

Association

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)
Essex County Council		£4,932	£8,009	£8,009
NE Essex CCG		£0	£20,987	£20,987
Mid Essex CCG		£0	£21,651	£21,651
West Essex CCG		£0	£17,435	£18,980
Basilston & Brentwood CCG		£0	£16,041	£18,444
Castlepoint & Rochford CCG		£0	£10,833	£11,166
BCF Total		£4,932	£94,956	£99,237

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.

The functions and services that will go into the BCF are based on service redesign and moving activity away from an Acute setting wherever possible. The service redesign work will be taking place during 2014/15 and it is very important that as commissioners we do not close down capacity in the Acute Trusts until we are sure that the activity really has been moved and that the patients are familiar and comfortable with the revised pathways.

Contingency plan:		2015/16	Ongoing
Outcome 1	Planned savings (if targets fully achieved)	371,000	
	Maximum support needed for other services (if targets not achieved)	371,000	
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 actual spend	
		Recurrent	Non-recurrent	Recurrent	Non-recurrent	Recurrent	Non-recurrent	Recurrent	Non-recurrent
Intermediate care, re-ablement and rehabilitation									
Transfer of social care money						£2,672,270		£2,672,270	
Reablement Monies						£904,000		£904,000	
Social Care Uplift						£740,728		£740,728	
Delivering integrated care									
Integrated Community Teams	SEPT					£3,307,013		£3,307,013	
Community Geriatricians	SUHFT					£85,000		£80,000.00	
Collaborative Care Team	SEPT					£243,038		£243,038	
Care Coordination									
SPOR (Health Element)	SEPT					£97,098		£97,098	
Occupational Therapy	SEPT					£217,504		£217,504	
Carers						£50,000		£50,000	
CAVS Befriending Service	CAVS					£18,500		£18,500	
Managing emergency activity, discharge planning and post-discharge support									
Intermediate Care Beds	SEPT					£350,000		£0.00	
Rosedale Rehab/Reablement Beds	Rosedale					£130,315		£130,315	
Rosedale Therapy Input						£154,332		£154,332	
Tissue Viability	SEPT					£43,414		£43,414	
Leg Ulcer	SEPT					£92,503		£92,503	
Stroke (Community Service)	SEPT					£150,051		£150,051	
Pressure Relieving Equipment	SEPT					£112,061		£112,061	
Continence	SEPT					£350,832		£350,832	
Mental and physical health needs									
Dementia Intensive Support Team	SEPT					£70,118		£70,118	
Older People Community Mental Health Teams (inc. Assessment Service)	SEPT					£780,107		£780,107	
Older People Day Care (Mental Health)	SEPT					£100,584		£100,584	
Wheelchair Services	SEPT					£305,000		£305,000	
End of Life Care									
Havens Hospice	Havens					£410,080		£410,080	
Total						£11,541,476		£11,186,476	

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 Essex BCF schemes are designed to provide care earlier in our patients and service users care pathways through early intervention and prevention schemes and to keep our service users as independent as possible in their normal place of residency for as long as possible. The metrics will demonstrate the achievements of these outcomes by:-

- Showing a reduction in the number of permanent admissions to residential and nursing homes
- Demonstrating an increase in the number of people being presented to respite services (local additional measure) and improving the outcomes of those going through respite
- By investing in additional respite services including home from hospital schemes we will demonstrate a reduction in delayed transfers of care from hospital

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

Not applicable

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

The performance plans that will support these Outcomes and Metrics will be assured across the County and by each CCG. These arrangements will include assurance by the Executive Director for People Commissioning in the local authority and the relevant sub-committee (or GS) of the CCGs. The score cards demonstrating progress against the metrics will be reviewed at the Business Management Group of the Health and Wellbeing Board. The Health and Wellbeing Board will also review performance against these metrics regularly

If planning is being undertaken at multiple HWS level please include details of which HWS this covers and submit a separate version of the metric template both for each HWS and for the multiple-HWS combined

Not applicable

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	565	N/A	505
	Numerator	215		204
	Denominator	38055		40600
		(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 respite/rehabilitation services	Metric Value	82%	N/A	82%
	Numerator	133		169
	Denominator	163		207
		(April 2012 - March 2013)		(April 2014 - March 2015)
Delayed transfers of care from hospital per 100,000 population (average per month)	Metric Value	23		22
	Numerator	384		183
	Denominator	138052		140300
		(April - December 2014)		(January - June 2015)
Avoidable emergency admissions (composite measure)	Metric Value	1636		1627
	Numerator	2916		2945
	Denominator	178238		181006
				(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)				(insert time period)
Additional Local Measure - Coverage of respite	Metric Value	1942		2196
	Numerator	701		882
	Denominator	38055		40600
				(insert time period)