



Shropshire Clinical Commissioning Group



SHROPSHIRE HEALTH AND WELLBEING BOARD

6TH October 2016

BETTER CARE FUND UPDATE & PERFORMANCE

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1. Introduction

The Health and Wellbeing Board is as asked to consider the content of the report:

- Better Care Fund Q1 Performance Submission

2. Recommendations

The Health & Wellbeing Board is asked to:

- Note the content of the Better Care Fund Performance Report

REPORT

3. Purpose of Report

To update the Health and Wellbeing Board on performance to the end of Q1 2016/17 via the performance submission to NHS England (NHSE) made in September 2016

4. Background

As in 2015/16, following approval of BCF Plans, NHS England require quarterly performance submissions based on a predefined performance template. Due to the timings of these submissions it was agreed by the

H&WBB that where necessary the Delivery Group would approve submissions in order to ensure deadlines could be adhered to. The deadline for submission for Q1 was set at 9 September (following a number of submission date revisions by NHSE) This submission was approved by the H&WB Delivery group.

A more detailed progress report will be presented to the next H&WBB

5. BCF Performance and scheme activity

The Q1 performance submission, attached, is summarised below:

- Reducing Non Elective (NEL) admissions to hospital has seen an improvement in Q1 and is rated green for the period.
- Performance for the Reablement metric is showing steady progress with a rate of improvement in Q1 which is in line with the end of year trajectory.
- Performance in relation to Delayed Transfers of Care has improved from a red position in April to be green for May and June
- Performance in relation to Admissions to Residential Care metrics is behind profile and is under regular review to ensure that we continue to provide the most appropriate care to meet people's needs.
- Local Metric – Admissions to Redwoods with a diagnosis of dementia. This metric measures the number of people admitted to Redwoods with a diagnosis of dementia as a proportion of the population with a diagnosis of dementia. This is an annually reported target and will report in reported in Q3.
- Patient Experience Metric – for 2016/17 this focuses on patient experience of discharge from Hospital in line with the CQC inpatient survey. This reports annually in Q1 and shows an improvement on the 2015/16 position.

All BCF High Impact Schemes for 2016/17 are either fully or partially implemented. Work is ongoing to continue to refine our monitoring processes around progress and impact of schemes on the metrics above. A full report on progress will be presented to the next H&WBB meeting.

6. Engagement

There has been extensive engagement in developing the BCF plan. Details of this are set out in the Engagement section of the BCF narrative plan

7. Risk Assessment and Opportunities Appraisal (including Equalities, Finance, Rural Issues)

A specific Risk Log is included in the BCF narrative plan. Equalities issues are embedded throughout the plan. The plan also includes a section outlining the financial commitments supporting delivery. Rural issues are referenced throughout the plan.