Appendix 1 – Better Care Fund Scheme Plans 2017-19

Q1 Update – June 2018

Bath & North East Somerset Council

NHS Bath and North East Somerset Clinical Commissioning Group

Assistive Technologies

	Update	Status	iBCF
Ref: **14** Name: **Assistive Technologies** Commissioner: **Vicky Roper**	Following agreement with LGA to extend the pilot and IG agreement achieved for all three of the final suppliers (Canary, 3 Rings, and Connected Care Solutions), the pilot commenced in April with the use of Canary and 3 Rings sensor systems. The Ethel tablets from Connected Care Solutions then launched in June. All three were used across both MSN and Keynsham Reablement teams, although variance in levels of team engagement was noted. Data collection continued until the end of July, which has been collated and a report will be presented to the Adult Care & Health Programme Board in September. Initial findings have shown there is qualitative benefit in using assistive technologies, as well as anecdotal reports of efficiencies within the Reablement team practice, but that this has not been reflected in a reduction in care package costs. A second phase in assessing suitable assistive technologies across the wider Council is also due to commence in September, with the Business Case being approved by the Goods and Services Panel to continue to commission the TSA to support us as industry experts. The final report from this work is expected in December.		

Enablers for Integration

	Update	Status	iBCF
Ref: **7b** Name: **Community Equipment** Commissioner: **Ryan Doherty**	The community equipment project is currently progressing well, albeit against overdue deadlines. A commissioning lead is now in place, who is supporting the project lead and seconded occupational therapist . An options paper is being developed, which outlines the short term proposals for community equipment provision within BaNES, alongside setting out the timelines and governance arrangements of developing a longer term vision for community equipment provision. This option paper is due to be presented at the Joint Commissioning Committee in Nov 18.		

Transfer of Care

	Update	Status	iBCF
Ref: **23** Name: **Home First** Commissioner: **Vincent Edwards**	The 7 day Home First (HF) service continues to have a positive influence on the rate of DTOCs in Q1, which overall shows a further small reduction during the quarter. Discharges into HF were lower towards the end of Q1 but local data indicates that these have increased again in Q2. Discharges into HF on Fridays have increased, offsetting a decrease in weekend discharges as compared to 2017/18. Despite an increase during June, the average time from referral to discharge fell compared to Q1. Local data shows that the June increase has now reduced back to previous levels. The remit of HF has been included within the reablement specification (now agreed) and performance measures, which are nearing completion. A business case for HF expansion has been agreed which secures additional funding for Q3 and Q4 of 2018/19.		☑
Ref: **23d** Name: **Discharge to Assess Beds** Commissioner: **Ryan Doherty**	The beds, which opened in January 2018, are continuing to be well utilised and support system flow, contributing to reduced delayed transfers of care for some of the most common delays, namely awaiting care home placements. To date, there have been 20 admissions to the beds, with 15 discharges. The initial outcomes of the discharges have been positive, with 33% of discharge destinations being home with either support or in some case no additional support which is greater than was initially expected with this bed base.		☑
Ref: **27** Name: **Extended Discharge (CHS)** Commissioner: **Caroline Holmes**	Care Home Selection (CHS) have been commissioned to provide support in identifying and brokering placements for LA funded, self-funded and CHC funded individuals within residential and nursing homes, alongside packages of care (POC) in the individual's own home. This has been in operation since in Nov 2017 and to date has helped place 206 individuals. Initially the service level agreement was to support 20 placement per month, however since July 2018 this has be increased to 25 placements per month, with average time to date from referral to placement is 6 days. This provision has significantly helped improve the time taken to identify placements and POC's and therefore has supported a reduction in delays in this regard. Finally such provision has also helped support the placement at the LA's Fair Price of Care (FPOC) rates in over 70% of placements for the Council.		☑

Key:

- Not Started
- In Progress but overdue
- In Progress
- Complete

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Ref: **28** Name: **Trusted Assessor** Commissioner: **Karen Green**	This scheme is currently within its implementation phase, with specific reference to the recruitment to the trusted assessor post. To date there have been challenges in identifying a suitable candidate for the post through usual channels, therefore discussions are taking place as to whether candidates can be seconded from a partner organisation. Once in post, the post holder will be supported with a robust induction, allowing them to build relationships with care home providers to support their assessments of existing or new residents in a timely manner.			

