



Better Care Fund

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**Nottinghamshire
County Council**

1. Background information on the necessary amendments to the BCF1 target and impact on the Nottinghamshire BCF plan.
2. Amendments to the Mid Nottinghamshire plan
3. Definitional changes to national care home admission indicator and its impact.
4. Quarter 1 2014/15 performance exception report and national reporting
5. Progress on seven day services
6. The offer of support as part of the Integrated Care Pioneer programme.

Recommendation 1

- Approve the revision in line with changing national expectations to the BCF1 target, regarding non-elective admission plan, which at the time of this report is still subject to formal NHS England approval.

Pages 1-2 (51-52)



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Non-elective admissions

- NHSE / CCG confirm and challenge resulting in revised financial and operational plans
- Template from NHSE Better Care Support Team to align BCF and CCG targets (July)
- Impact on BCF target:
 - 3.7% reduction
 - 5.1% increase

What does this mean for the Nottinghamshire BCF plan



- No P4P pot (but no net loss to CCGs – P4P included in BCF)
- Amending the section 75 agreement
- Health and care community committed to monitoring progress against the original BCF target (3.7% reduction)

Recommendation 2

- To consider for ratification the proposed changes to NHS Mansfield and Ashfield CCG financial contribution to the pooled fund.



Pages 3-4 (53-54)

Mid Notts

- Confirm and challenge impacted on BCF financial plan
 - N&S managed within BCF contribution
 - M&A proposing amending BCF contribution (-£969k)
- NHS Mansfield and Ashfield CCG remains £1.9m above the minimum contribution to the BCF.

Recommendation 3

- To note the national revision to the definition BCF 2 and 6 regarding care home admissions and the impact that this has had on the targets.

Pages 4-6 (54-56)



Adult Social Care Outcome Framework (ASCOF)

- Change in definition made to ASCOF permanent care home admissions indicator:
 - Previous admission for shorter than 12 weeks as a "temporary admission" (12 week disregard).
 - Now all admissions are treated as permanent

BCF Indicators

- Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000 population (BCF2).
- Permanent admissions of older people (aged 65 and over) to residential and nursing care homes directly from a hospital setting per 100 admissions of older people (aged 65 and over) to residential and nursing care homes (BCF6).

BCF2 Target (care home admissions)



	13/14 actual applying 12 week disregard	14/15 actual applying 12 week disregard	14/15 actual for all admissions	15/16 Original BCF target	15/16 proposed revised BCF target
Numerator (admissions)	973	921	1,115	970	1,063
Denominator (over 65s population)	149,420	157,948	157,948	161,709	161,709
Rate	651.18	583.10	705.93	599.8	657.35
% change from 14/15 to 15/16	-	-	-	-7%	-7%

BCF6 Target

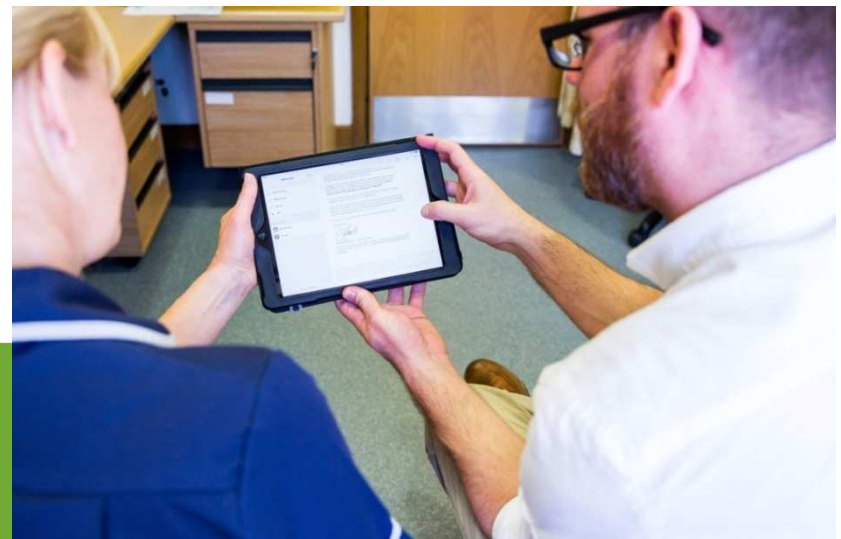
(care home admissions from hospital)

	April – March 2012/13*	2014/15 actual April – March 2013/14 activity*	2015/16 target April – March 2014/15 activity**	2016/17 target April – March 2015/16
Numerator (care home admissions from hospital)	217	133	416	361
Denominator (all care home admissions)	334	379	1,115	1063
Actual	65.0%	35.1%	37.3%	-
Target	-	38.2%	34.5%	33.96%

Recommendation 4

- To note the performance exception report for Q1 2015/16 and receive further reports in December 2015 and March 2016.

