

Progress in delivering local BCF plans

Summary of BCF quarterly reporting returns and
key metrics for Q1 2015-16

29 September 2015

Version 7 – National, North of England

The Better Care Fund



1. Key Findings

Health and Wellbeing Boards (HWBs) submitted quarterly reports for the period April to June 2015 (Q1) to the Better Care Support Team on 28th August 2015. The information provided within these reports, combined with nationally available data (DTOCs), has been analysed to produce an update on progress on the Better Care Fund in 2015-16. The headlines are:

- 138/150 HWBs indicated they had signed their Section 75 agreements to formally establish the pooled fund at the time of submission on 28th August 2015. Follow up suggests that 144 are now signed, with only 2 HWBs reporting difficulty in agreements.
- Improvement in compliance with all national conditions questions;
- Significant increase in the number of HWBs using the NHS number as the sole identifier – from 75/150 to 90/150;
- 147/150 HWBs indicating that their BCF plan is protecting social care;
- HWBs are reportedly paying out £36.9m in P4P for Q4 and Q1 combined
- Non-Elective Admissions are down by 5 from baseline figures for Q1 with significant regional variation: the North are 3,614 below their baseline and the South 2,196 above
- DTOC rate has increased by 104 from the baseline period with significant regional variation: an increase by 37 in the North compared to an increase by 260 in the South
- HWBs have paid £1.347bn into pooled budgets in Q1 2015-16, with expenditure from the fund totalling £1.256bn in the same period.

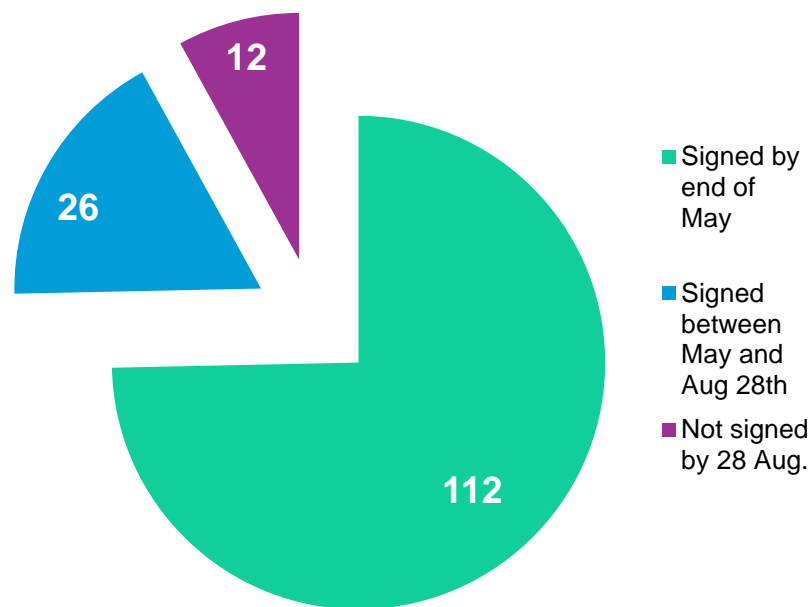
SECTION A

Pooled budgets and national conditions

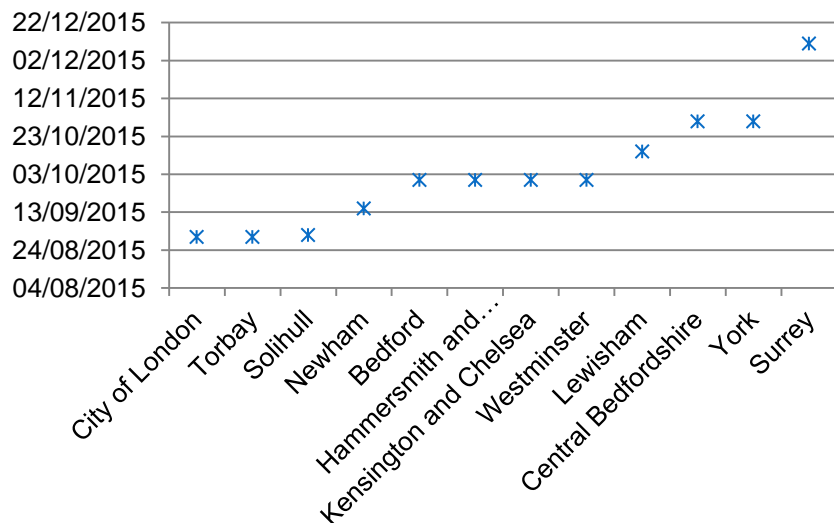
2. Pooled budgets - summary

Have funds been pooled via a Section 75 pooled budget arrangement in line with the agreed plan?

- 112/150 HWBs confirmed they had signed through the Q4 reporting in May (75%);
- A further 26 HWBs confirmed they have signed as part of their Q1 return;
- This leaves 12 HWBs who are yet to confirm that they have signed (8% of total HWBs)



The 12 HWBs who have not yet signed have indicated when they expect this to happen