Integrated care planning

	Update	Status	iBCF
Ref: **13** Name: **Strengths-based Working** Commissioner: **Helen Wakeling**	All milestones are complete and work on 3 Conversations is advancing. Two innovation sites were using the model at the end of Q4. Further innovation sites in North East Somerset, the Review team and an expansion in the Bath team were planned for May. There has been a high level of engagement from staff across the Council, Virgin Care and AWP with this work which has ensured that dependencies have been identified at every stage. Data from the first innovation sites indicates that people are being responded to within 2 days and that only a small number of people have required long term support.		

Intermediate Care services

	Update	Status	iBCF
Ref: **3** Name: **Integrated Reablement** Commissioner: **Vincent Edwards**	Virgin Care has now concluded its internal review of their current reablement service and are compiling the findings for commissioners to review. The service is operating under an interim service specification and revised key performance indicators (KPIs) which are nearing completion and which will show a clear indication of the effectiveness of the service. The revised KPIs enable performance to be measured consistently across Virgin Care and homecare partners. This is supported by an agreed standard operating model between all reablement providers. The findings of independent specialist researchers on outcomes based commissioning intentions for reablement inform governance and service design activity taking place during Q3. The Reablement and Domiciliary Care Steering Group continue to manage the development of the service.		
Ref: **4** Name: **Falls Response** Commissioner: **Kate Parkins**	The scheme ensures that individuals who fall, or who are at risk of falling, are identified, assessed and referred to the appropriate services for the care and intervention they require. The scheme has been successful in reducing non-elective admissions as an average of 80% of patients would otherwise have been conveyed to ED without the scheme in place. Feedback from service users and staff has been very positive. The funding for the scheme in 18/19 has been agreed by JCC at £289k. The increase is mainly due to the national pay re grading for paramedics plus the increased overhead costs submitted by providers. An additional £23,715 has been released to run a pilot to increase OT staff capacity to improve cover in core hours and increase the number of patients seen per day from July 2018		

Early Intervention

	Update	Status	iBCF
Ref: **9** Name: **Social Prescribing** Commissioner: **Basil Wild**	The first quarter monitoring shows there is no one prescribing route which stands out in terms of frequency, although Wellbeing College had the most onward referrals (8). The number of clients referred during Q1 was 81, slightly above the requirement of 75. In terms of DHI's outcome star, 87.5 % of MyScript clients achieved a positive outcome as a result of the intervention. 93% of clients wanted the in-depth rather than just the signposting service. The highest number of onward interventions accessed as a result of the social prescription was for self-management activities (31%). Two key issues have been identified:- a) All GP practices made a decision for this year to charge a standard rate for use of rooms within the practices. This has had a large impact on the service financially. Mitigating actions are being explored. b) Secondly, the service has noted a significant increase in referrals from clients experiencing suicidal thoughts or with a recent suicide attempt. This has presented some difficulties for staff, and may be inappropriate referrals, but the positive impact the service has had on those individuals is recognised. The service has exceeded all the targets set for 2017/18 by a wide margin.		

