Better Care Fund Board – performance update November 2016 (inc Month 6 16/17 data)

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Marianne Hiley, Better Care Fund Manager

BCF METRICS: Updated 15 November 2016 (inc Month 06 16/17 data)

Metric	RAG	Update
NEL admissions, general and acute, all ages per 100,00 population		 Revised data set from CSU indicates WAM BCF continuing to hit NEL target. Following unseasonal surge in Month 4, Month 5 CYP data showed significant fall in fever -related admissions for 0-5 year olds across all local CCGs /acute providers WAM – but followed by another surge in Month 6. Targetted programme in place across all GP practices to reinforce value of frequent flyer follow up and collaborative approach with family support teams. Additional leaflets made available for nurseries across RBWM. Positive impact of targetted approach to improving identification of patients at risk of CVD through improved checks for BP and AF and launch of new BHFT respiratory service in November
Proportion of older people (65+) who were still at home 91 days after discharge from hospital into reablement/ rehabilitation services		More detailed analysis of all STSR data with regular monthly updates confirms continuing performance better than 8% target with only 4.5% of patients not at home 91 days after reablement: Confirmation of increasing pressure on STSR from: Higher referral rates from GPs relating to hospital avoidance More hospital referrals on discharge – particularly for falls related conditions Significant increase in LTC as reason for referral increase in those resuming an existing package of homecare as their exit plan (discharge to care homes is reduced)
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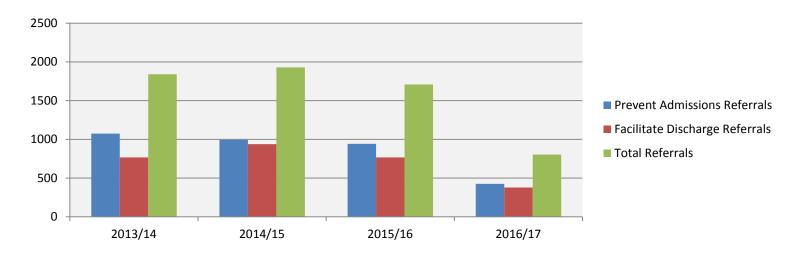
BCF METRICS: Updated 16 October 2016 (inc Month 05 16/17 data)

Metric	RAG	Update
Delayed transfers of care (adults 18+) from hospital per 100,000 population		Over plan for 16/17 based on national data update but this is for aggregated position across Frimley north and south. Frimley North, A&E Delivery Board (was Systems Resilience Group) leading winter resilience plan and programme of work including: Clarification of discharge pathway, 7 day services and transfer of care protocols Alamac data will drive local Wexham and Frimley south performance and approaches Local RBWM/WAMCCG action being taken to address nursing/residential home capacity on home by home basis as well as East Berkshire wide. Actions have significantly reduced DTOC since Month2/3 surge (See graph) Further proposals to develop concepts around: Trusted assessor role Discharge to assess GP liaison role
Number of Falls related NEL admissions		 Revised basis for data collation – new figures show falls related NELs exceeding target inspite of last years successes. Significant increase in 1 day LOS patients but good reduction in 0 LOS patients. Detailed analysis by practice/locality has highlighted systematic action plan priorities: Importance of relentless/systematic promotion of falls prevention services to all RBWM residents in all localities Valuable re-engagement with BHFT to make best use of RACC/Falls clinic for patients at risk Closer working with Wexham and complementary approaches to patients at risk in hospital and on discharge – promotion of KSSW services to ward matron planned Intelligent data project trialled in Datchet highlighted practice led opportunities to identify patients at risk of falls with multiple meds, dementia, Parkinsons Falls prevention promotion at Assistive technology event at Desborough school - 162 attendees including 35 Asian families Promotion of KSSW service with GPs, practice nurses, voluntary sector organisations, etc

BCF METRICS: Including Month 5 data 2015/16

Metric	RAG	Update
Permanent admission of older people (65+) to residential and nursing care homes, per 100,000 population		As at 6 th October we have had 44 and 40 admissions to nursing and residential care homes respectively, a total of 84 care home admissions. At current rates it is expected to have approx. 160 care home admissions in the year which is slightly above our target of 155. However, the trend continuing from last year, our net placements are in negative, so we are transferring out more residents compared to admitting them into care homes. 2016/17 20 New placements Net placements
Service User Feedback		Service User metric project successful undertaken with STSR team – Proposals to extend use of the model approach with r-outcomes in discussion – with recommendations to EB Digital pathway group\(via Mark Sellman) to adopt as an innovative toolkit across wider STP footprint

