

## Finance - Summary

*For each contributing organisation, please list any spending on BCF schemes in 2014/15 and the minimum and actual contributions to the Better Care Fund pooled budget in 2015/16.*

Organisation	Holds the pooled budget? (Y/N)	Spending on BCF schemes in 14/15	Minimum contribution (15/16)	Actual contribution (15/16)
Local Authority #1	PCC	661	11,643	11,643
CCG #1				
CCG #2				
Local Authority #2				
etc				
<b>BCF Total</b>				

Including capital

*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 full implementation of schemes will take place in 2015-16. It is anticipated that through the remainder of 2013-14 and 2014-15 schemes will be developed into full business cases so that planned improvements will be substantiated. Robust programme management is being put in place to ensure this is achieved. As part of the planning process, contingency arrangements will be developed to cover the possibility and these will be outlined more specifically in the April submission .

Contingency plan:		2015/16	Ongoing
<b>Outcome 1</b>	Planned savings (if targets fully achieved)	To be completed for the April submission - see comment above.	
	Maximum support needed for other services (if targets not achieved)	To be completed for the April submission -	
<b>Outcome 2</b>	Planned savings (if targets fully achieved)	To be completed for the April submission -	
	Maximum support needed for other services (if targets not achieved)	To be completed for the April submission -	

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
Scheme 1 - Protecting Social Care	PCC					3405		1700	
Scheme 2 - Enhanced Reablement Service						4427		4427	
Scheme 3 - Enhanced Psychiatric Liaison and Community Support						633		475	
Scheme 4 - Prevention and Community Interventions						1264		1264	
<b>2014-15 Schemes</b>									
BCF Programme Manager	PCC	100		0		100		0	
BCF Programme Support	PCC	61		0		61		0	
Assistive Technology	PCC	150		75		150		250	
Rehabilitation / Reablement (Friary Court)	CCG	100		50		100		100	
Falls Prevention	CCG	100		50		100		100	
Reablement	PCC	150		200		150		250	
<b>Capital schemes</b>									
DFG capital									
- Adults	PCC					661		661	
- Children Services	PCC					150		0	
Capital Grant - various schemes	PCC					442		0	
<b>Total</b>		661		375		11643		9227	

10390 If excluding capital

**Notes**

1. Benefits figures are rough indicative figures only and will be revised for the April submission, when more work on business cases for each scheme has been done.
2. Benefits on capital are not assumed for 2015-16, since there will be a time lag from use of capital to delivery of benefit.

### Outcomes and metrics

For each metric other than patient experience, please provide details of the expected outcomes and benefits of the scheme and how these will be measured.

**Permanent admissions of older people into residential care.** Peterborough has very low rates of supported admissions. During 2012-13 150 people were supported into permanent residential care - 498.5 per 100,000 of the population, just over half the rate in Cambridgeshire (818.9 per 100,000). Although the evidence shows that Peterborough has successfully minimised avoidable admissions to care homes, there is evidence of capacity issues within the system, particularly in relation to specialist dementia care and nursing care. It is projected that the trend of decline in admissions will not continue in future years – but a stable level of admissions is the goal. The care bill will bring an increase in numbers supported with the introduction of higher capital thresholds and a cap on self-funders contributions

**Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services** - Reablement packages have been provided by PCC for the last three years, with intermediate care and hospital at home having been in place longer. Currently the 91 day outcome measure is only collected for the intermediate care service and this has shown an increase in people receiving the service but a deterioration in independence outcomes. The BCF proposal is to develop and enhance the reablement service and to build in a measure of the outcome at 91 days for this service also. The target is to have a greater percentage of people receiving reablement services following a stay in hospital but also to avoid hospital admissions and an increase in the percentage still living at home after 91 days.

**Delayed transfers of care from hospital per 100,000 population (average per month)** - Peterborough has a very low rate of delayed transfers of care for social care reasons for 2012/13 there were 0.6 per 100,000 all of which were from non acute mental health beds, we were ranked 8th nationally. All reason delays are higher Published figures for 2012/13 indicate that 6.8 per 100,000 adults aged 18+ living in Peterborough had delayed transfer of care – an average of 10 every week. Comparison to other geographies indicate lower rates of delayed transfers relative to the rest of the country, the region, UA which were 9.4, 10.5 and 9.1 per 100,000 respectively, Peterborough ranks 53/150. Proposals within the BCF to align front door and reablement pathways should help to reduce all reason delays whilst maintaining minimal social care delays.

**Avoidable emergency admissions (composite measure) - per 100,000 population** - Emergency admissions rates can be reduced by effective collaboration across the health and care system. A key factor for Peterborough will be the current procurement of community health services, and the new older peoples outcomes framework. We are also proposing to increase quality monitoring and professional support into care homes with a view to reducing the number of admissions from care provision. In 2012/13 out of 151 PCTs in England, where the top ranking (1st) performed best with lowest emergency bed days and admissions, Peterborough Peterborough ranked:

- 108th / 151 for mean length of stay for emergency inpatient admissions (5.1 days compared to 4.8 nationally and SHA);
- 66th /151 for emergency bed days for long term conditions per 1000 (425.2 per 1000 population compared to 458 per 1000 nationally);
- 94th /151 for the average rate of occupied bed days by patients admitted as emergencies per 1000 population +. For ambulatory care conditions, standardised admission rates per 1,000 population had declined over the last five years – from 18.2 to 15.2 per 1000 between 2008/9 and 2012/13: comparisons to the rates for England, the regional SHA, and its peers indicate admissions remained consistently higher in Peterborough over the same period.

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.

We propose to use the national metric currently under development. In 2012/13, 64.2% of adult social care clients were satisfied with the care and support they received from the PCC, which is similar to the satisfaction levels across the country. It is slightly but not significantly above satisfaction rates measured for the region.

The first carers' survey was carried out in 2012/13, and the findings indicate that 42.2% of carers were satisfied with the level of social services, similar to that at national level (42.7%), and slightly above that for the region (40%).

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

The work programmes aligned to BCF are under development as part of the finalisation of the programmes targets will be set for the programmes, aligned to the BCF metrics.

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

This template provides the detail for the Peterborough HWB.

Metrics		Current Baseline (as at....)	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	498.50	N/A	
	Numerator	125		
	Denominator	25075		
		( April 2012 - March 2013 )		
			( April 2014 - March 2015 )	
Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services	Metric Value	78.6%	N/A	
	Numerator	158		
	Denominator	201		
		( April 2012 - March 2013 )		
			( April 2014 - March 2015 )	
Delayed transfers of care from hospital per 100,000 population (average per month)	Metric Value	6.80%		
	Numerator	10		
	Denominator	140,415		
		(April 2012-March 2013)	( April - December 2014 )	( January - June 2015 )
Avoidable emergency admissions (composite measure) - per 100,000 population	Metric Value	2198.3		N/A
	Numerator	4097		
	Denominator	186372		
		( April 2012 - March 2013 )	( April - September 2014 )	
Patient / service user experience ASCOF 3A Overall satisfaction of people who use services with their care and support	Metric Value	64%		
	Numerator	327		
	Denominator	510		
		ASCOF Provisional April 2012 - March 2013	( April - September 2014 )	( October 2014 - March 2015 )
[local measure - please give full description ]	Metric Value			
	Numerator			
	Denominator			
		( insert time period )	( insert time period )	( insert time period )

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