Key:
- Not Started
- In Progress but overdue
- In Progress
- Complete

Appendix 2 – Better Care Fund Scheme Plans 2017-19

Q1 Update – June 2018

Bath & North East Somerset Council

NHS Bath and North East Somerset Clinical Commissioning Group

Residential placements

		Update	Status	iBCF
Ref: **19**	Name: **NMW/Sleep in**	Uplifts of 3.5% had been applied to all packages of care (with a sleep in) in 17/18. Very little challenge from providers with regard to our approach, however a number of providers noted significant cost pressures. This is likely to remain a challenge in 2018/19 and therefore potential inflationary uplifts for the next year may need to be explored.		☑
Commissioner: **Mike MacCallam**				
Ref: **21**	Name: **Community Resource Centres**	Capital improvements to the three Community Resource Centres continue with the addition of clinical areas and general refurbishment. The capital improvements have been slow to complete and this scheme is rate accordingly. Combe Lea is currently in the process of being registered for nursing care with the CQC and will then be able to offer nursing dementia placements which are in high demand across B&NES.		☑
Commissioner: **Karen Green**				
Ref: **22**	Name: **Transition of Extra Care**	Local information suggests that that all sites continue to be above the acceptance threshold for occupancy. However updated data on occupancy levels for Q1 and Q2 is awaited. Q1 update showed that Hawthorns Court is above the target with St John's only marginally below, showing an improvement compared to Q3. The overall occupancy rate has held at Q3's 93% in Q4. The contract with Sirona has now been incorporated under the prime Community Services contract has taken place during Q1 2018-19 as of Q4 2017/18. An initial indicative timetable and scope for developing the ECSH service delivery model will be requested from Virgin care commissioners during Q3.		☑
Commissioner: **Vincent Edwards**				

Other

		Update	Status	iBCF
Ref: **17**	Name: **Fair Price of Care**	The investment through the Better Care Fund aims to ensure that the older people's care homes market in B&NES is funded sustainably and in line with the Council's legal commitments. The Council's Fair Price of Care (FPOC) position is updated annually and work to update for 2019/20 commences in Q3. Further to the publication of the market position statement, the pause on the development of policy positions regarding FPOC continues while the review of the Council's website is concluded. Care Home Selection show continued strong performance in increasing the percentage of beds purchased at FPOC. Council Finance are currently analysing more recent data to establish and updated position on the impact of CHS activity. This is against a context of significant budget pressure caused by the number of placements that have been paid above the FPOC rate previously. The Council has recruited a Brokerage Manager, starting in September for a 9 month interim role, to improve the negotiation capacity for more complex placements and care packages in addition to developing long term proposals on brokerage in B&NES.		☑
Commissioner: **Vincent Edwards**				
Ref: **20**	Name: **Support Planning and Brokerage**	The rollout of an ebrokerage system has been postponed to ensure that any system used is fit for purpose in the short term but also future proofed. However, a brokerage manager has been recruited and will be in post from September 2018. Over Q1 brokerage support has been provided by Care Home Selection for 20 Council social care funded placements and this has contributed to reducing delayed transfers of care. (Please also refer to scheme 27 on slide 1). The social care performance is currently being managed through an action plan with agreed performance trajectories. Performance is beginning to return to contracted expectations but we are anticipating some slow down in performance due to a care home closure which has required assessment resources to be redirected.		☑
Commissioner: **Helen Wakeling**				
Ref: **26**	Name: **Delirium Pathway**	The delirium pathway is currently in its scoping and planning stage. The premise of the pathway is to support individuals with a reversible delirium to return home at an earlier point with intensive care support and RUH virtual ward oversight. This aims to support a predicted 4/5 patients per month to return home earlier to enable their physical and cognitive reablement to take place in the most appropriate setting. Initial discussion have begun regarding the care support needed to provide this pathway, alongside a system wide away day, which was held on 16/8/18, to develop the pathway map.		☑
Commissioner: **Ryan Doherty**				

Key:

- Not Started
- In Progress but overdue
- In Progress
- Complete

Bath & North East Somerset Council

Better Care Fund Scheme Plans 2018-19

New Scheme Template: Mental Health Review

NHS Bath and North East Somerset Clinical Commissioning Group

☑ IBCF

BCF Scheme ref: **24**

SCHEME

Name: **MENTAL HEALTH REVIEW**

Most of the health and social care services within Bath & North East Somerset were contracted to the Prime Provider, Virgin Care, on 1st April 2017. However, a decision was made not to follow the same course at this stage for those community mental health services directly commissioned from AWP. A contract is in place for these services until March 2019.

The mental health review presents Commissioners with an opportunity to build on the Your Care Your Way recommendations, in order to achieve a truly transformational and long term change in mental health and wellbeing provision for the benefit of its target population in Bath and North East Somerset.

