**Lancashire Health and Wellbeing Board**

Meeting to be held on 5 March 2024

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| **Corporate Priorities:**  Caring For the Vulnerable  Delivering Better Services |

**Lancashire Better Care Fund Plan 2023 to 2025**

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| Brief Summary This report provides a progress update of the Better Care Fund reset work and actions taken since the last report.  The Quarter 3 report has been submitted and was signed off by County Councillor Michael Green, Chair of Lancashire's Health and Wellbeing Board in his delegated capacity. The Board is requested to consider the report and ask any clarification questions. The report shows with regards performance, it remains on track against the mandated Better Care Fund metrics, except for admissions to long term residential care for which mitigating actions are in place.  Progress updates for various elements of the Better Care Fund reset programme are provided within this report, including the current projects underway supported by the national Better Care Fund team.  High level finance discussions continue between the Council and the Integrated Care Board, which will ultimately support the baseline conditions upon which the partnership will be able to build good, evidence based, joint financial decision making.  **Recommendations**  The Health and Wellbeing Board is asked to:   1. Receive the report and comment on the progress to date on the review and reset programme and support projects. 2. Review and comment on the Quarter 3 Better Care Fund submission. 3. Receive and consider the Finance Summary Q3 Report. |

**Detail**

**The Lancashire Better Care Fund Quarter 3 Report**

The Quarterly Report is a standing requirement of the Better Care Fund planning and reporting cycle, sitting alongside the submission of the annual Better Care Fund Plan and the fortnightly Adult Social Care Discharge Fund submission. The Quarter 3 report submission date was the 9 February 2024, and the report was signed off by County Councillor Michael Green in his delegated role as Chair of the Lancashire Health and Wellbeing Board.

As shared in the last Better Care Fund update, the new quarterly reporting template includes a progress update on the mandated Better Care Fund metrics, plus confirmation of activity and spend at the end of Q3. The report does not contain information about all Better Care Fund spend, only the specific schemes that are pre-selected by the national team for Health and Wellbeing Board areas to report against.

In terms of performance against the metrics during Quarter 2 of 2023/24 for the following 4 metrics:

* Avoidable Admissions
* Discharge to Normal Place of Residence
* Falls
* Reablement

Lancashire is on track to meet the individual targets set in the Better Care Fund Plan.

The **avoidable admissions** metric which Lancashire has previously not performed too well against, continues to perform better in Q2 than it did last year. However, there are still high numbers of people admitted to hospital which could have been avoided, so there is still work for the system partnership to undertake to improve performance in this area. 8764 people have been counted as an avoidable admission in 2023/24 as at 13 February 2024. As the usage of services such as virtual wards continue to increase, a continued improvement is expected in the number of people who avoid an unnecessary admission to hospital.

The number of **people discharged from hospital to their usual place of residence** has improved with the Lancashire performance at Q2 standing at 91.7%, exceeding the target of 88.6%. Lancashire remains slightly behind the national average of 92.6% and are mid-range compared with the performance of its' nearest neighbours. Work has taken place across organisations to improve the opportunities and decision-making for people to return home, and the work Adult Social Care has undertaken on community capacity in intermediate care is also contributing. The Lancashire County Council redesign of intermediate care services which commences from the 1 April 2024 will further maximise the capacity in homebased support.

The Lancashire performance for people **admitted to hospital as an emergency due to a fall** remains on track, with services such as the Falls Response and Lifting Service significantly contributing to our performance in this area. It is recognised that there are still high numbers of people being admitted to hospital due to falls and opportunities to improve need to be explored.

**Admissions to residential care** had increased slightly previously, but this is now stabilising and likely to start decreasing from Q3 onwards. This has been impacted in part by the focussed work in Adult Social Care to reduce their waiting times for assessment, with several people who had been waiting for assessments for 24hr care in a care home setting.

The strengths-based practice model that Adult Social Care are implementing will also positively impact this metric, as will the continued building of community infrastructures meaning more people can be better supported at home.

