Better Care Fund 2021-22 Year-end Template

4. Metrics

Selected Health and Wellbeing Board:

Bath and North East Somerset

National data may like be unavailable at the time of reporting. As such, please utilise data that may only be available system-wide and other local intelligence.

Challenges and Please describe any challenges faced in meeting the planned target, and please highlight any support that may facilitate or ease the achievements of metric plans

Support Needs

Achievements Please describe any achievements, impact observed or lessons learnt when considering improvements being pursued for the respective metrics

Metric	Definition		For infor	mation - Yo	ur planned	Assessment of progress	Challenges and any Support Needs	Achievements
		performance as reported in 2021-22			in 2021-22	against the metric plan for		
		planning			planning	the reporting period		
	Handan and branchadters for about					Not on track to meet target	The annual result was 580.3 against the plan	With the limited planning information noted
Avoidable	Unplanned hospitalisation for chronic ambulatory care sensitive conditions						target of 560. Planning was challenging	in 'Challenges and any Support Needs', the
admissions	(NHS Outcome Framework indicator	560.0			because of limited baseline data, plus	year-end result of being 3.6% over the		
aumissions	2.3i)						COVID's impact on the baseline meaning that	planned level is closer to the target than
	2.31)						the baseline was itself not representative of	might reasonably have been expected. Peaks
		14 days or	14 days or	21 days or	21 days or	Not on track to meet target	Q3 performance was 0.3% over the planned	While performance has been below the
	Proportion of inpatients resident for:	more	more	more	more		level but Q4 was further from target at 12.4%	targeted levels, a number of schemes
Length of Stay	i) 14 days or more	(Q3)	(Q4)	(Q3)	(Q4)		for the 14+ days measure. Increased waits for	
	ii) 21 days or more						Pathway 2 care have impacted on	discharge performance including: Home First,
		10.6%	10.5%	5.8%	5.7%		performance in Q4 in RUH, despite	Flow Support including Trusted Assessor, and
						On track to meet target	As noted in the reablement comment below,	Performance for the year was better than
Discharge to	Percentage of people who are						there has been an increase in complexity of	target at 91.6%.
normal place of	discharged from acute hospital to	90.7%			patients discharged. Despite this, the			
residence	their normal place of residence						proportion discharged to home has remained	
							above target.	
				Not on track to meet target	There were 9 admissions above the targeted			
	Rate of permanent admissions to						· ·	below or within 10% of the targeted number
Res Admissions*	residential care per 100,000				546		than target for 6 months, there were peaks in	of admissions.
	population (65+)						admissions in June 21, October 21 and	
							February 22 which were significant in	
	Proportion of older people (65 and	85.2%				Not on track to meet target	Performance was below target at 78% in Q4.	The proportion of people discharged into
	over) who were still at home 91 days						Factors in the rate include: an increase in end-	<u> </u>
Reablement	after discharge from hospital into						of-life patients using the service and an	offered to as many people as possible. This
	reablement / rehabilitation services						increase in people with complex needs, many	may impact on performance, for the reasons
	, services						of whom returned to hospital as needs	noted in the 'Challenges' box.

	after discharge from hospital into reablement / rehabilitation services	85.2%	increase in people with complex needs, many	offered to as many people as possible. I may impact on performance, for the rea noted in the 'Challenges' box.
* In the absense of	7021-22 nonulation estimates (due to t	ne devolution of North Northamotonshire and West N	Northamptonshire) the denominator for the Recidential Admissions me	otric is hased on 2020-21 estimates

Checklist Complete: