

## ASSOCIATION

## Finance - Summary

For each contributing organisation, please list any spending on BCF schemes in 2014/15 and the minimum and actual contributions to the Better Care Fund pooled budget in 2015/16. It is important that these figures match those in the plan details of planning template part 1. Please insert extra rows if necessary

Organisation	Holds the pooled budget? (Y/N)	Spending on BCF schemes in 14/15 /£	Minimum contribution (15/16) /£	Actual contribution (15/16) /£
Stockton Borough council	Y	£ -	£ 1,183,000	£ 1,383,000
NHS Hartlepool & Stockton on Tees CCG	N	£ 848,000	£ 12,882,000	£ 12,882,000
CCG #2				
Local Authority #2				
etc.				
<b>BCF Total</b>		<b>£ 848,000</b>	<b>£ 14,065,000</b>	<b>£ 14,265,000</b>

Approximately 25% of the BCF is paid for improving outcomes. If the planned improvements are not achieved, some of this funding may need to be used to alleviate the pressure on other services. Please outline your plan for maintaining services if planned improvements are not achieved.

Stockton Borough Council and NHS Hartlepool and Stockton-on-Tees Clinical Commissioning Group have agreed to operate the main schemes on a pilot basis thereby minimising risk of non-delivery and adding flexibility. Each individual scheme will need to be evaluated and reviewed throughout the year to identify if they are adding value, this is also the case of existing services with possible disinvestment if necessary. Both CCG's and Local Authorities already have set contingencies within their financial plans which may be required should schemes not achieve agreed outcomes. Both have also agreed a 5% topslice of BCF funds (excluding current social care funding, Public Health top up and Care Bill funding) of £450,000 as contingency. The contingency is to be used to tweak or enhance schemes as required, approval will be via the Health and Wellbeing Board. If, however, schemes are found to be fundamentally failing to deliver the £3m BCF outcomes outlined below reports will be presented to Health and Wellbeing Board to cease the schemes and target the funding to alternative service provision. The contingency will be available to fund interim arrangements/shortfalls in outcomes.

Contingency plan:		2015/16	Ongoing
<b>Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000 population</b>	Planned savings (if targets fully achieved)	434304	434304
	Maximum support needed for other services (if targets not achieved)	434304	434304
<b>Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services</b>	Planned savings (if targets fully achieved)	12312	12312
	Maximum support needed for other services (if targets not achieved)	12312	12312
<b>Delayed transfers of care from hospital per 100,000 population (average per month)</b>	Planned savings (if targets fully achieved)	5694.326	5694.326
	Maximum support needed for other services (if targets not achieved)	5694.326	5694.326
<b>Avoidable emergency admissions (composite measure)</b>	Planned savings (if targets fully achieved)	2549923.174	2549923.174
	Maximum support needed for other services (if targets not achieved)	2549923.174	2549923.174
<b>Patient / service user experience</b>	Planned savings (if targets fully achieved)	0	0
	Maximum support needed for other services (if targets not achieved)	0	0
<b>Estimated diagnosis rate for people with dementia (NHS Outcomes Framework indicator 2.6.i)</b>	Planned savings (if targets fully achieved)	tbc	tbc
	Maximum support needed for other services (if targets not achieved)	tbc	tbc
<b>Total</b>	<b>Planned savings (if targets fully achieved)</b>	<b>3,002,233</b>	<b>3,002,233</b>
	<b>Maximum support needed for other services (if targets not achieved)</b>	<b>3,002,233</b>	<b>3,002,233</b>

\*With the exception of avoidable emergency admissions the planned savings relate to the performance improvements in the metrics. For avoidable emergency admissions the saving arising from the performance improvement in the metric is £53k, however the CCG have identified that an expected £2.57m saving in hospital admissions will be realised through the proposed BCF schemes. Work is ongoing to identify further additional savings that are outwith those directly related to the metric targets.