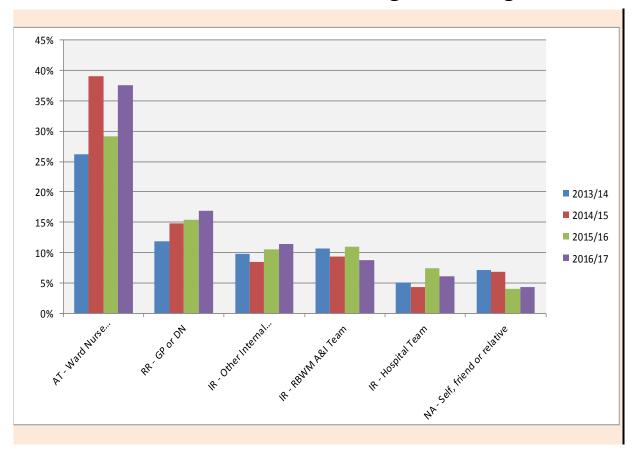
Pattern of total referrals to STSR to date compared to previous years



Year	2013/14	2014/15	2015/16	2016/17
Q1	495	448	396	389
Q2	430	463	444	415
Q3	462	506	457	0
Q4	454	513	413	0
Prevent Admissions Referrals	1074	993	943	425
Facilitate Discharge Referrals	767	937	766	379
Total Referrals	1840	1930	1709	804

Note: Numbers of patients referred does not reflect the increasing complexity of needs of service users

Breakdown of Referrals to STSR relating to discharge



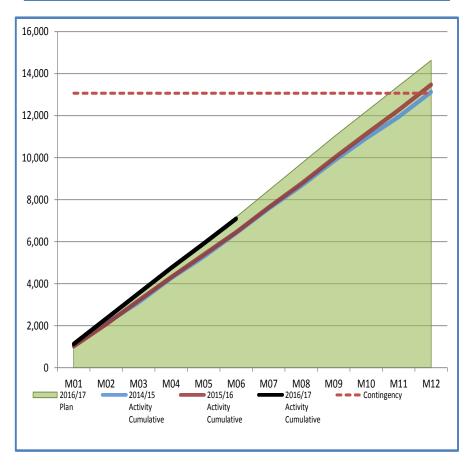
Significant increase in both hospital and GP/DN referrals as a proportion of the total number received

Referral Source	2013/14	2014/15	2015/16	2016/17
AT - Ward Nurse /Dr/Therapist/Discharge Coord	26.3%	39.1%	29.1%	37.6%
RR - GP or DN	11.8%	14.8%	15.4%	16.9%
IR - Other Internal RWBM Team	9.7%	8.5%	10.5%	11.4%
IR - RBWM A&I Team	10.7%	9.4%	10.9%	8.8%
IR - Hospital Team	5.0%	4.3%	7.4%	6.1%
NA - Self, friend or relative	7.1%	6.9%	4.0%	4.4%
Total	1839	1927	1709	804

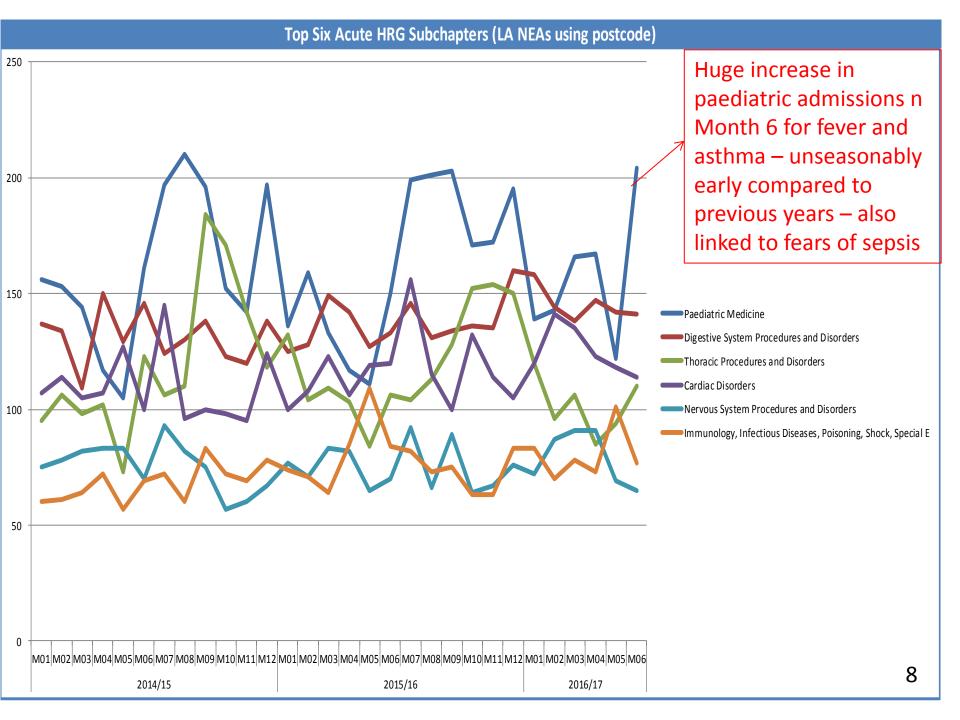
RBWM BCF Metrics – performance including Month 6 16/17