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Performance Metrics	2015/16 Target	2015/16 Q1	RAG	Issues
BCF1: Total non-elective admissions in to hospital (general & acute), all-age, per 100,000 population	2,425 (revised target 2,680) (Q1 15/16)	2,559 (Q1 15/16)	R ↔	Further iteration to confirm non-elective plans submitted 27 th July. Once revised NHSE target approved, performance is on track. On-going development of schemes during 2015/16.
BCF 2: Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000 population	599.8 (revised target 657.35)	549 (15/16 YTD under new definition)	G ↑	New target set based on including admissions previously excluded under the 12 week disregard rule.
BCF3: Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services	90.7%	93.7% (15/16 YTD)	G ↑	Whilst target is being achieved, challenge remains regarding the reduction in denominator.
BCF4: Delayed transfers of care (delayed days) from hospital per 100,000 population (average per month)	1,151.4 (Q1 15/16)	550.2 (15/16 YTD)	R ↔	Data accuracy issues continue, in particular with Sherwood Forest Hospitals NHS Foundation Trust.
BCF5: Disabled Facilities Grant: % users satisfied adaptation meet needs	75%	96.7% (Q1 15/16)	G ↓	
BCF6: Permanent admissions of older people (aged 65 and over) to residential and nursing care homes directly from a hospital setting per 100 admissions of older people (aged 65 and over)	33.96% (TBC)	36.0% (15/16 YTD)	R ↔	Reporting now based on actual data rather than sampling process. Work on transfer to assess models during 2015/16 should support reduction in admissions directly from hospital.

Finance

- Expenditure is currently on plan and reconciliation of Q1 spend is underway.
- Better Care Support Team tool confirming no Q4 2014/15 P4P as performance was above plan for all CCGs (June).

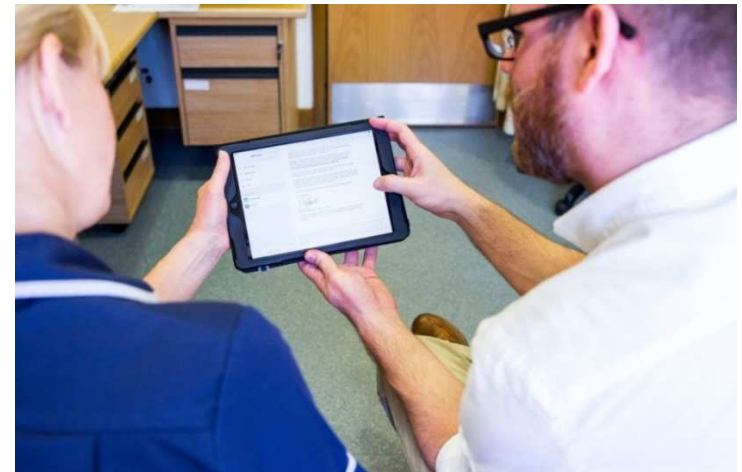
Risk

Risk id	Risk description	Residual score	Mitigating actions
BCF004	There is a risk that IT requirements to ensure the delivery of integrated care are not delivered.	12	Connected Notts work across the County. Work is ongoing within units of planning to increase information sharing at local levels.
BCF005	There is a risk that acute activity reductions do not materialise at required rate due to delays in scheme implementation, unanticipated cost pressures and impact from patients registered to other CCG's not within or part of Nottinghamshire's BCF plans, as well as impact on release of payment for performance element of the plan.	20	Monthly monitoring of non-elective activity by BCF Finance, Planning and Performance subgroup and Programme Board. Weekly oversight by System Resilience Groups. Plans for 2015/16 currently under review.
BCF009	There is a risk of insufficient recruitment of qualified and skilled staff to meet demand of community service staffing and new services; where staff are recruited there is a risk that existing service provision is destabilised.	12	Mid Notts has undertaken work with Health Education East Midlands (HEEM) on dynamic systems modelling of workforce implications for moving to seven day services. Mid Notts will share this work with the rest of the County. HWB facilitating a County wide meeting to discuss workforce issues. Planned for November.
BCF014	There is a risk that the Local Authority reduces expenditure on Adult Social Care in 2016/17 resulting in a reduction in future health and social care integration investment.	12	Ongoing leadership from BCF Programme Board. Reallocation of BCF resources where necessary/appropriate.

Recommendation 5 & 6

- To approve the NHSE Q1 2015/16 performance report.
- To consider the approach for approving Q2 and Q3 NHSE performance reporting.

Pages 6-9 (56-59) and
Appendix 1 (63-73)



BCF Q1 Performance National Report



- Submitted in August 2015 as a draft
 - Confirming s75 in place
 - Updating on progress against the BCF national conditions
 - Confirming performance metric targets and P4P
 - Income and expenditure
 - Performance against local indicators
 - Outline of our support needs from the Better Care Support Team
 - Update on progress

Further national reporting (para 25)



- Dates do not align
- BCF Programme Board to submit in draft Q2, Q3 and Q4 15/16 monitoring for approval at HWB December 15, and March 16 (Q4 TBC, June HWB?)
- Report to be resubmitted to NHSE Better Care Support Team as necessary

Recommendation 7

- To note progress with Seven Day Services.

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BCF Programme Board

- NHS Improving Quality Seven Day Services 10 Point Implementation Checklist
 - Mid Nottinghamshire locality multi-disciplinary care teams now work at the weekend to provide co-ordinated care in the patient's own home or place of residence to avoid unnecessary hospital admission.
 - Gamston Medical Centre (Rushcliffe CCG) opens at the weekend and a GP sees patients triaged via NHS 111 on behalf of all practices in the CCG. GPs from each practice participate in a rota to deliver the service.
 - Bassetlaw telehealth services is available seven days a week to support patients with long-term health conditions.

Recommendation 8

- To note the Integrated Care Pioneer offer of support.



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Support

- The initial focus is on sharing good practice with EU partners and developing an Organisational Development plan for the Pioneer care systems.