Report to Rutland Health and Wellbeing Board

Subject:	Quarter 4 National Return	
Meeting Date:	23.7.15	
Report Author:	Julia Eames	
Presented by:	Mark Andrews	
Paper for:	Note / Discussion	

Context, including links to Health and Wellbeing Priorities e.g. JSNA and Health and Wellbeing Strategy:

The First Better Care Fund quarterly report (incl. pay for performance metric) was submitted at the end of May relating to the period from January to March 2015, see copy attached (Appendix A). Due to the tight deadline after receipt of the template and the fact that the Health and Well Being Report was not sitting due to the elections the report was agreed outside of the meeting. However it is anticipated that future returns will be presented to the Board before submission.

The return required no performance data to be submitted on the wider metrics and only key health indicators have been collated by the BCF National team independently of the return. Details have not yet been received regarding the requirements for submission for quarter 1, which will cover the period April to June 2015.

The Midlands and East of England reporting returns and key metrics report is also attached for comparison (Appendix B). This shows that developments in Rutland are in line with the majority of the Midlands and East of England. The Board should note that Rutland is one of the 23 of the 35 areas in the region that has achieved a performance payment from Q4 against non-elective admissions.

However like the rest of the East Midlands, Rutland was significantly above plan for Q4 for Delayed Transfers of Care with an outturn of 570 days against a target of 275 days. Action has been taken to address rising delays in Peterborough and to tackle reasons for significant delays in March delays across LPT sites. Improved performance in April and May of 135 days looks likely to bring us back on plan against a Q1 target of 194 days.

Financial implications:

The pay for performance amount will provide some additional resource to support the ambitions of the Better Care Fund Plan. Proposals will be put to the Health and Well Being Board when developed by the Integration executive.

Recommendations:

That the board:

1. Note the contents of this report.

Comments from the board:			
Strategic Lead:	Mark Andrews		
Risk assessment:			
Time	M	Most plans are on track, with some delays in staffing and adjustments made	
Viability	M	Risks have been identified for individual schemes and actions to mitigate.	
Finance	M	Partnership agreement in place	
Profile	Н	National and local significance	
Equality & Divers	sity L	No specific group of individuals subject to any discrimination.	