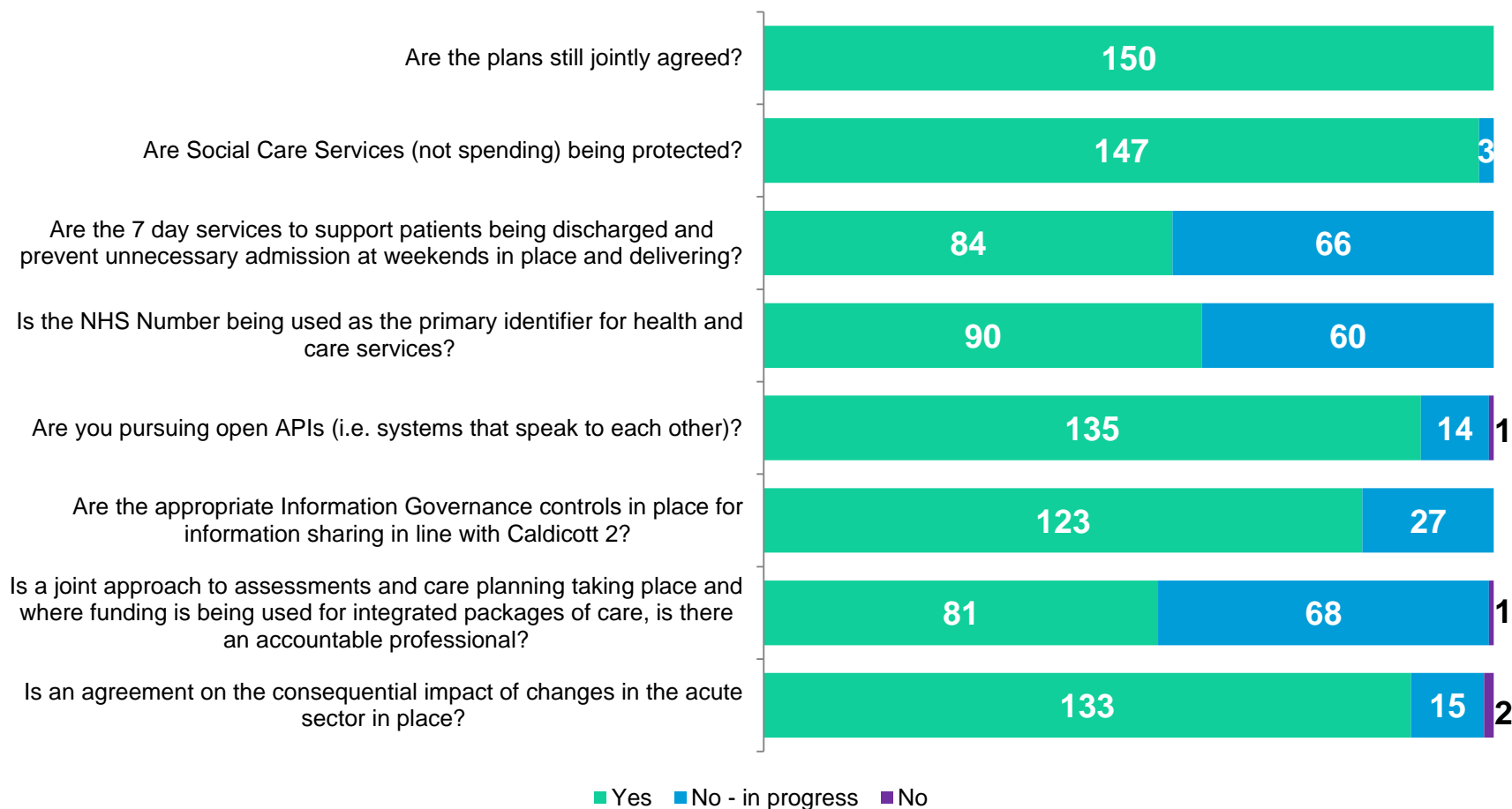


Further analysis

- Follow up has already been carried out through the Q4 stocktake process, and will be reviewed again via the Q1 process
- Surrey have indicated that the delay is caused by unresolved legal issues, although agreements have been drawn up for all their CCGs

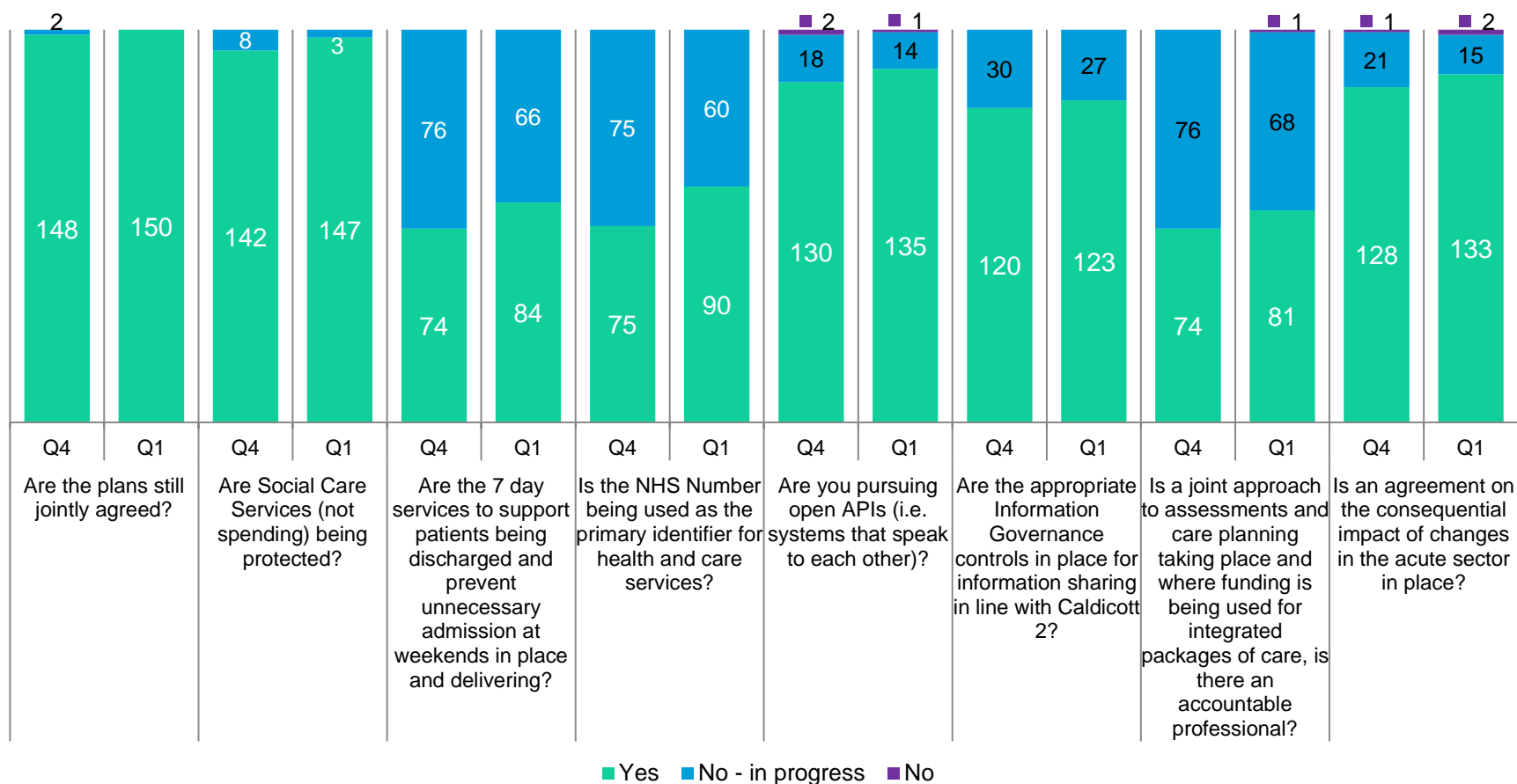
4. The national conditions - overview

Q1 returns indicate that the same conditions continue to prove more challenging – **7 day services** to support discharge and avoid admissions, use of the **NHS number** as the primary identifier, and the implementation of **joint assessments**, care planning and having an accountable lead professional.



