### **AGENDA ITEM**

REPORT TO HEALTH AND WELLBEING BOARD

26 April 2017

REPORT OF: Pooled Budget Partnership Board

# STOCKTON BETTER CARE FUND - QUARTERLY PERFORMANCE

### **SUMMARY**

The purpose of this paper is to provide the Health and Wellbeing Board with a copy of the guarter 3 2016/17 Better Care Fund guarterly performance submission.

### **RECOMMENDATIONS**

It is recommended that Health and Wellbeing Board:

1. Note the Better Care Fund Q3 2016/17 performance submission

### **BACKGROUND**

- 1. A requirement of the Better Care Fund is to submit quarterly performance returns to NHS England.
- 2. In line with previously agreed procedure, the Chair of the Health and Well-being Board signed off the return, which was submitted subject to Board oversight at this meeting.

### **MAIN REPORT**

- 3. The Quarter 3 2016/17 submission is attached at appendix 1. The issues and points to note are set out below.
- 4. There is no Improvement in Non Elective Activity:

For all Non Elective Activity there has been an increase when comparing April to December 2015 to April to December 2016 of 1,620 spells (9.1%).

The Better Care Fund is performance managed on all Non -Electives, although the plans and initiatives are set out for the over 65's. For Stockton, there has been an increase in the Non Elective admissions for over 65's of 657 spells, which is a 9.6% increase.

The 0-19 years has increased by 3.2% (112 spells) and the 20-64 years has increased by 11.3% (851 spells).

5. There has been no improvement in Delayed Transfers of Care:

During Q3 2016/17 in Stockton-on-Tees there were 1,399 delayed days. 583 delayed days were reported as being the responsibility of the NHS, 735 days were reported as the responsibility of social care and 81 were the responsibility of both.

There has been a substantial increase in delays reported as the responsibility of social care from September 2016 onwards; delays reported due to NHS substantially increased in April and May 2016, and then again in November and December 2016.

In Q3 2016/17, the main reasons for delays were "Awaiting Residential Care Home Placement" (450 days), "Completion of assessment" (252 days), and "Awaiting Nursing Home Placement" (246 days). During the last 12 months 43% of delayed days were due to either "Awaiting Residential Care Home Placement" or "Awaiting Nursing Home Placement".

Note that the Council is still in dispute about the figures and the way in which they are counted. The Assistant Director Social Care is leading on this.

6. There has been no improvement in Reablement:

We have seen a reduction in performance which has fallen from an 2015-16 outturn of 88.9% to the current figure of 80.0%. As this figure is based on relatively small number of clients large swings can be expected however in this case there currently does appear to be a significant increase in admissions to Hospital or Care Home.

This increase is thought to be issues with the recording of reviews and retraining has taken place in January to address this. Q4 outturn is being carefully monitored to ensure an accurate year end figure.

There may be a recording issue with this data and the performance will therefore be monitored throughout the year.

### FINANCIAL AND LEGAL IMPLICATIONS

7. Financial risks have been assessed and contingency arrangements have been developed to mitigate the risk of not delivering the performance targets set out in the BCF plan.

#### RISK ASSESSMENT

8. The BCF requires partners to develop a shared risk register and have an agreed approach to managing and sharing risk. The BCF Plan also identifies proposed contingency arrangements in the event that the expected reductions in emergency admissions are not achieved.

### **COMMUNITY STRATEGY IMPLICATIONS**

9. The BCF plan supports the delivery of the Stockton-on-Tees Community Strategy and Joint Health and Wellbeing Strategy. Making a significant contribution to a number of the key themes including; healthier communities

and adults; helping people to remain independent; improved access to integrated health and social care services and promoting healthy living. The BCF plan also focuses on older adults, one of the key supporting themes in the community strategy.

## **CONSULTATION**

10. The BCF plan has been jointly developed and agreed with key stakeholders from the LA, CCG, primary care and community, acute and mental health service providers. The plan has been informed by a range of engagement activities, involving service users, carers, families and the public, that were already underway focusing on a range of local health and social care services.

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