

6. Year End Feedback

Selected Health and Wellbeing 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	The overall delivery of BCF is improving the joint working between health and social care within the locality; and work will continue through 2018/19. This is evident in some of the success described later in this return and continuing work should help to begin address those areas not currently meeting the BCF targets.
2. Our BCF schemes were implemented as planned in 2017/18	Neither agree nor disagree	There has been progress on most of the schemes and others are in planning stages or about to be mobilised. Key projects related to the Out of Hospital Scheme have been successfully implemented e.g. multidisciplinary approaches in Central Bedfordshire localities; implementation of the Red Bag Scheme and introduction of a Hydration project in Care Homes.
3. The delivery of our BCF plan in 2017/18 had a positive impact on the integration of health and social care in our locality	Agree	The delivery of the BCF plan through 2017/18 has had a positive impact on the integration of health and social care within the locality; and will continue through 2018/19.
4. The delivery of our BCF plan in 2017/18 has contributed positively to managing the levels of Non-Elective Admissions	Agree	Work is ongoing in areas where there are higher rates of emergency admissions, with a particular focus on proactively managing people with long term conditions. Through 2017/18 there has been minor fluctuations in the rate of non-elective admissions. Data as at February indicates a rate of 820.24 per 100,000, this is lower than as at April 2017. Despite not meeting the target threshold, this is demonstrating that the support given to the multidisciplinary teams (Caring Together project) and the investment in community capacity supporting the primary care home model is enabling early intervention, and proactively managing people in the community.
5. The delivery of our BCF plan in 2017/18 has contributed positively to managing the levels of Delayed Transfers of Care	Strongly Agree	Following a self-assessment against the High Impact Change Model; work has taken place against the action plan to deliver improvements in key areas; specifically, out of hospital services and enhanced care in care homes.
6. The delivery of our BCF plan in 2017/18 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	Strongly Agree	Work is progressing to manage the proportion of older people still at home 91 days after discharge. Throughout the year there have been successful examples of those customers requiring community reablement, mutually supported by support workers from the Local Authority and community services providers.
7. The delivery of our BCF plan in 2017/18 has contributed positively to managing the rate of residential and nursing care home admissions for older people (aged 65 and over)	Strongly Agree	Packages of care are scrutinised through a panel process to ensure that all other possible opportunities have been investigated. Works to improve hospital discharge coordination are ongoing. Additional support has been provided by additional social work capacity and funding to the voluntary sector through the iBCF. Crisis prevention plans with carers have taken place; and Central Bedfordshire continues to develop additional independent living (extra care) accommodation.

Part 2: Successes and Challenges

Please select two Enablers from the SCIE Logic model which you have observed demonstrable success in progressing and three Enablers which you have experienced a relatively greater degree of challenge in progressing. Please provide a brief description alongside.

8. Outline two key successes observed toward driving the enablers for integration (expressed in SCIE's logical model) in 2017/18.	SCIE Logic Model Enablers, Response category:	Response - Please detail your greatest successes
Success 1	6. Good quality and sustainable provider market that can meet demand	This year has seen strengthening of the relationship between commissioners and our local care homes and domiciliary care providers. The framework agreements for commissioning care homes and domiciliary care were successfully re-let. The Domiciliary Care Framework is framed to address market concerns, particularly in relation to the rurality of Central Bedfordshire and the travel implications for Care Workers. An incentive payment for discharge from hospital is also part of the new framework. The Council is also implementing a Community Catalysts model to create capacity and diversity within the market, particularly in rural areas. Existing communication channels (care provider forums) have been utilised to engage providers in the challenges facing the market and to co-design solutions. In particular, the drive to reduce non-elective admissions and delayed transfers of care. This enhanced relationship with Care Providers has resulted in positive achievements delivering both the Enhanced Health in Care Homes Framework and a more responsive Home care market. The Beds Care Group has appointed a Trusted Assessor for care home residents. Once embedded, this will result in transfers of care between care settings being readily managed without delay.
Success 2	2. Strong, system-wide governance and systems leadership	A Central Bedfordshire 'Place' based Transformation Board has been established and is a sub group of the Health and Wellbeing Board. The Board has oversight of the Integration and BCF Plan as well as the transformation projects and priorities of the STP. A Steering Group comprising senior representatives from ELFT/BCG/CBC has been established to oversee the delivery of a multi-disciplinary approach (MDA) across Central Bedfordshire localities. This approach is staff across adult social care, primary care, community nursing and mental health to work delivered integrated outcomes for people. The Council's Overview and Scrutiny Committee established an Enquiry Panel to determine the vision for Integration and locality based Integrated Health and Care Hubs. The Panel enquiry has concluded its Phase 2 and report presented to the Council's Executive. The Council has set out a clear ambition to support the delivery of Integrated Health and Care Hubs with a capital sum within its medium term financial plan.

8. Outline two key challenges observed toward driving the enablers for integration (expressed in SCIE's logical model) in 2017/18.	SCIE Logic Model Enablers, Response category:	Response - Please detail your greatest challenges
Challenge 1	1. Local contextual factors (e.g. financial health, funding arrangements, demographics, urban vs rural factors)	Bedfordshire CCG has important financial challenges and is currently in financial recovery. New Directors are now in post and working closely with the Council and through the Central Bedfordshire Transformation Board to secure a common vision to shape the future of health and care services. East London Foundation Trust (ELFT) commenced as the new Community Health Services Provider in April and is likely to have a period of mobilisation which could present a challenge to focus on outcomes for people, certainly in the short term.
Challenge 2	3. Integrated electronic records and sharing across the system with service users	The lack of integrated systems is challenging, however the STP has established a digitisation programme and is addressing issues around shared systems across acute, community and social care. Work is also ongoing to provide electronic access to records for care homes. So far 3 Care Homes completed their IG Toolkit training and STP funding has been received to extend this to the remaining Care Homes which will provide access to secure NHSnet and SystemOne Care Home modules. Hand held recording tools are being piloted in two Central Bedfordshire owned homes and further work is ongoing to explore electronic monitoring systems includes medicines management tools. Central Bedfordshire Council is in the process of replacing the adult social care case management system (SWIFT). The replacement system is expected to provide direct customer access and encourage self management.

Footnotes:

Question 8 and 9 are should be assigned to one of the following categories:

1. Local contextual factors (e.g. financial health, funding arrangements, demographics, urban vs rural factors)
 2. Strong, system-wide governance and systems leadership
 3. Integrated electronic records and sharing across the system with service users
 4. Empowering users to have choice and control through an asset based approach, shared decision making and co-production
 5. Integrated workforce: joint approach to training and upskilling of workforce
 6. Good quality and sustainable provider market that can meet demand
 7. Joined-up regulatory approach
 8. Pooled or aligned resources
 9. Joint commissioning of health and social care
- Other