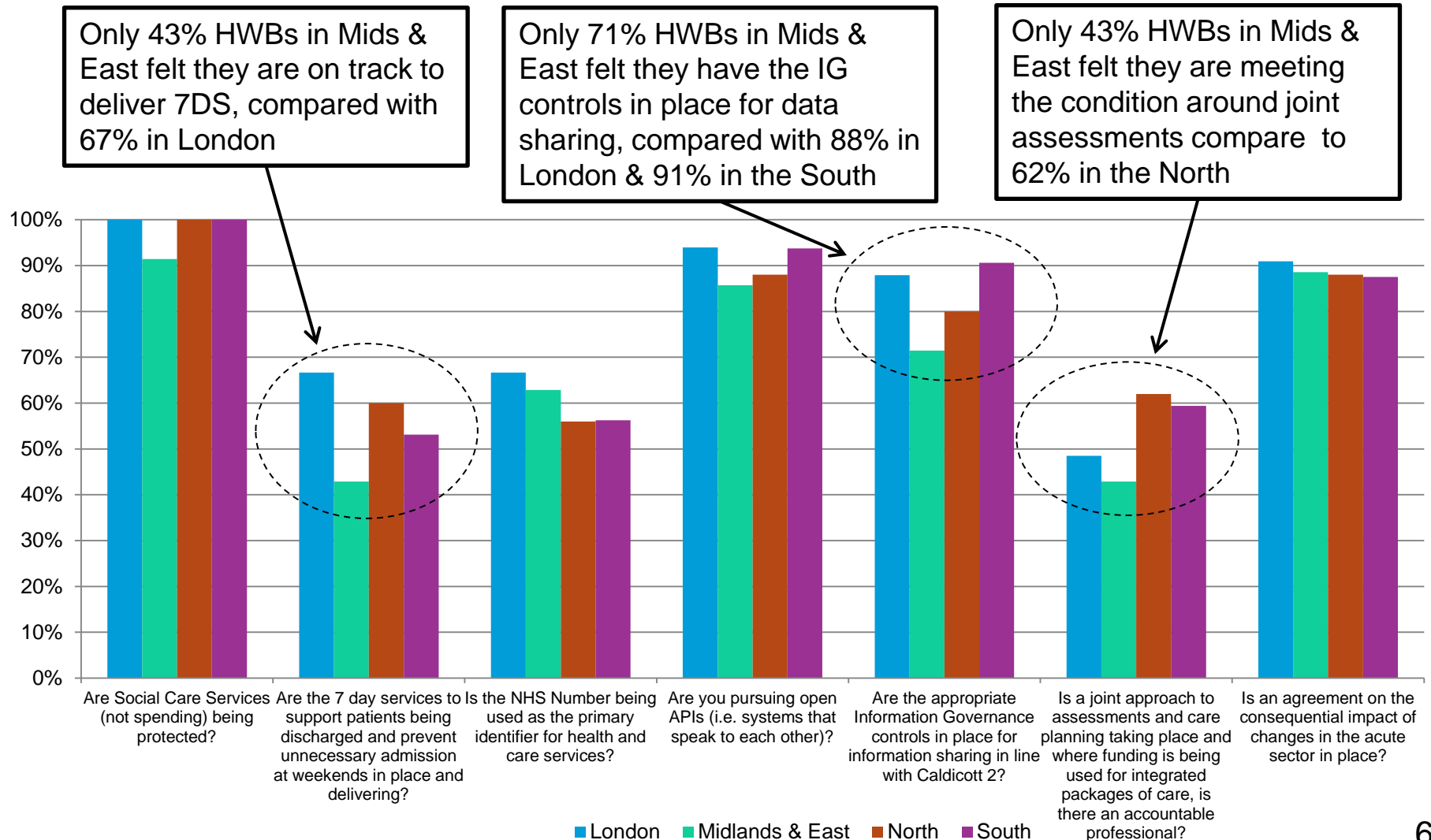
4. The national conditions – changes from Q4

The below table shows that there has been positive movement on all national conditions between reporting for Q4 2014-15 and reporting for Q1 2015-16. However the trends remain the same. The most significant movement is seen on the condition relating to use of the NHS number.



5. The national conditions – by NHSE Region

There are some noticeable variations between regions across England when looking at the % of HWBs who said 'Yes' to questions on the national conditions.



6. The national conditions – further analysis

Protection of Social Care

- 147 HWBs indicated Social Care is being protected as set out in BCF plans
- 3 HWBs indicated this is in progress but not complete, these are:
 - Staffordshire
 - Suffolk
 - Warwickshire
- Only Suffolk have indicated that this will not be met by the end of 2015-16

'No' responses

- Cumbria has no plans to pursue APIs as they are pursuing something equivalent
- Brighton and Hove will not implement joint assessments this year but will have completed this by May 2016
- Brent and Central Bedfordshire have both indicated that there is no longer a shared view of the impact of plans on the acute sector this year

Data sharing and joining up systems

- The number of HWBs using the NHS number has increased by 15 from Q4;
- There has been improvement across all 3 data sharing questions;
- 77 HWBs responded with a 'Yes' to all 3 questions;
- 4 HWBs responded with a 'No' to all 3 questions, these are: Walsall, South Tyneside, Peterborough, and Lambeth;

Question	Q4	Q1
Are the appropriate Information Governance controls in place for information sharing in line with Caldicott 2?	120	123
Is the NHS Number being used as the primary identifier for health and care services?	75	90
Are you pursuing open APIs (i.e. systems that speak to each other)?	130	135

SECTION B

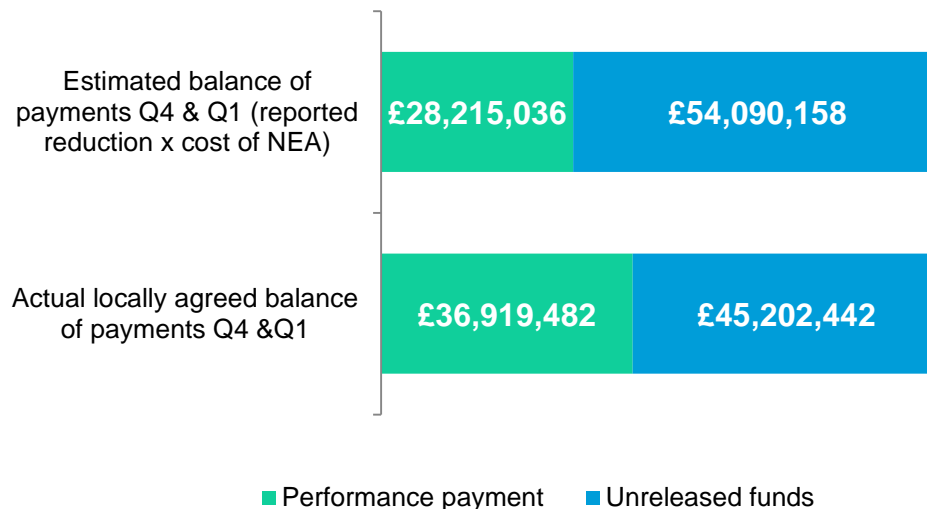
Metrics and Payment for Performance

7. National metrics summary

Headlines

- Total of £36.9m in P4P payments for Q4 and Q1*
- Total of 69 HWBs achieved a quarterly payment across Q4 & Q1
- Non-Elective Admissions were down by 5 from Q1 2014-15*
- 104 increase in the rate of delayed transfers of care compared to Q1 2014-15