The Review will enable commissioners to achieve: a holistic approach within responsive services, integration of physical and mental health and reduction in stigma; establishment of links with other pathways, such as the Wellness Service; a better flow, and easier discharge from acute services into appropriate community based resources; better pre-crisis support in the community; effective services which work together and share resources for the benefit of service users and the strengthening of a preventative approach wherever possible.

Commissioner: N/A (to be appointed)

Provided by: AWP, Virgin Care and Third Sector Providers

FINANCE

Area of Spend	Planned Expenditure		New or Existing Scheme	Funding Source
	2017/18	2018/19		
Social Care	N/A	£130,000	New	IBCF

MILESTONES 2018/19

Status	Action	Q1	Q2	Q3	Q4
●	Workstreams in progress and delivering against objectives				
●	Service specifications complete				
●	Provider Model Developed				
●	Evaluation of Provider Models				
●	Consultation				
●	Full Business Case				
●	Contracts in place				

RISKS / INTERDEPENDENCIES

Risks:

- No capacity for slippage of timescales/extension of contract, mitigated by Well defined project plan and monitoring against it
- Ensuring appropriate representation in each workstream from people with lived experience
- Appetite of provider market to support delivery
- Commissioning and provider capacity to support delivery and implementation

Interdependencies:

- Delivery of core Virgin Care Transformation priorities including Care Co-Ordination and Integrated Care Record are key enablers of the model.
- Alignment to emerging STP model is important to ensure all commissioning at scale opportunities are fully explored

Better Care Fund Scheme Plans 2018-19

Extended Discharge (CHS)

Bath & North East Somerset Council

NHS Bath and North East Somerset Clinical Commissioning Group

☑ Grant ☒ Council savings

BCF Scheme ref: **27**

SCHEME

Name: **EXTENDED DISCHARGE (CHS)**

CHS have been commissioned to provide support in identifying and brokering placements for LA funded, self-funded and CHC funded individuals within residential and nursing homes, alongside supporting the sourcing of packages of care (POC) in the individuals own home. This has been in operation since in Nov 2017, with the initial service level agreement to support 20 placement per month split between the RUH and the Community Hospitals, however since July 2018 this has be increased to 25 placements per month. This provision aims to significantly improve the time taken to identify placements and POC's and therefore support a reduction in delays in this regard. Finally such provision also aims to support the placement at the LA's Fair Price of Care (FPOC) rates.

Commissioner: **Caroline Holmes**

Provided by: **Care Home Selection (CHS)**

FINANCE

Area of Spend	Planned Expenditure		New or Existing Scheme	Funding Source
	2017/18	2018/19		
Social Care	£68,000	£230,000	Existing	Grant

Key:

- Not Started
- In Progress but overdue
- In Progress
- Complete

MILESTONES 2018/19

Status	Action	Q1	Q2	Q3	Q4
	Ongoing provision of discharge support from CHS				
	Agreement to increase to 25 per month				
	On going contract meetings to review outcomes				
	Evaluation of the scheme and decision on long term utilisation				

Notes:

RISKS / INTERDEPENDENCIES

Risks:

- Initial risks included a difficulty in meeting the 20 per month target and also challenges around CHS building effective relationships with families and care providers. However, this risk has not materialised as CHS have based themselves with the Integrated Discharge Service (IDS) which has allowed them to receive a high level of referrals. Additionally, CHS have been mindful of the need for effective relationships and have taken concerted efforts to build these with the IDS team, ward staff, patients and their relatives and care providers.
- As the CHS team have been successful in supporting a high number of placements, which is recognised by the increase to 25 placement per month, there is a risk that they may go beyond the agreed number of placements per month, resulting in a cost pressure for the iBCF. This risk is being mitigated by agreeing a specified limit of referrals which will ensure placements will not exceed 25 per month.