The percentage of **people aged over 65 who were discharged from hospital and received Reablement and who are still at home 91 days later**, continues to perform well against the target. Lancashire remains a high performer nationally in this metric, with the national average at 81.8%. This metric will be changing from April onwards and a new metric is likely to come into being which will be all people aged 65 plus who are discharged home from hospital and are still at home 91 days later, rather than just those who have received Reablement.

Further detailed information is provided on the Q3 Better Care Fund report circulated separately to the agenda, to members of the Health and Wellbeing Board).

**Better Care Fund Reset Progress: Support Offer Projects**

The Better Care Fund national support team shared three support offers that Lancashire agreed to take up. The support is provided as part of the overall Better Care Fund programme and is at no cost to the system. The support offers to Lancashire are in three defined areas:

1. Leadership & Governance
2. Discharge to Assess
3. Intermediate Care Demand and Capacity Modelling

**Leadership and Governance**

Whole Systems Partnership (WSP) have been secured via the Better Care Fund support team to be Lancashire's delivery partner for this project.

Whole Systems Partnership (WSP) are currently holding a number of 1:1s and small focus groups with various system leaders to help Lancashire better understand the relationships and opportunities for learning at a local level, as well as best practice locally and elsewhere.

A relational survey was also circulated with system leaders, and the early themes from the outputs of the initial diagnostic work will be shared back into the system towards the end of March, to help shape the next steps.

**Intermediate Care Demand and Capacity Modelling**

This project is at the early stages, with the identification of the datasets relating to performance, activity, capacity and finance now having been finalised. Information is being collated with initial analysis taking place at the beginning of April.

**Discharge to Assess**

This project has now commenced, with the datasets being combined for ease with the demand and capacity modelling project.

Three Senior Responsible Officers (SRO) have been confirmed:

* Kash Ahmed – Director of Strategic and Integrated Commissioning, Lancashire County Council
* Imran Devji – Chief Operating Officer, Lancashire Teaching Hospitals
* Tony McDonald - Executive Director of Integrated Care, Partnerships and Resilience at East Lancashire Health Trust and Senior Responsible Owner (SRO) for Community Health Services Transformation

A survey is being finalised which will be shared with all frontline staff involved in hospital discharge, to understand from their perspective the appetite for change, thoughts, ideas and opportunities.

A full day of case reviews will be undertaken with each of the five main Acute Trusts that Lancashire residents may be admitted to, which will look at whether the right outcome was achieved for the person, what worked well and what other opportunities could there have been to improve the experience and outcome.

A series of guided interviews will take place with a random sample of Lancashire people who have been through a 'discharge to assess' process over the last six months. The aim is to obtain around 15 completed conversations, which will share the person's and their carer's experience of discharge, what worked well and what could have been better.

The ambition is to bring the outputs of all four elements together into one overarching report around the beginning of May. The report will set out the themes and opportunities for change, as well as what's working well already.

Whilst the project support offer did not have capacity to extend to cover the same diagnostic for people being discharged from Mental Health hospitals, Lancashire is looking to mirror the process and gain a similar understanding of what happens now and opportunities to improve.

**Quarterly Finance Report**

In relation to the Q3 submission, actual spend and activity data to date has been completed across all schemes listed. It should be noted that as the reporting requirements for this period only focus on certain scheme categories, the template does not cover all schemes financed by the Lancashire Better Care Fund Pooled Fund. The schemes selected equate to approximately 65% (£132m) of the total value of the Lancashire Pooled Fund of £204m.

Discussions are continuing between the Council and the Integrated Care Board regarding the transactional amounts into the pooled fund and will help shape the decision-making principles in relation to the financial relationship.

Further detailed information is provided on the Q3 Finance report circulated separately to the agenda, to members of the Health and Wellbeing Board).

**List of background papers**

1. Lancashire Better Care Fund Quarter 3 Report (Board Members Only)
2. Lancashire Better Care Fund Finance Summary Report for Q3 (Board Members Only)