Payment for Performance pot



National metrics summary

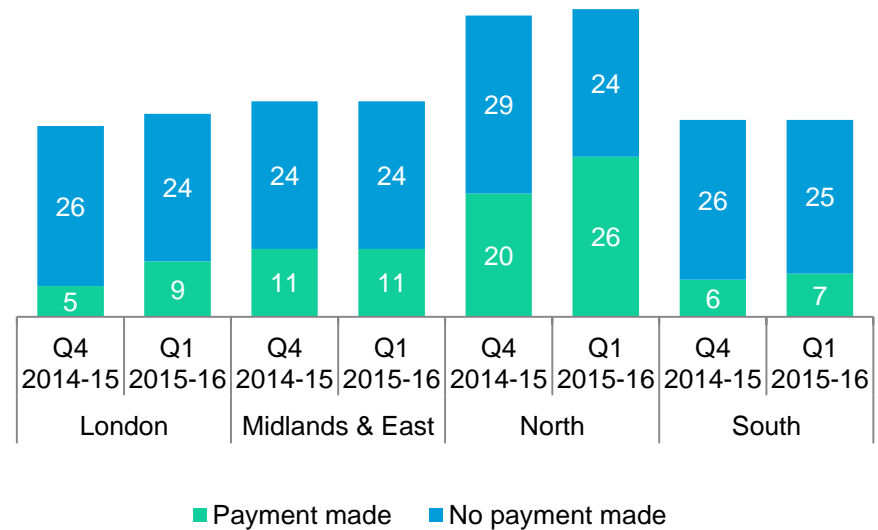
	Q1 Baseline	Q1 Plan	Q1 Actual	Variance from baseline	Variance from plan
Non-Elective Admissions	1,365,630	1,343,762	1,365,625	-5	21,863
Delayed Transfers of Care	857	786	960	104	175
No. permanent admissions of older people to care homes	Data not available				
No. of people at home 91 days after discharge	Data not available				

* NEA and P4P now measured against revised BCF targets agreed in July 2015. For this reason data reported here for Q4 2014-15 may differ from previously reported data.

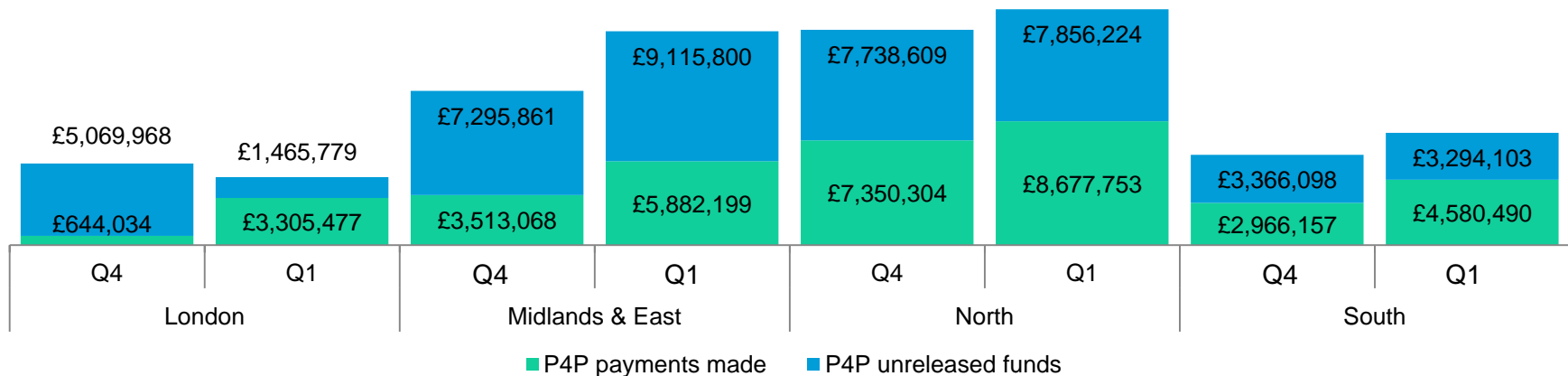
8. P4P Summary

- A total of 69 HWBs across the country achieved a P4P payment in Q4 and / or Q1
- A total of 95 P4P payments have been made so far
- This totals £36.9m paid into performance funds across the country
- There is variation in the level of P4P paid out in different regions

No. HWBs making payments, by region*



Payments vs. unreleased funds, by region

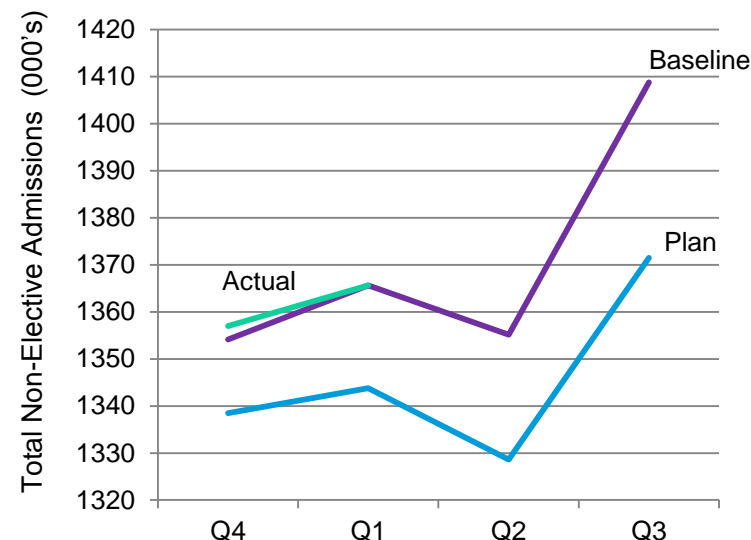


* 3 HWBs failed to provide this information for Q4 (1 North, 2 London)