Interdependencies:

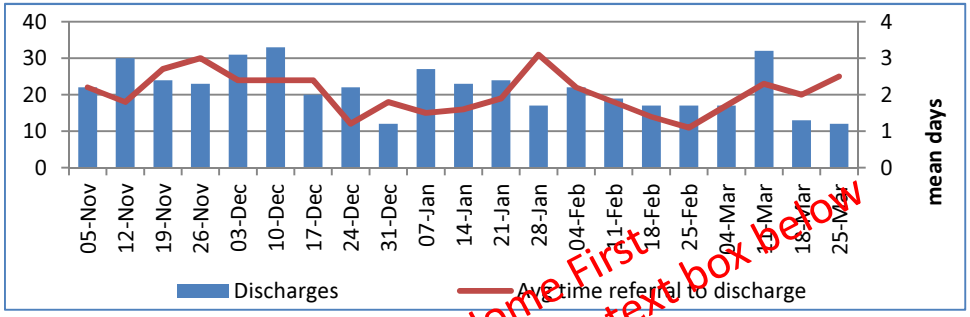
- RUH – CHS are embedded within the IDS team and also work closely with ward level staff to support discharge.
- Care Providers – CHS will be working closely with care providers to identify appropriate placements at a FPOC rate and support placement in a timely manner.

2017-19 BCF Scheme Plans

Extended Discharge (CHS)

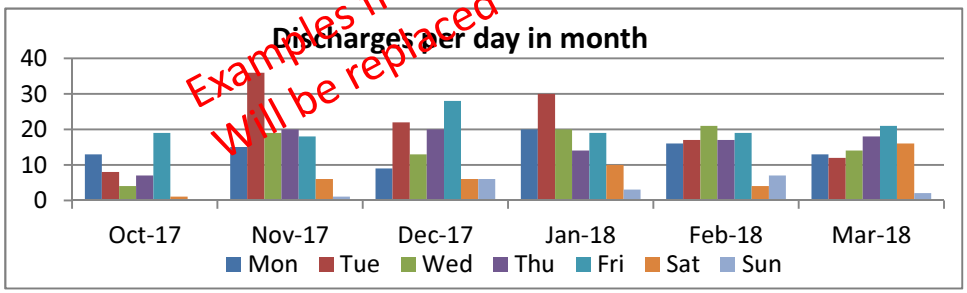
MEASURE

Reduce the discharge time (recent performance)



Examples from Home First – will be replaced – see text box below

Discharges per day



Graphs will cover speed of service and number of placements per month.

Measure and improve outcomes for service users

We're developing measures as part of the contract to ensure the service delivers improved outcomes for the service users and the health and social care system, such as;

- Number of referrals into the service.
- Number of placements
- Breakdown of reason for referral
- Timescale from referral to placement
- % of placements at FPOC rates.

We will also gather feedback from people using the service, their families, carers/representatives, which will also support service development.

NATIONAL METRICS

This scheme will support the national metrics by supporting people to be discharged from hospital quickly by finding appropriate placements.

- Reduce non-elective admissions
- **Reduce delayed transfers of care**
- Reduce permanent residential admissions
- Increase success of reablement

Better Care Fund Scheme Plans 2018-19

New Scheme Template: Trusted Assessor

Bath & North East Somerset Council

NHS Bath and North East Somerset Clinical Commissioning Group

☑ Grant

BCF Scheme ref: **28**

SCHEME

Name: **TRUSTED ASSESSOR**

This pilot scheme relates to the employment of a suitably qualified individual who will be able to act as an independent trusted assessor for residential and nursing homes, undertaking assessments of both new and existing residents on care homes behalf prior to discharge from hospital. The trusted assessor in the initial period will undertake a comprehensive induction with care home providers within BaNES to build relationships and to collaboratively develop trusted assessment paperwork. The trusted assessor will then begin undertaking assessments on behalf of homes, ensuring they are undertaken in a timely manner and therefore expedite discharge, as individuals are often waiting for assessments for a number of days. It is anticipated that once the trusted assessor is place, they will build up the number of assessments undertaken, aiming to get to around 20-25 per month once fully established.