NEL admissions – continuing upward trajectory but on plan

RBWM HWB NEAs (cumulative)



Month	2014/15 Activity Cumulative	2015/16 Activity Cumulative	2016/17 Activity	2016/17 Activity Cumulative	2016/17 Plan	Variance	Contingency
M01	1,049	1,017	1,129	1,129	1,170	-3.6%	13,064
M02	2,113	2,067	1,202	2,331	2,341	-0.4%	13,064
M03	3,114	3,201	1,210	3,540	3,511	+0.8%	13,064
M04	4,268	4,301	1,202	4,742	4,731	+0.2%	13,064
M05	5,287	5,373	1,164	5,906	5,950	-0.7%	13,064
M06	6,409	6,445	1,185	7,091	7,170	-1.1%	13,064
M07	7,577	7,625			8,441		13,064



NHS Windsor, Ascot and Maidenhead CCG Under 5s A&E Frequent Flyers over Rolling Six Months (2016-04-01 to 2016-09-30)

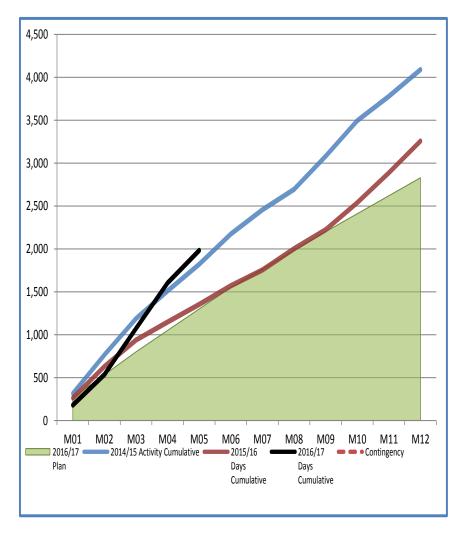
Dataset A&E <5yo FreqFlyers T

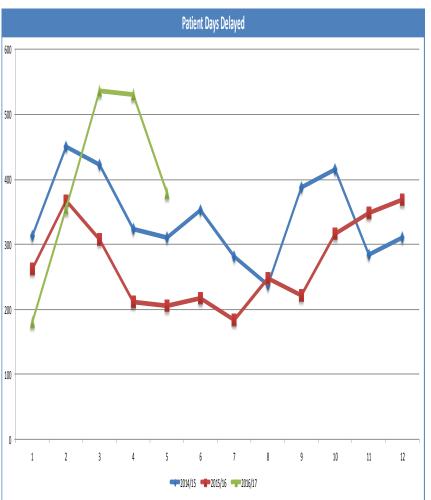
					Pts	Pts	
		Unique	Percentage	Total	2+	3+	Att Rate
	RegPop (0-4y)	Attendees	Attendees	Attendances	Att	Att	/1kPop
RADNOR HOUSE SURGERY AND ASCOT MED CTR	296	72	24.3%	98	19	4	331.1
DATCHET HEALTH CENTRE	588	100	17.0%	135	24	8	229.6
RUNNYMEDE MEDICAL PRACTICE	611	104	17.0%	136	25	5	222.6
LEE HOUSE SURGERY	395	68	17.2%	83	14	1	210.1
CLARENCE MEDICAL CENTRE	648	96	14.8%	126	26	2	194.4
SOUTH MEADOW SURGERY	938	140	14.9%	178	27	6	189.8
ROSS ROAD MEDICAL CENTRE	228	33	14.5%	43	7	2	188.6
ROSEMEAD SURGERY	398	59	14.8%	70	9	1	175.9
SHEET STREET SURGERY	469	61	13.0%	74	11	2	157.8
CLAREMONT HOLYPORT SURGERY	1,060	133	12.5%	167	25	6	157.5
THE CEDARS SURGERY	642	84	13.1%	98	11	3	152.6
LINDEN MEDICAL CENTRE	483	62	12.8%	73	9	2	151.1
REDWOOD HOUSE SURGERY	416	50	12.0%	60	9	1	144.2
CORDWALLIS ROAD SURGERY	300	35	11.7%	40	5	0	133.3
COOKHAM MEDICAL CENTRE	381	42	11.0%	48	5	1	126.0
THE SYMONS MEDICAL CENTRE	744	83	11.2%	93	7	2	125.0
WOODLANDS PARK SURGERY	219	23	10.5%	23	0	0	105.0
ASCOT MEDICAL CENTRE		2		2	0	0	
Not available		17		32	3	2	