9. Non-Elective Admissions - detail

- We have changed the way that we track progress on reducing Non-Elective admissions
- HWBs are now required to self-report against their revised BCF baselines and targets that were set in July 2015.
- At this point HWBs were also given the opportunity to select the most appropriate data source for them – SUS or MAR
- Self reported data for Q4 2014-15 and Q1 2015-16 suggests that there is little change from baseline at an aggregate national level, but signification regional variation

National Quarterly Performance Against Baseline & Plan*



Total Non-Elective Admissions vs baseline & plan, by region

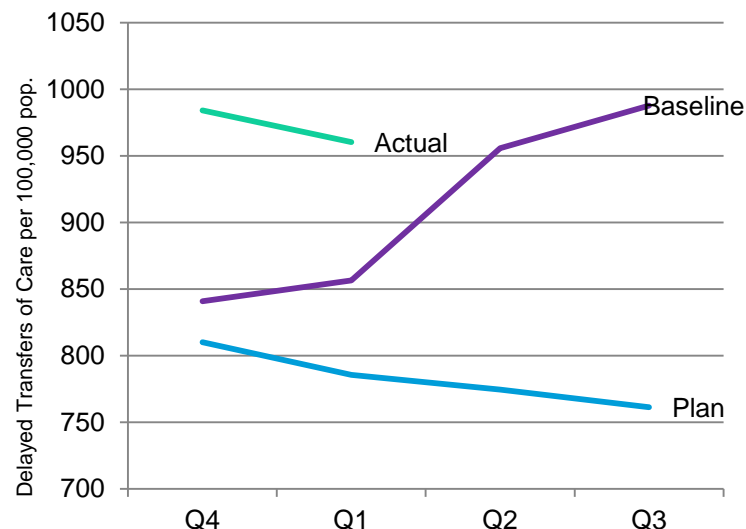
	Baseline		Plan		Actual Performance		Performance against baseline (Red = increase)		Performance against plan (Red = increase)	
	Q4 13/14	Q1 14/15	Q4 14/15	Q1 15/16	Q4 14/15	Q1 15/16	Q4 14/15	Q1 15/16	Q4 14/15	Q1 15/16
England	1,354,145	1,365,630	1,338,483	1,343,762	1,357,001	1,365,625	2,856	-5	18,518	21,863
North	434,565	433,801	426,733	423,678	434,521	430,187	-44	-3,614	7,788	6,509
Midlands and East	416,138	425,286	411,762	418,161	415,090	425,195	-1,048	-91	3,328	7,034
London	181,778	183,495	178,298	181,860	184,185	184,998	2,407	1,503	5,888	3,138
South	321,663	323,049	321,690	320,064	323,205	325,245	1,541	2,196	1,514	5,181

* 'Baseline' is actual data for Q4 2013-14 to Q3 2014-15. 'Plan' and 'Actual' relate to the period Q4 2014-15 to Q3 2015-16.

10. Delayed Transfers of Care - detail

- The DTOC rate for Q1 increased by 104 compared to the baseline period, an increase of 174 compared to planned rate
- This reflects over performance across the country, but with the most significant deviation from plan in the South
- London were the only region to meet their plan (for Q4) and in that instance the planned levels were set above the baseline.
- Nationally the rate of DTOCs has decreased by 24 from Q4 to Q1.

National Quarterly Performance Against Baseline & Plan*



DTOCs per 100,000 pop vs baseline & plan, by region

	Baseline		Plan		Actual Performance		Performance against baseline (Red = increase)		Performance against plan (Red = increase)	
	Q4 13/14	Q1 14/15	Q4 14/15	Q1 15/16	Q4 14/15	Q1 15/16	Q4 14/15	Q1 15/16	Q4 14/15	Q1 15/16
England	841	857	810	786	984	960	143	104	174	175
North	737	744	737	721	834	781	98	37	98	59
Midlands and East	1,000	1,049	992	981	1,175	1,091	175	42	183	110
London	529	539	560	507	545	625	16	86	-15	119
South	953	941	827	793	1,185	1,202	232	260	358	409

* 'Baseline' is actual data for Q4 2013-14 to Q3 2014-15. 'Plan' and 'Actual' relate to the period Q4 2014-15 to Q3 2015-16.

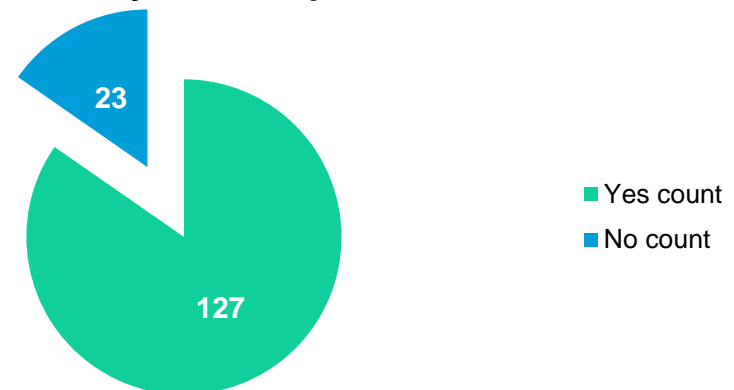
11. Local metrics and patient experience

- It was a requirement of the BCF planning process for HWBs to include in their plan 1 locally defined metric and 1 locally defined patient experience metric.
- Through the Q1 process we have asked HWBs to self report against these metrics.
- Through this process HWBs were also give the opportunity to set out changes they may have made to the metrics they chose through the planning process.
- This has produced a wealth of data that the BCST will use to look further at which metrics are being tracked locally.
- At this stage we have just summarised the number of HWBs making changes to the metrics they are tracking.

Is this still the local performance metric that you wish to use to track the impact of your BCF plan?



