

Year End Feedback on the Better Care Fund in 2016-17

Selected Health and Well Being Board:

Central Bedfordshire

**Part 1: Delivery of the Better Care Fund**

Please use the below form to indicate what extent you agree with the following statements and then detail any further supporting information in the corresponding comment boxes.

Statement:	Response:	Comments: Please detail any further supporting information for each response
1. The overall delivery of the BCF has improved joint working between health and social care in our locality	Agree	There has been closer working between Council and health colleagues to deliver greater collaboration and joint working across the system. More partnership approaches is also emerging in light of the STP and the development of 'place based' Transformation Boards. However there are still challenges for delivering what remains an ambitious Central Bedfordshire BCF Plan, particularly in relation to reducing unplanned admissions to hospitals. Multidisciplinary approaches with place based teams are being developed with an initial test bed in one of our localities and plan to roll out this approach across the rest of Central Bedfordshire later this year.
2. Our BCF schemes were implemented as planned in 2016/17	Neither agree nor disagree	Overall, there has been important progress our scheme areas such as multidisciplinary working and key areas such as falls, end of life care, and reduction in permanent admissions to care homes. Elements of the falls pathway improvement plan have progressed, some timescales have been revised. The Urgent Home Care and Falls Response Service has been providing a service to care homes in Central Bedfordshire since Nov 2016. Falls Champions are present in 31/34 care homes in CBC, 34/35 in Bedford. The Falls champions meet quarterly for education and peer support, these have been well attended throughout the year and included sessions on: Medicines Management, Dementia, Sensory Impairment, Getting up safely with and without equipment.
3. The delivery of our BCF plan in 2016/17 had a positive impact on the integration of health and social care in our locality	Agree	We continued to build on multidisciplinary working to deliver integrated outcomes to people with long term conditions, frail elderly and those patients most at risk of admission who would benefit from a more joined up response. The Caring Together pilot across two GP Practices in two localities, Chiltern Vale and West Mid Beds is continuing. Multidisciplinary place based teams are being developed across our localities. Additional investment to support timely and an improved co-ordinated discharge from hospital with ongoing community care is in place.
4. The delivery of our BCF plan in 2016/17 has contributed positively to managing the levels of Non- Elective Admissions	Disagree	Delivery remains challenging. A number of additional projects were mobilised to mitigate the challenge of reducing non elective admissions. Whilst some of the BCF projects, such as falls, end of life care and support to care homes have helped to reduce NELs, the numbers are still rising. A Public Health Review of non-elective admissions has been undertaken.
5. The delivery of our BCF plan in 2016/17 has contributed positively to managing the levels of Delayed Transfers of Care	Agree	Overall the number of delays due to social care reduced. Supported early discharge planning and coordination through joint working has delivered improvements and use of intermediate care beds in the community is having an impact.
6. The delivery of our BCF plan in 2016/17 has contributed positively to managing the proportion of older people (aged 65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services	Agree	The measure for most part of the year reported only on the Council's reablement service and did not include outcomes data in relation to rehabilitation/intermediate care provided through Community Health Services. Information is now available to provide a complete picture of the effectiveness of rehabilitation and reablement. Following an LGA led Peer Review of Rehab and reablement across Bedfordshire, there is widespread agreement to establish a more integrated approach and work has begun to deliver this.
7. The delivery of our BCF plan in 2016/17 has contributed positively to managing the rate of residential and nursing care home admissions for older people (aged 65 and over)	Strongly Agree	This measure is on track to meet target. There is greater scrutiny of packages of care to ensure that appropriate alternatives are explored. There is a greater focus on reablement and promoting independence which is enabling people to return to their own homes and that residential and nursing placements are appropriate. Step up and step down beds are being used to provide bed based rehabilitation. The Council is also investing in Independent living accommodation with Care for people.

**Part 2: Successes and Challenges**

Please use the below forms to detail up to 3 of your greatest successes, up to 3 of your greatest challenges and then categorise each success/challenge appropriately

8. What have been your greatest successes in delivering your BCF plan for 2016-17?	Response - Please detail your greatest successes	Response category:
Success 1	Delivery of key BCF Projects. Engagement with key delivery partners to deliver improved outcomes. Establishing falls champions in 94% of care homes, focus on prevention and the positive impact on the number of falls in some care homes. Early supported discharge for stroke patients is now live and has seen in reduction in length of stay in hospital as a result.	3. Collaborative working relationships
Success 2	Partnership working with Community Health Services provided has improved significantly and a joint associate director post has been established. There is wider engagement across the council and the recognition of this approach to secure improved outcomes for people through timely and appropriate access to better coordinated care and support in their localities. Recently, a Council's Overview and Scrutiny panel carried out an enquiry into Integration and delivery approaches for Central Bedfordshire. A report on the outcome of the Enquiry will be tabled at the Council's Executive later this year.	2. Shared leadership and governance
Success 3	Central Bedfordshire Health and Care System have a shared vision for integration. There is a clear focus on a locality approach with development of locality integrated care hubs. We secured both One Public Estate and ETTF funds to progress the plans for Integrated Health and Care Hubs.	1. Shared vision and commitment
9. What have been your greatest challenges in delivering your BCF plan for 2016-17?	Response - Please detail your greatest challenges	Response category:
Challenge 1	Data sharing and timely access to information for health and care services delivery across a wide range of provider organisations and different systems remains a challenge. Securing a shared care record across remains a key focus.	7. Digital interoperability and sharing data
Challenge 2	Ensuring that system responses reflect the wider patient flows and footprint of Central Bedfordshire residents, beyond the three acute hospitals in the STP footprint. Ensuring engagement with A&E Boards for example.	6. Delivering services across interfaces
Challenge 3	Developing integrated care pathways across the systems to deliver improved outcomes as well as ensuring better use of resources.	5. Evidencing impact and measuring success

**Footnotes:**

Question 11 and 12 are free text responses, but should be assigned to one of the following categories (as used for previous BCF surveys):

1. Shared vision and commitment
2. Shared leadership and governance
3. Collaborative working relationships
4. Integrated workforce planning
5. Evidencing impact and measuring success
6. Delivering services across interfaces
7. Digital interoperability and sharing data
8. Joint contracts and payment mechanisms
9. Sharing risks and benefits
10. Managing change
- Other