All practices have requested frequent flyer data for further analysis and discussion with Health visitors and patients on a tailored and supportive basis

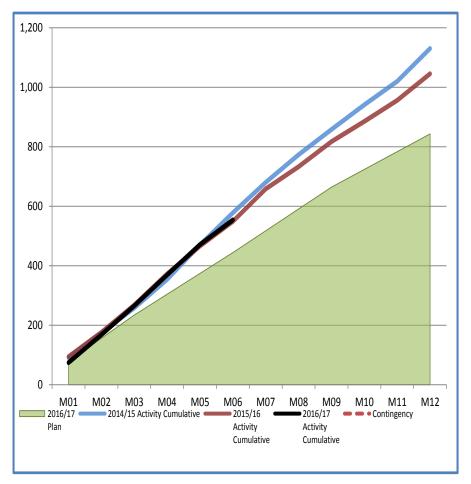
RBWM BCF Metrics – performance including Month 6 16/17 from national sources

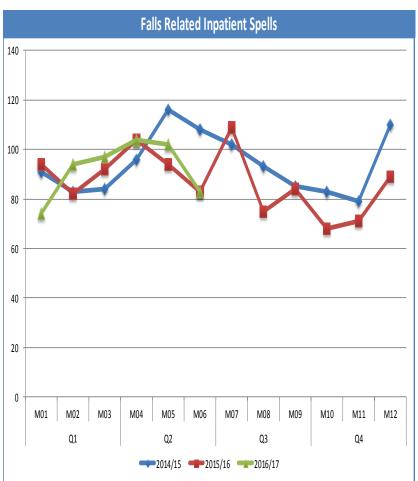
DTOC Days (cumulative)





Metrics – performance including Month 6 16/17 Falls related NEL admissions





Falls per 100K population/practice – wide variation (data included to Month 6 16/17)

Practices with fewer than 50 activity per 100k pop excluded from this list

Rate per 100k pop	Fiscal Year 📑		
Practice <u>IT</u>	2014/15	2015/16	2016/17
□ NHS Windsor, Ascot and Maidenhead CCG	1,313.4	987.8	522.2
THE SYMONS MEDICAL CENTRE	75.7	119.3	64.9
ROSS ROAD MEDICAL CENTRE	132.4	53.7	68.7
LEE HOUSE SURGERY	122.8	75.6	28.5
LINDEN MEDICAL CENTRE	82.5	93.3	46.2
CLAREMONT HOLYPORT SURGERY	115.7	61.4	35.7
WOODLANDS PARK SURGERY	65.0	97.1	15.9
REDWOOD HOUSE SURGERY	114.3	40.0	23.2
THE CEDARS SURGERY	52.5	76.2	43.1
SHEET STREET SURGERY	71.5	57.3	31.4
SOUTH MEADOW SURGERY	67.6	53.5	22.3
DATCHET HEALTH CENTRE	62.5	48.4	29.0
ROSEMEAD SURGERY	88.5	25.2	23.5
COOKHAM MEDICAL CENTRE	45.3	58.7	32.7
CORDWALLIS ROAD SURGERY	85.4	28.5	14.0
CLARENCE MEDICAL CENTRE	43.3	56.6	12.9
RUNNYMEDE MEDICAL PRACTICE	33.1	33.0	20.6
RADNOR HOUSE SURGERY AND ASCOT MED CTR	55.4	9.8	9.6
□ NHS Bracknell and Ascot CCG	128.2	152.0	65.5
KINGS CORNER SURGERY	75.2	79.6	13.1
MAGNOLIA HOUSE SURGERY	38.0	27.2	27.1
GREEN MEADOWS SURGERY	14.9	45.2	25.2
□ Other	32.1	19.4	7.8
Other	32.1	19.4	7.8

- Significant y-o-y Improvement in many
- Planned campaign for further localised support and falls prevention promotion with VCS, Fire Service and practice visits