

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)	NHS England Funds	Actual contribution (15/16)
Local Authority #1					
Canterbury CCG		2,481	3727	3789	12564
Local Authority #2					
etc					
BCF Total					

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.

Contingency plan:		2015/16		Ongoing
Outcome 1	Planned savings (if targets fully achieved)			
	Maximum support needed for other services (if targets not achieved)			
Outcome 2	Planned savings (if targets fully achieved)			
	Maximum support needed for other services (if targets not achieved)			

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
Canterbury - Integrated Health & Social Care		542				2900			
Canterbury - IUCC		540				2900			
Canterbury - Mental Health Service		200				1100			
Canterbury - Support for care homes		200				1100			
Canterbury - Health and Social Housing		200				1100			
Canterbury - Falls		200				1100			
Canterbury - Community Hub		600				2364			
Total		2482				12564			

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.

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

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

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

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		N/A	
	Numerator			
	Denominator			
		(April 2012 - March 2013)		
Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services	Metric Value		N/A	
	Numerator			
	Denominator			
		(April 2012 - March 2013)		
Delayed transfers of care from hospital per 100,000 population (average per month)	Metric Value			
	Numerator			
	Denominator			
		(insert time period)	(April - December 2014)	(January - June 2015)
Avoidable emergency admissions (composite measure)	Metric Value			
	Numerator			
	Denominator			
		(TBC)	(April - September 2014)	(October 2014 - March 2015)
Patient / service user experience [for local measure, please list actual measure to be used. This does not need to be completed if the national metric (under development) is to be used]			N/A	(insert time period)
		(insert time period)		
[local measure - please give full description]	Metric Value			
	Numerator			
	Denominator			
		(insert time period)	(insert time period)	(insert time period)