and the person they are caring for, enabling GP practices to develop a culture of proactively recognising and responding to carers' issues and needs.

- 3.5.1 Carers training a joint plan is being agreed for commissioning carers training to benefit people caring for people with mental health problems, and all other carers of all ages, with a variety of delivery modes including community venues such as libraries and online packages.
- 3.6 Dorset County Council's promoting independence project is working with health colleagues to redesign the pathway around aids, adaptation and assistive technologies. A series of workshop are planned through March to co-design this new pathway.

# 4. Conclusion

- 4.1 Members of the Health and Wellbeing board are asked to consider the performance that has been achieved, the Q3 submission and Better Care Fund Highlight Report and advice on where future improvement could be sought.
- 4.2 In addition, it would be beneficial for members to discuss and advise upon where greater connectivity could be achieved with partners to allow Dorset to achieve the ambitions of the Better Care Fund.

Helen Coombes; Transformation Lead for Adult Social Care, Dorset County Council Sally Sandcraft; Director for Primary and Community Care, Dorset CCG

March 2019