Commissioner: **Karen Green**

Provided by: Appointed Trusted Assessor

FINANCE

Area of Spend	Planned Expenditure		New or Existing Scheme	Funding Source
	2017/18	2018/19		
Social Care	N/A	£130,000	New	Grant
	N/A			
	N/A			

Key:

- Not Started
- In Progress but overdue
- In Progress
- Complete

MILESTONES 2018/19

Status	Action	Q1	Q2	Q3	Q4
	Develop proposal and agree funding				
	Recruit to the trusted assessor role				
	Trusted Assessor to undertake induction around care homes				
	Undertake assessments on behalf of homes				
	Evaluation of pilot				

Notes:

RISKS / INTERDEPENDENCIES

Risks:

- There is a risk that a suitable candidate cannot be found. Currently there has been noted difficulties in employing a suitably skilled candidate through an open recruitment process, therefore mitigating alternatives are being explored which includes secondment from a partner organisation. If this risk is not resolved, the pilot will not be able to be implemented.
- There is a risk that care homes will not be willing to engage in the pilot and would continue to undertake their own assessments. Therefore this risk will be mitigated by ensuring a compressive induction period is planned into the project timelines, allowing the trusted assessor to build collaborative relationships.

Interdependencies:

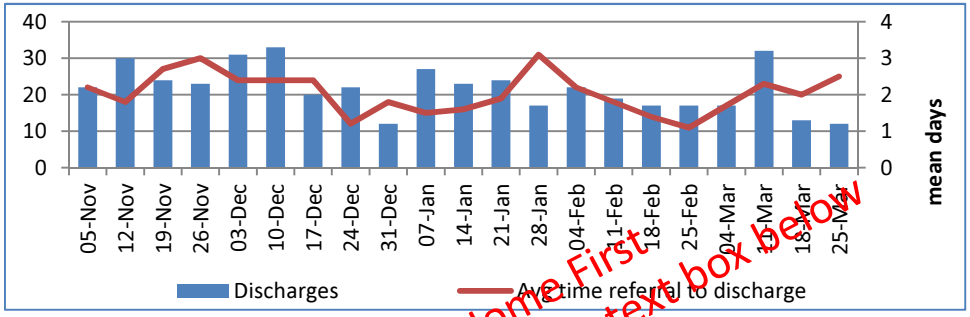
- RUH and Community Hospitals – from which individuals will be being assessed.
- Care Providers – for whom the trusted assessor will be undertaking assessments.

2018-19 BCF Scheme Plans

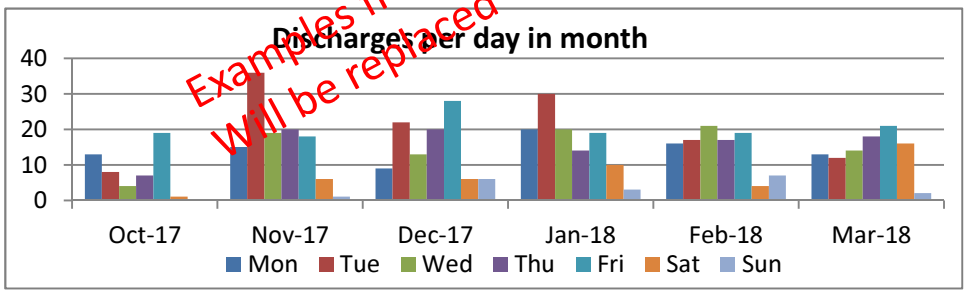
New Scheme Template: Trusted Assessor

MEASURE

Reduce the discharge time (recent performance)



Discharges per day



Examples from Home First – will be replaced – see text box below

Number of assessments undertaken per month

Average time from assessment to discharge per month.

Measure and improve outcomes for service users

We're developing measures to ensure the service delivers improved outcomes for the service users, such as;

- Number of referrals for assessment by the Trusted Assessor
- Number of assessments undertaken
- The time from assessment to discharge

We will also gather feedback from people using the service, their families, carers/representatives, which will also support service development.

Additionally, we will gain feedback from key stakeholders including the RUH and Care Home providers.

NATIONAL METRICS

This scheme will support the national metrics by supporting people to be admitted, or readmitted for current residents, to residential and nursing homes.

- Reduce non-elective admissions
- **Reduce delayed transfers of care**
- Reduce permanent residential admissions
- Increase success of reablement