

Association

Finance - Summary

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Organisation	Holds the pooled budget? (Y/N)	Spending on BCF schemes in 14/15 /£	Minimum contribution (15/16) /£	Actual contribution (15/16) /£
Local Authority Slough		£ 2,804	£ 694	£ 1,694
CCG Slough		£ 2,808	£ 8,068	£ 8,068
BCF Total		£ 5,612	£ 8,762	£ 9,762

Approximately 25% of the BCF is paid for improving outcomes. If the planned improvements are not achieved, some of this funding may need to be used to alleviate the pressure on other services. Please outline your plan for maintaining services if planned improvements are not achieved.

The BCF plan is premised upon savings from fewer non-elective admissions to hospital and shorter hospital stays. Investment of £800k is planned in 2014/15 in new or additional services that are designed to achieve at least this level of saving. The continuation of this policy into 2015/16 is planned to increase savings to £1.2m in that year. It is planned to re-invested in-year in services to further improve local performance in these and other target areas of the BCF. There will be close monitoring of performance against targets in 2014/15 enabling corrective action to be taken in-year should it become evident that planned improvements are not being achieved. It is anticipated that £200k contingency funding will be available each year for the purpose of funding corrective actions to ensure performance targets are met, and if necessary to contribute towards overspends elsewhere in the system that result from under-achievement. £200k is the maximum additional investment it is envisaged that would be required to ensure delivery of planned performance targets.

Contingency plan:		2015/16	Ongoing
Outcome 1 - 3% reduction in non-elective admissions in 2014/15	Planned savings (if targets fully achieved)	800	800
	Maximum support needed for other services (if targets not achieved)	200	200
Outcome 2 - 3% reduction in non-elective admissions in 2015/16	Planned savings (if targets fully achieved)		400
	Maximum support needed for other services (if targets not achieved)		200

Please list the individual schemes on which you plan to spend the Better Care Fund, including any investment in 2014/15. Please add rows to the table if necessary.

BCF Investment	Lead provider	2014/15 spend		2014/15 benefits		2015/16 spend		2015/16 benefits	
		Recurrent /£	Non-recurrent /£	Recurrent /£	Non-recurrent /£	Recurrent /£	Non-recurrent /£	Recurrent /£	Non-recurrent /£
Prevention									
Telehealth/ telecare		£ 87				£ 87			
Puffell and self care		£ 15				£ 15			
Falls Service		£ 50				£ 50			
Childrens Prevention		£ 250				£ 250			
Care Coordination									
Joint equipment		£ 533				£ 533			
Enhanced intermediate care and end of life		£ 725				£ 725			
Reablement assistants		£ 90				£ 90			
Stroke coordinator		£ 50				£ 50			
Maintaining and promoting independence									
Ward 8 Closure & Early Supportive Discharge Service		£ 252				£ 252			
Post Acute reablement		£ 215				£ 215			
Reablement		£ 436				£ 436			
Nursing home placements		£ 400				£ 400			
Care Homes improving quality		£ 50				£ 50			
Domicillary care to expediate discharge		£ 30				£ 30			
Intermediate Care (CCG contribution to LA)		£ 857				£ 857			
Intermediate Care (LA)		£ 1,000				£ 1,000			
Disabilities Facilities Grant						£ 407			
Carers		£ 210				£ 210			
Infrastructure									
Programme and Mgt support		£ 160				£ 210			
IT systems and single assessment		£ 80				£ 80			
Governance and reviews		£ 50				£ 50			
Social Care Capital Grant						£ 287			
Community Capacity Grant						£ 348			
Other									
Other / TBC		£ 72				£ 2,793			
Henley Suite						£ 247			
Foot care						£ 14			
Oaks EMI						£ 76			
Total		£ 5,612	£ -	£ -	£ -	£ 9,762	£ -	£ -	£ -

Outcomes and metrics

Please provide details of how your BCF plans will enable you to achieve the metric targets, and how you will monitor and measure achievement

1. We aim to reduce the number of people over 65 entering residential and nursing care by our improved performance of our suite of intermediate care services to be developed as part of this plan as well as the work of the integrated care teams and their focus on meeting the needs of older people with complex needs. 2. Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services- For this metric we plan to increase the number of people who are

For the patient experience metric, either existing or newly developed local metrics or a national metric (currently under development) can be used for October 2015 payment. Please see the technical guidance for further detail. If you are using a local metric please provide details of the expected outcomes and benefits and how these will be measured, and include the relevant details in the table below

na - For this indicator we have chosen a local indicator which ties into the CCG overall strategy to measure quality outcomes in patients with long term conditions.

For each metric, please provide details of the assurance process underpinning the agreement of the performance plans

If planning is being undertaken at multiple HWB level please include details of which HWBs this covers and submit a separate version of the metric template both for each HWB and for the multiple-HWB combined

N/A

Please complete all pink cells:

Metrics		Baseline*	Performance underpinning April 2015 payment	Performance underpinning October 2015 payment
Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000 population	Metric Value	801.5	N/A	721.4
	Numerator	105		100
	Denominator	13100		13878
		(Apr 2012 - Mar 2013)		(Apr 2014 - Mar 2015)
Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services <i>NB. The metric can be entered either as a % or as a figure e.g. 75% (0.75) or 75.0</i>	Metric Value	95.20	N/A	95.00
	Numerator	40		65
	Denominator	40		66
		(Apr 2012 - Mar 2013)		(Apr 2014 - Mar 2015)
Delayed transfers of care (delayed days) from hospital per 100,000 population (average per month) <i>NB. The numerator should either be the average monthly count or the appropriate total count for the time period</i>	Metric Value	8.3		8.3
	Numerator	9		9
	Denominator	103550	Apr - Dec 2014 (9 months)	103550
		(Apr 2012 - Mar 2013)	Jan - Jun 2015 (6 months)	
Avoidable emergency admissions (average per month) <i>NB. The numerator should either be the average monthly count or the appropriate total count for the time period</i>	Metric Value	172.3	165.4	163.7
	Numerator	2933	1460	1465
	Denominator	141838	147091	149145
		(Apr 2012 - Mar 2013)	Apr - Sep 2014 (6 months)	Oct 2014 - Mar 2015 (6 months)
Patient / service user experience <i>The national metric (under development) is to be used</i>			N/A	
		(State time period and select no. of months)		(State time period and select no. of months)
Local measure <i>Please give full description Average EQ-5D (health related quality of life) score for people reporting having one or more long-term conditions. Specification per the national GP Survey.</i>	Metric Value	75.1		76.0
	Numerator	743		752
	Denominator	990	(State time period and select no. of months)	990
		(Apr 2012 - Mar 2013)	(State time period and select no. of months)	(State time period and select no. of months)