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SECTION C

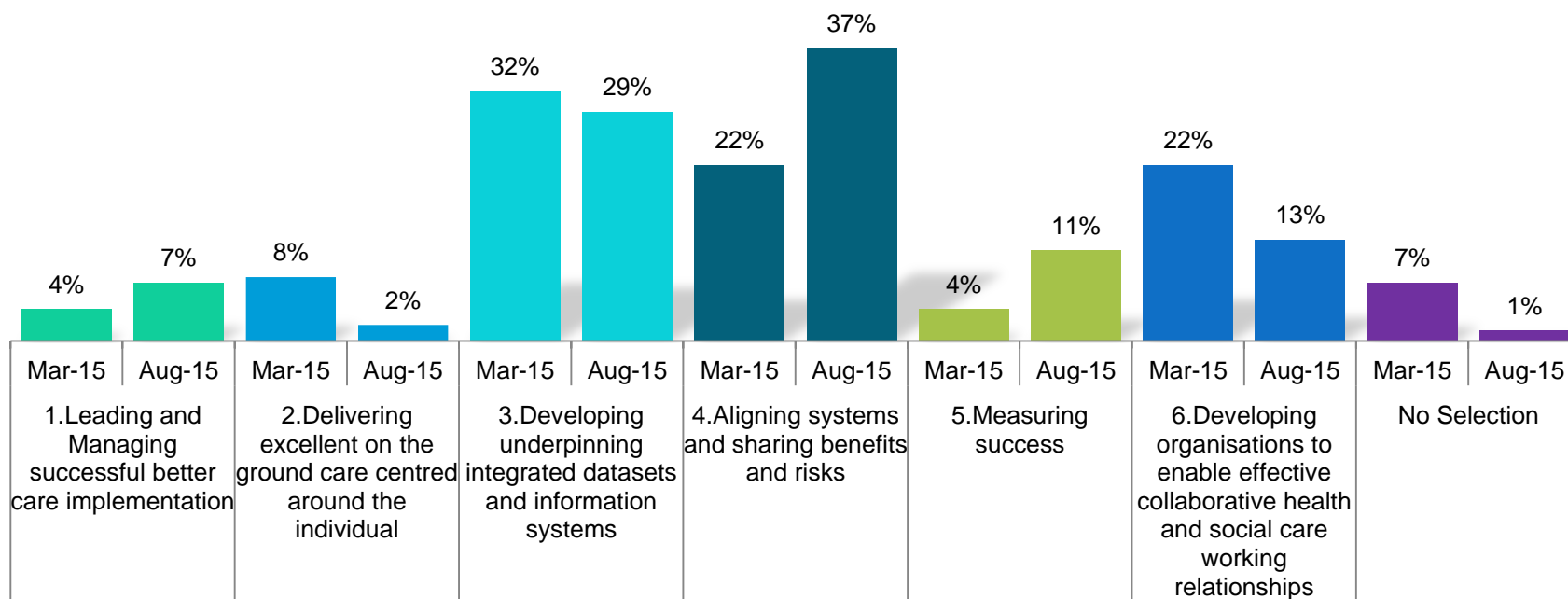
Support needs

12. Update on key barriers

As part of the Q1 reporting template HWBs were asked to reassess which area of integration they felt was the greatest challenge or barrier to success.

When compared to answers given to the same questions through the BCF readiness survey in March 2015 we can see an increased focus on aligning financial systems, measuring success, and leading and managing change.

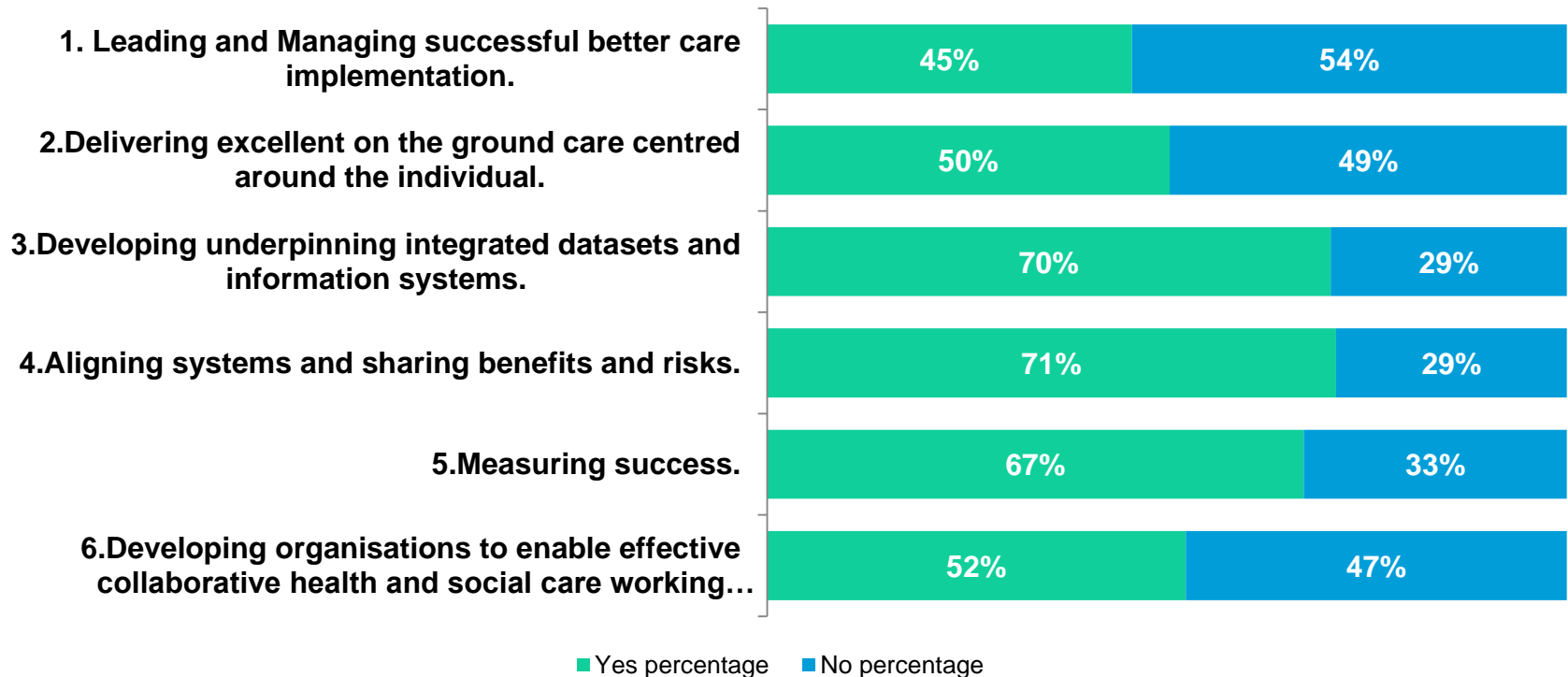
Integrating datasets and information systems, and developing organisations to work collaboratively have decreased in priority but remain significant.



