

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)
Kent County Council			44824	44824
Dartford Gravesham and Swanley		4038	9759	14947
Swale		1779	4272	6556
West Kent		8310	16054	16054
Ashford		2136	4621	4621
Canterbury and Coastal		3789	7808	12077
South Kent Coast		4338	7923	13283
Thanet		2810	6143	9594
BCF Total		27200	101404	121956

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.

All partners across health and social care within Kent are committed to delivering the outcomes required of the Better Care Fund plan and the wider deliverables as part of Kent's Integrated Care and Support Pioneer programme. The Health and Wellbeing Board at a Kent and local levels will be responsible for monitoring outcomes being achieved and identifying further system changes that will be required to achieve success.

This will include reviewing areas that are working well and increasing the pace of delivery, or collectively deciding what should be stopped or amended.

Regular review through identified governance structures will be required to ensure whole system buy-in and there will be additional overview through contract monitoring and balance.

Contingency plan:	2015/16	Ongoing
--------------------------	----------------	----------------

Contingency figures are based on CCG level information and can be found within CCG level plans

Please list the individual schemes on which you plan to spend the Better Care Fund, including any investment in 2014/15. Please expand the table if necessary.

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
Enabling People to return to/or remain in the community	KCC	16527		See attached document outlining benefits realised from Adult Social Care Transformation					
Ease of access to services	KCC	1611							
Self Care & Prevention	KCC	3228							
Postural Stability	KCC	166							
Expand integrated commissioning of schemes that produce joint outcomes	KCC	531							
CCG area schemes that increase pace and scale of transformation	KCC	5136							
2015/16 Schemes									
Ashford Schemes	CCG					4621		Benefits for schemes are identified in CCG Area plans. Whole system benefits will be identified as via Year Of Care and further whole system analysis.	
Canterbury Schemes	CCG					12077			
North Kent Schemes	CCG					21503			
South Kent Coast Schemes	CCG					13283			
Thanet Schemes	CCG					9594			
West Kent Schemes	CCG					16054			
Section 256 Social Care to Benefit Health	KCC					27200			
Disabled Facilities Grant	District/KCC					7208			
ASC Capital Grants	KCC					3432			
Implementation of the Care Bill	KCC					3541			
Carers support	CCGs/KCC					3443			
Total		27200				121956			

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.

The aims and objectives within Kent's BCF and Pioneer Programme will have a suite of measures that can be monitored and evaluated. This will be provided via the HWB assurance framework. Additional local metrics as detailed in CCG area plans will also be utilised. The performance metrics identified within the Better Care Fund will be implemented as follows:

Permanent admissions to residential and care homes: There will be a reduction in admissions based on rate of council-supported permanent admissions to residential and nursing care. This performance indicator will enable us to measure our success in preventing people from deteriorating to a level where they need residential or nursing care on a permanent basis. In order to achieve this, we will ensure that people are supported to live at home for as long as possible through provision of support through our integrated care centres, intermediate care, provision of enablement and telecare/telehealth services. This will positively impact on people being discharged from hospital.

Kent currently performs well compared to the rates for England, the South-East and comparator local authorities on this performance indicator (2012/13 data). We expect to see 41 fewer permanent admissions in 2014/15 compared to 2012/13.

Effectiveness of reablement – those 65+ still at home 91 days after discharge: Range to be between 82-88% and not show a reduction over 2 years. This performance indicator will enable us to measure our success in preventing people from deteriorating to a level where they need residential or nursing care on a permanent basis. Kent currently perform well compared to the rates for England, the South-East and comparator local authorities on this performance indicator (2012/13 data).

This metric will be measured using social care datasets and is available nationally.

Delayed transfers of care: Reduction in DTOC using total number of delayed transfers of care for each month.

Avoidable emergency admissions: There will be a 15% reduction in admissions.

Local Metrics:
 Social Care Quality of Life: Whilst overall satisfaction with health and social care services is good, we aim to ensure that people's quality of life is improved with the support that they receive. We would like to see a reduction in falls in people aged 65 and over.
 Injuries due to falls in people aged 65 and over
 Further local metrics may be used at CCG level, however as part of the Kent HWB dashboard improvements will be required in quality of life and reduction in injuries due to falls.

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

Kent will be using the national metric for 2015/16

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

All performance indicators will be monitored to identify early warnings of risk and failures of service delivery. The Integrated Commissioning Groups, Whole System Boards will oversee this process and will report directly to both the local Health and Wellbeing Board and to the senior management teams of our commissioning and provider partners. This approach will encourage and enable multi-organisational management and responsibility.

Further assurance will be via the Kent HWB assurance framework and the Integration Pioneer Steering Group. Additional Year of Care will provide valuable insight into the impact of schemes, the ongoing development of the detail of these schemes will be in partnership with providers.

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	782.67	N/A	737.21
	Numerator	2169		2043
	Denominator	277127		277127
		(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	84.04%	N/A	85%
	Numerator	1348		
	Denominator	1604		
		(April 2012 - March 2013)		(April 2014 - March 2015)
Delayed transfers of care from hospital per 100,000 population (average per month) <i>Kent Metric to be completed by 4 April based on CCG Area submissions</i>	Metric Value			
	Numerator			
	Denominator			
		(insert time period)	(April - December 2014)	(January - June 2015)
Avoidable emergency admissions (composite measure) <i>Kent Metric to be completed by 4 April based on CCG Area submissions</i>	Metric Value			
	Numerator			
	Denominator			
		(TBC)	(April - September 2014)	(October 2014 - March 2015)
Patient / service user experience <i>Kent will be using the national metric (under development) - in addition CCG Areas have indicated local patient experience measures.</i>			N/A	
		(insert time period)		(insert time period)
Social Care Quality of Life	Metric Value	18.8		19
	Numerator			
	Denominator			
		(April 2012 - March 2013)	(insert time period)	(April 2014 - March 2015)
Injuries due to falls in people aged 65 and over <i>Kent Metric to be completed by 4 April based on CCG Area submissions</i>	Metric Value			
	Numerator			
	Denominator			
		(insert time period)	(insert time period)	(insert time period)