

## Health and Wellbeing Board

1 May 2019

### Better Together Programme Progress Update

#### Recommendation(s)

1. To note the progress of the Better Together Programme in 2018/19 to improve performance against the four national Better Care Fund (BCF) areas of focus.
2. To note progress against the High Impact Change Model.
3. To note the update on the Better Care Fund Policy Framework and Guidance for 2019/20.

#### 1.0 Better Together Programme Progress Update – 2018/19 Performance

- 1.1 Locally our plan for 2017/19 focusses our activities to improve our performance in the four key areas which are measured against the National Performance Metrics, these being:
  - a. Reducing Delayed Transfers of Care (DToC)
  - b. Reducing Non-Elective Admissions (General and Acute)
  - c. Reducing admissions to residential and care homes; and
  - d. Increasing effectiveness of reablement

##### a. Reducing Delayed Transfers of Care

- i) The 2018/19 target for this metric is 43.2 average daily beds delayed. The stable performance seen in quarters 1 and 2 has been maintained in quarter 3 with delays below (better than) or just above the target. At the end of quarter 3 2017/18 (December 2017) the average daily beds delayed was 58 and one year later at the end of December 2018 this has reduced to 39, which represents a 33% improvement in performance.
- ii) This improved performance has been achieved whilst seeing increasing numbers of admissions and acuity of patients. Despite this health and social care colleagues across all acute and community sites, along with domiciliary (home care) and residential and nursing home providers, have worked tirelessly to discharge patients safely and continue to do so.

- iii) The most significant improvements continue to be at the three main acute sites, Warwick, George Eliot and University Hospital Coventry and Warwickshire. Performance for quarter 4 the main winter pressures period, is not yet available, however forecasts indicate the low levels of delays were maintained during January and March 2019, except for a peak during February 2019.
- iv) During quarters 3 and 4, work has been stepped up to engage collaboratively with out of county providers (West Midlands, Worcestershire, Oxfordshire etc) and Coventry and Warwickshire Partnership Trust, as their delays have contributed to 17% of delays in the last 4 months.
- v) Note: There is a 6 week delay in confirming actual delays data.
- vi) DToC performance is measured as the average number of daily beds occupied by a delayed Warwickshire resident.

<b>Month</b>	<b>Average daily beds occupied by a delayed resident</b>	<b>Target</b> (lower is better)
April 18	51	43
May 18	41	43
June 18	32	43
July 18	41	43
Aug 18	46	43
Sept 18	46	43
Oct 18	45	43
Nov 18	44	43
Dec 18	39	43
Jan 19	41	43
Feb 19	54	43

- vii) In quarter 4 the Red Bag Scheme went live in Warwickshire, a national initiative which aims to support a reduction in DTOCs by supporting smooth transfers of care for residents living in residential and nursing care.

**b. Reducing Non-Elective Admissions (General and Acute)**

- i) In quarter 3, non-elective admissions were 6.2% higher than the same period last year and 4.7% above target. The main reason for the continued growth in volumes of non-elective admissions in quarter 3 was a 3.8% increase in A&E attendances of all ages and a 2.2% growth of those aged 65+.

Non-Elective Admissions performance:

Quarter	Actual	Target	% over target
Q1 2017/18	13,324	13,138	1.4%
Q2 2017/18	13,297	13,280	0.1%
Q3 2017/18	13,815	13,289	4.0%
Q4 2017/18	13,388	13,003	3.0%
Q1 2018/19	14,136	13,827	2.2%
Q2 2018/19	14,075	13,985	0.6%
Q3 2018/19	14,660	14,000	4.7%

NHS	65+ NEAs	All Age NEAs
SWCCG	-2.1%	+2.4%
WNCCG	+10.6%	+11.0%
Rugby	+6.5%	+8.5%
<b>Total</b>	<b>+3.2%</b>	<b>+6.2%</b>

- ii) Non-elective admissions from Warwickshire North CCG patients have seen the greatest growth in quarter 3 compared with the same quarter last year (11.0%), while growth at Rugby and SWCCG was 8.5% and 2.4% respectively.
- iii) As stated a driver for growth in non-elective admissions is the increase in A&E attendances when compared to the same period in the previous year. University Hospital Coventry and Warwickshire had the highest growth of all with a 10.1% increase in A&E attendances, primarily due to an 11.3% growth in the 0-64 age group. In comparison there was no growth at South Warwickshire Foundation Trust and 1.6% growth at George Eliot Hospital.

c. Reducing long term admissions to residential and nursing care 65+

- i) Permanent admissions were 1% higher than quarter 3 17/18 and 9% below target in quarter 3 2018/19.
- ii) The target for 2018/19 is 724 admissions per 100k population, which equates to a quarterly target of 181.

Quarter	Actual	Target	% Over target
Q1 17/18	173	138	25.6%
Q2 17/18	189	138	37.2%
Q3 17/18	164	138	19.1%

Q4 17/18	170	138	23.4%
Q1 18/19	163	181	-9.9%
Q2 18/19	130	181	-28.2%
Q3 18/19	165	181	-8.8%
Q4 18/19	155	181	-14.4%

d. Increasing the effectiveness of reablement

- i) This target measures the percentage of older people (65 and over) who are still at home 91 days after discharge from hospital into reablement or rehabilitative services. This target is an annual measure and performance for 2017/18 was 93%.

Year	Actual	Target (higher is better)	% Over target
2016/17	87.9%	86.8%	1.1%
2017/18	93.0%	89%	4%
2018/19	Data available in June 19	89%	n/a

## 2.0 Better Together Programme Progress Update – High Impact Change Model (HICM)

- 2.1 Progress continues to be made against implementing all eight changes in the model and the most recent self-assessment of progress is detailed below:

		Status as at Q3 18/19	Status as at Q4 18/19
Change 1	Early discharge planning	Mature	Mature
Change 2	Systems to monitor patient flow	Mature	Mature
Change 3	Multi-disciplinary/multi-agency discharge teams	Mature	Mature
Change 4	Home first/discharge to assess	Mature	Mature
Change 5	Seven-day service	Established	Established
Change 6	Trusted assessors	Established	Established
Change 7	Focus on choice	Established	Established
Change 8	Enhancing health in care homes	Established	Established

- 2.2 The national Better Care Fund target was to achieve 'Established' status by March 2019 and has now been achieved, which is a considerable achievement.
- 2.3 The local Better Health, Better Care, Better Value target was to achieve 'Mature' status against all 8 changes in the model, across all sites by March 2019. Although this has not been achieved across all 8 changes and all acute sites, local action plans are in place to achieve this in 2019/20 and work continues to embed

the changes achieved to date consistently across acute and community sites by both health and social care teams.

### 3.0 Update on the Better Care Fund Policy Framework and Guidance for 2019/20

3.1 The national Better Care Fund Policy Framework for 2019/20 has now been finalised and published. However, the detailed guidance which supports this, including the financial contributions has not and is expected to be finalised and published towards the end of April/beginning of May 2019. Planning and preparation for 2019/20 therefore continues locally, with draft budgets, targets and priorities being prepared by the Better Together Programme Board. Until the final guidance is received, these cannot be finalised.

3.2 2019/20 is the last year of the national five-year Better Care Fund programme. An update is therefore also awaited on the national initiative to replace this in 2020/21.

### 4.0 Timescales Associated with Progress Reporting

4.1 The Better Care Policy Framework requires quarterly reporting and monitoring against the four national performance metrics and finances.

### Background Papers

1. None

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The report was circulated to the following members prior to publication:

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Other WCC members: Councillors Caborn, Morgan, Redford, Golby, Parsons and Rolfe.