13. Interest in support - by theme

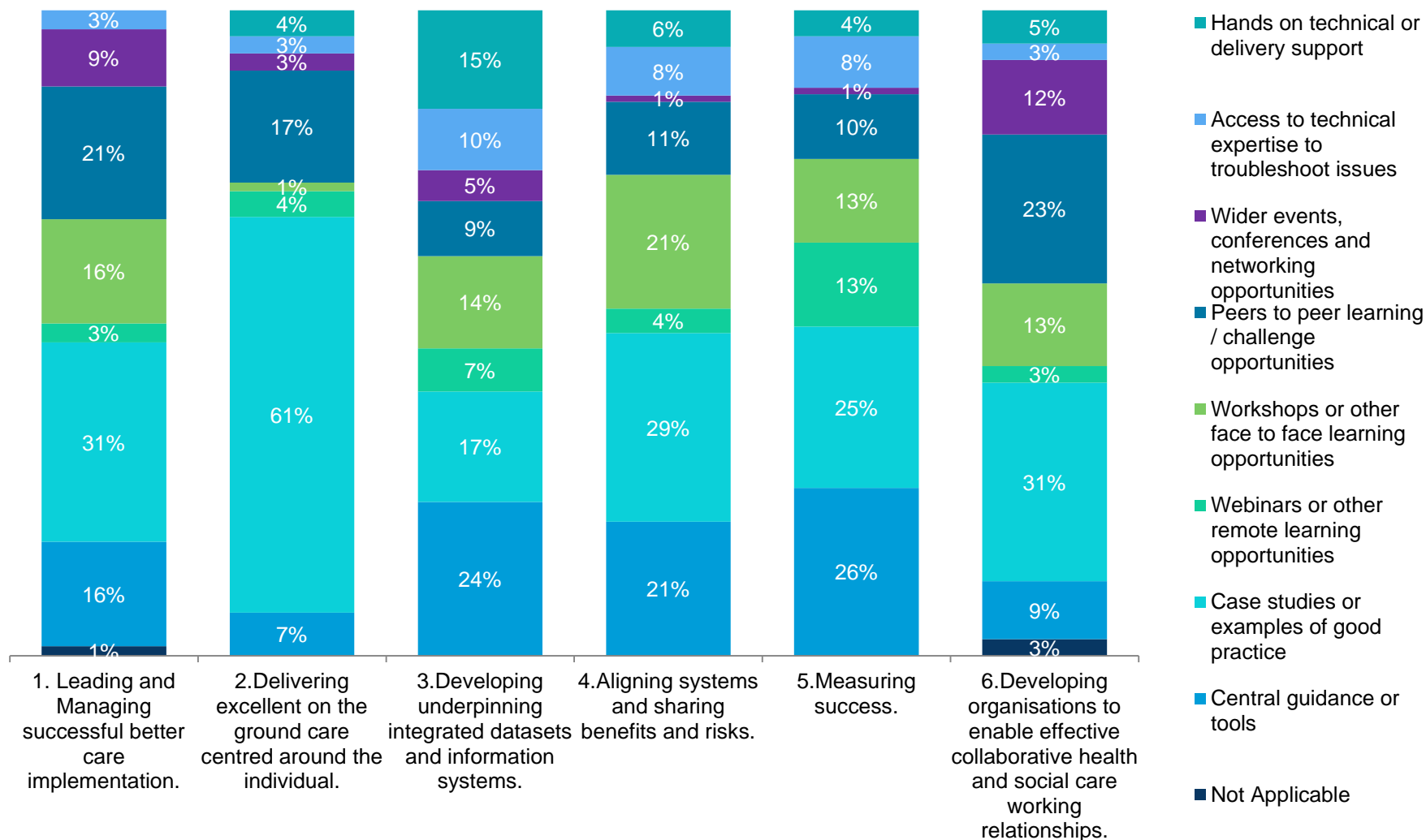
We also asked HWBs, for each theme, whether they would welcome support from the national team. The below is based on 149 HWBs who answered this question.

The results suggest there is generally a high level of interest in support on all themes, not just those the BCST has focused on to date – or those which are seen as key barriers.



14. Interest in support - by delivery method

We then asked those HWBs who indicated interest in support on a theme, what format they would most value support being provided in.



SECTION D

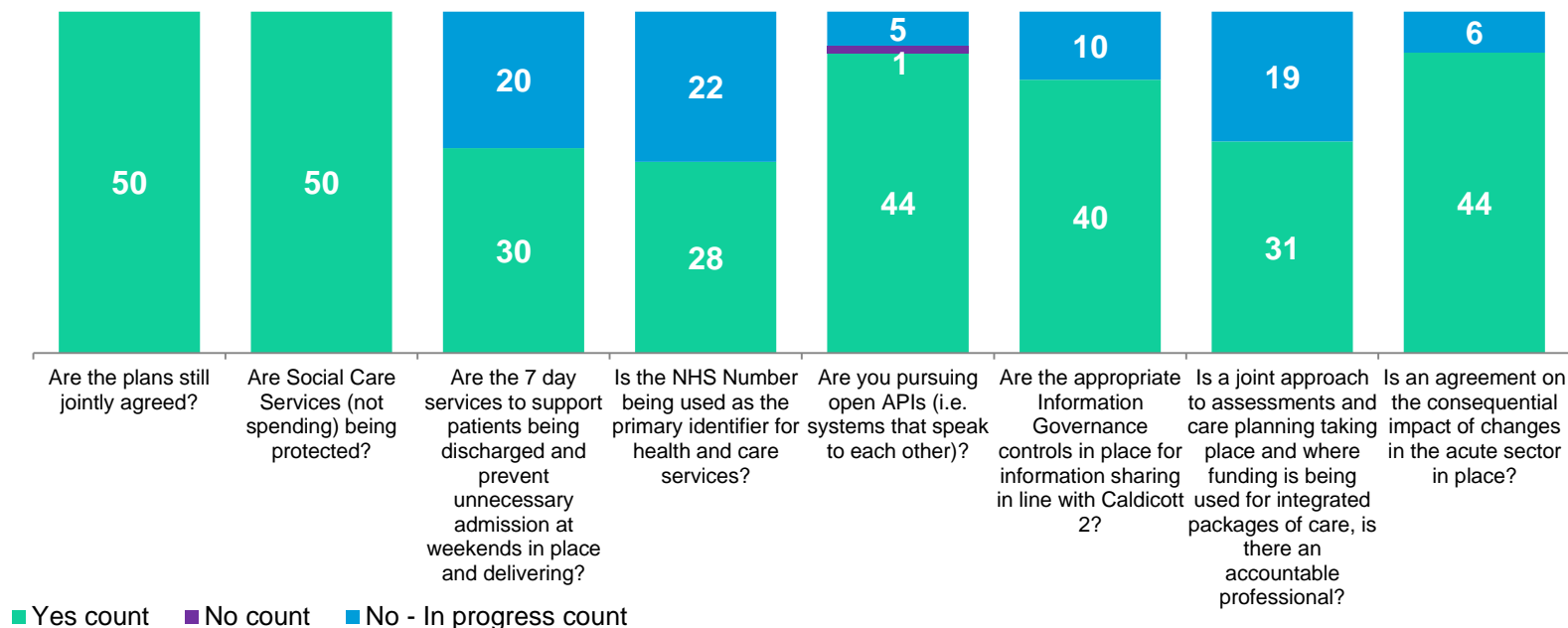
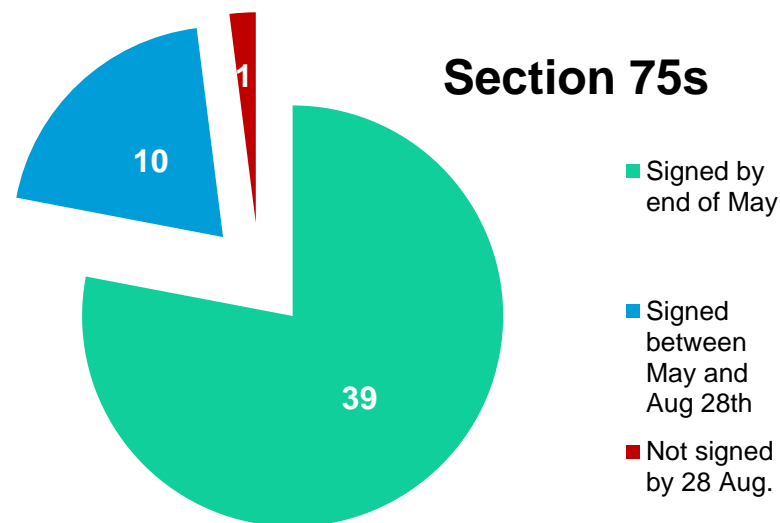
Regional summary headlines

