Report No: 61/2024 PUBLIC REPORT

HEALTH AND WELLBEING BOARD

23 April 2024

BETTER CARE FUND (BCF): QUARTER THREE REPORT 2023-24

Report of the Portfolio Holder for Adults and Health

Corporate Priorities	: All			
Exempt Information		No		
Cabinet Member(s)		Councillor Diane Ellison, Portfolio Holder for Adults		
Responsible:		and Health		
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Ward Councillors	N/A			

DECISION RECOMMENDATIONS

That the Committee:

- 1. Notes the content of the report.
- 2. Notes that the Rutland 2023-25 Quarter 3 Report of the Better Care Fund (BCF) gained approval from the Chair of the Health and Wellbeing Board and from the ICB Executive team, and was submitted to the National BCF Team on 31 January 2024

1 PURPOSE OF THE REPORT

- 1.1 To brief the Health and Wellbeing Board (HWB) on the 2023-25 Quarter 3 Report of the BCF.
- 1.2 Update the HWB on the work of the Rutland BCF Partnership Board.

2 BACKGROUND AND MAIN CONSIDERATIONS

2.1 The Rutland BCF Plan for 2023-23 was submitted to the national BCF team in June 2023. This included a plan which set out the ambitions for the 5 BCF Metrics and intermediate care capacity and demand proposals for reablement for community and hospital discharge.

2.2 The BCF Quarter 3 Report includes updates on Metrics data and whether performance is on track against the targets set in the 2023-25 Plan. The Report also includes an update on spend and activity for certain schemes within the plan.

3 METRICS

3.1 There are 5 metrics to report against for 2023-24:

i. Avoidable admissions

Unplanned admissions for Chronic Care Sensitive Ambulatory Conditions. Indirectly standardised rate of admissions per 100,000 population.

ii. Discharge to usual place of residence

The percentage of people discharged from acute hospital to their normal place of residence.

iii. Falls

Emergency hospital admissions due to falls in people aged 65 and over directly aged standardised rate per 100,000.

iv. Residential admissions

Long-term support needs of older people (age 65 and over) met by admission to residential and nursing care homes, per 100,000 population.

v. Reablement

Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into Reablement/ rehabilitation services.

3.2 Targets and Performance

Ambitious targets for the Metrics were agreed for 2023-24 which formed part of the 2023-25 Rutland BCF Plan. The targets were required to be high reaching to demonstrate intention of making further progress and improvements to outcomes which would be demonstrated by these metrics. For quarter 2 (as per HWB Report January 2024), the data showed that we were on track to meet the reablement target but not on track to meet the targets in the other metrics. The data for quarter 3 shows that in addition to being on track to meet the reablement target, we are also on track to meet the target for discharge to usual place of residence. We are still not on track to meet the remaining 3 targets. See table below for further details.

Metric	Planned Performance	Actual Performance	Assessment of progress
Avoidable admissions	Quarter 2	Quarter 2	Not on track
(number)	117.0	161	
Discharge Usual Place of Residence	Quarter 2	Quarter 2	On track
(percentage)	90.9%	91.5%	
Falls (standardised rate per 100,000	Quarter 2	Quarter 2	Not on track

Metric	Planned Performance	Actual Performance	Assessment of progress
population)	288.6	390.1	
Residential admissions (per 100,000 population)	193	317 as of December 2023	Not on track
Reablement (percentage)	95.7%	91% as of December 2023	On track

- 3.3 The number of **avoidable admissions** is not on track to meet the target. The number has increased in quarter 2 from quarter 1 and is 43 above the target.
- 3.4 The percentage of **discharges to usual place of residence** is now on track to meet the target.
- 3.5 The **falls** rate is calculated per 100,000 of the population so that data is comparable with different sized populations nationally. Therefore, the gap between the planned and actual performance is relatively small.
- The **residential admissions** data is also calculated per 100,000 of the population. This performance shows we are not on track for the planned target. However, this target was particularly ambitious based on unusually good records in the last 2 years. The actual number as at December 2023 was 19, the target having been set at 20 for the year.
- 3.7 The **reablement** target was missed but is very close. This is based on a snapshot figure for December 2023. The performance has improved since the previous report. Local performance reports show that reablement consistently achieves good results in the 90+% and so this target has been considered to be on track.
- 3.8 Included in the report was the following narrative regarding **avoidable admissions**: It continues to be a challenge to prevent such hospital admissions, with a high proportion of older adults and higher risk of comorbidities.
- 3.9 A new Health and Care Collaboration project is due to start. Part of this will be implementing a Risk Stratification model for the PCN. People with multiple comorbidities will trigger a response/intervention for prevention purposes. The introduction of the Whzan clinical boxes should begin to have an impact in reducing hospital admissions for care home residents.

4 SPEND AND ACTIVITY

- 4.1 An update on the expenditure and outputs for certain schemes within the BCF plan for quarters 1 and 2 was included in the report. There were no issues with expenditure or outputs.
- 4.2 Schemes requiring updates were:
 - Carers Services, including Admiral Nursing and Respite

- Assistive Technologies, including Telecare and Disabled Facilities Grant
- Home and Bed Based Intermediate Care Services

5 RUTLAND BCF PARTNERSHIP BOARD

- 5.1 The aim of the Board is to ensure that the BCF plan achieves its aims and outcomes within the financial contributions agreed by the partners. It provides governance to ensure the rules and processes of the Rutland BCF are embedded as standard.
- 5.2 Reports for quarters 3 and 4 are currently being completed by the Budget Holders of the schemes within the plan. These include information on progress made, how the schemes align with the BCF objectives and priorities and financial updates and viability. This information will be used for evaluation by the Board.
- 5.3 BCF monies were agreed by the BCF Board in February, to be released for the following schemes:
 - Community Inclusion Officer
 - Customer Feedback Contract

6 CONSULTATION

6.1 Not applicable currently.

7 ALTERNATIVE OPTIONS

7.1 Not applicable currently

8 FINANCIAL IMPLICATIONS

8.1 Local partners have proceeded to deliver the BCF programme 'on trust', based on consensus across the Council and ICB.

9 LEGAL AND GOVERNANCE CONSIDERATIONS

9.1 The plan received sign off from Executive Team at the ICB.

10 DATA PROTECTION IMPLICATIONS

10.1 There are no new Data Protection implications. Reports contain only anonymised data.

11 EQUALITY IMPACT ASSESSMENT

11.1 Not applicable

12 COMMUNITY SAFETY IMPLICATIONS

12.1 There are no identified community safety implications from this report.

13 HEALTH AND WELLBEING IMPLICATIONS

13.1 The Better Care Fund programme is an important element of Rutland's response to enhancing the health and wellbeing of its population, representing more than £3m of ICB and LA funding to be used for integrated health and social care interventions.

This report sets out that Rutland continues to be committed to improving the outcomes of the population.

14 CONCLUSION AND SUMMARY OF REASONS FOR THE RECOMMENDATIONS

14.1 The committee is recommended to note the Rutland BCF 2023-25 Quarter 3 Report, submission of which to the BCF national team on 31 January was signed off by the Chair.

15 BACKGROUND PAPERS

15.1 There are no additional background papers

16 APPENDICES

16.1 Appendix A: Rutland BCF Quarter 3 Report

A Large Print or Braille Version of this Report is available upon request – Contact 01572 722577.