REGION
The North of England

15. Pooled budgets and national conditions

The North of England

- York is the only HWB in the North that has not yet signed a Section 75 agreement. The aim to have this signed by 31st October.
- All HWBs in the North have indicated that plans are still agreed and social care is still protected



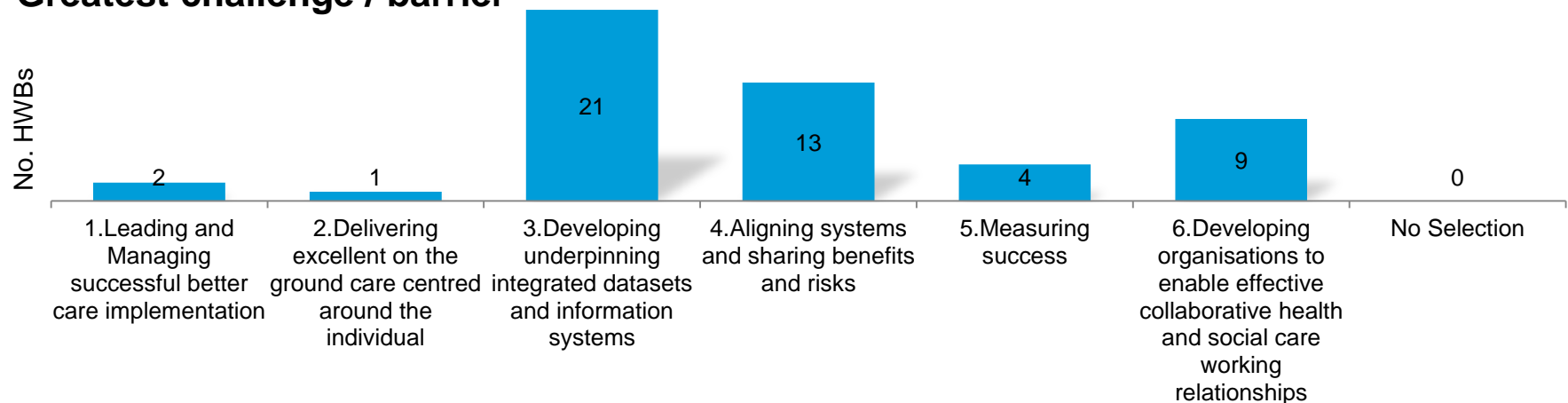
16. Points of interest – The North

- **6 HWBs have indicated no agreed impact on the acute sector:** Cheshire East, Liverpool, Manchester, Sheffield, Warrington, and Wirral
- ✓ **A total of £16.028m has been paid in P4P** across the North of England for Q4 2014-15 and Q1 2015-16, £3.617m more than would be expected based on the number of Non-Elected Admissions avoided.
- **10 HWBs have agreed a local P4P payment that is below the expected level:** South Tyneside, Blackburn with Darwen, Tameside, Bradford, Calderdale, Doncaster, Kirklees, Leeds, Sheffield, and Wakefield
- ✓ **17 HWBs in the North achieved their target for Non-Elective admissions in Q1:** Bradford, Calderdale, Cumbria, Darlington, East Riding of Yorkshire, Halton, Kingston upon Hull, Kirklees, Knowsley, Liverpool, Middlesbrough, Oldham, Redcar and Cleveland, Salford, St. Helens, Wigan, and Wirral.

17. Support Needs – the North

- HWBs in the North consider developing underpinning integrated datasets and information systems as the biggest challenge in delivering integrated care
- **15 HWBs indicated they would welcome support in all 6 areas:** Barnsley, Blackburn with Darwen, Blackpool, Bolton, Bury, Cheshire East, Cumbria, Darlington, Gateshead, Lancashire, Manchester, Middlesbrough, Redcar and Cleveland, Wakefield, Wirral
- **A number of HWBs have indicated they would welcome hands on support in one or more specific theme:** theme 3 - Bolton, Bury, Calderdale, Cheshire West and Chester, Gateshead, Manchester, Rotherham, Tameside; theme 4 - Cheshire West and Chester, Tameside; theme 5 - Bradford, Manchester, Rotherham, Tameside; theme 6 - North Lincolnshire.

Greatest challenge / barrier



Key lines of Enquiry – all regions

The data provided by local areas through the second BCF quarterly return suggests a number of areas that require follow up in order to better understand the issues behind the. The information in this pack is a snapshot but provides a guide of where to look further at the full data provided. Regional BCF leads are asked to consider the following questions after reviewing this pack:

- Does the information provided indicate any localities that require significant support - and if so is this something we can work together to broker?
- Have the HWBs who had not signed Section 75s when returns were submitted on 28 August now signed?
- Does the information on National Conditions point to any areas of concern in your region – particularly on the protection of social care and agreement of impact on the acute sector?
- What support might help the high no. of HWBs who are yet to fully meet the conditions for: 7 day services, joint assessments and care planning, and use of the NHS number?
- Why do some areas appear to have paid less into their Payment for Performance fund than they should have?
- What is driving success in those areas making progress on Non-Elective Admissions and Delayed Transfers of Care?
- Are those HWBs who have indicated a desire for support getting what they need?