

# **HEALTH AND WELLBEING BOARD: 25 JANUARY 2018**

# REPORT OF THE INTERIM DIRECTOR OF HEALTH AND CARE INTEGRATION

# **DELAYED TRANSFERS OF CARE PERFORMANCE**

#### **Purpose of report**

- 1. The purpose of this report is to provide a progress report on the Better Care Fund (BCF) target for improving delayed transfers of care (DTOC).
- 2. The report details the performance targets, along with current progress locally, and the work being undertaken across the partnership to reduce delays.

#### Recommendation

- 3. The Health and Wellbeing is asked to:
  - a. Receive the progress report;
  - b. Discuss the actions in progress as noted in this report and consider if any further actions should be undertaken;
  - c. Note that this report has been forwarded to the Discharge Working Group and the Director of Urgent Care for Leicester, Leicestershire and Rutland (LLR) in support of their oversight of DTOC performance on an LLR-wide basis.

#### **Policy Framework and Previous Decisions**

- 4. The BCF policy framework was introduced by the Government in 2014, with the first year of BCF plan delivery being 2015/16. The County Council's Cabinet in February 2014 authorised the Health and Wellbeing Board to approve the BCF Plan and plans arising from its use.
- 5. The Board received a paper to provide an overview on the DTOC target and the potential implications related to not achieving the target on 16 November 2017.

#### Background

- 6. The requirement to deliver improvements in managing transfers of care is one of the national conditions and national metrics for the BCF, as set out in the *Integration and Better Care Fund Policy Framework* 2017/18 2018/19, which applies to BCF Plans with effect from April 2017 <a href="http://ow.ly/tnEl30g7jAu">http://ow.ly/tnEl30g7jAu</a>.
- 7. As part of achieving improvement, each local BCF Plan must demonstrate how the Department of Health's high impact changes framework for *improving hospital discharge* http://ow.ly/IYhT30g7jlK is being implemented locally. The framework

- provides a basis for each health and care system to assess their position, and identify any gaps, to ensure all the recommended interventions are in place locally.
- 8. There is also a requirement that a proportion of the adult social care allocation (the Improved Better Care Fund (IBCF) announced in the March 2017 budget) will be spent on reducing DTOC.
- 9. In Leicestershire, the total amount of funding being spent on managing transfers of care and improving delayed hospital discharges is £16.4million. This includes £5million of the IBCF and over £11million from the core BCF pooled budget.
- 10. The impact of these investments is measured through the monitoring of LLR's performance on DTOC, including the individual performance in each of the three Health and Wellbeing Board footprints within LLR.

# **BCF Plan**

- 11. The Leicestershire BCF Plan was submitted on 8<sup>th</sup> September 2017 to NHS England. The plan met all the national requirements except that the delayed transfers of care improvement trajectory was not compliant with the NHS England requirement to make a specific level of improvement by November 2017. Instead the BCF plan submission profiled this improvement to March 2018, which partners agreed was the realistic improvement trajectory based on the LLR DTOC action plan, as agreed with the LLR A&E Delivery Board.
- 12. Correspondence from NHS England to Leicestershire County Council during late September and early October stated that BCF Plans would automatically be rated as "not approved" if they did not comply with the NHS DTOC target. It was therefore agreed, via a report to the Leicestershire County Council Cabinet and with partners, to revise the DTOC target to comply with the BCF national conditions.
- 13. A revised DTOC target was submitted to NHS England on 12<sup>th</sup> October 2017. Formal confirmation that the Leicestershire BCF Plan has been approved was received on 20 December 2017.
- 14. It was reported to the 16 November 2017 Health and Wellbeing Board that there were potential implications of not achieving the DTOC target by November 2017, which could result in funds being withheld from BCF pooled budgets in 2018/19.
- 15. Leicestershire County Council received a letter from the Secretaries of State for Department of Communities and Local Government and the Department of Health on 6 December 2017 that confirmed that due to the improved DTOC performance there would be no impact on the IBCF allocation in 2018/19. (Letter attached as Appendix A).
- 16. The first wave of CQC local system reviews were undertaken during Q3 2017/18, which covered 12 areas across England. The second wave of local reviews was published in December. Leicestershire was not included in this list.

# **DTOC Target**

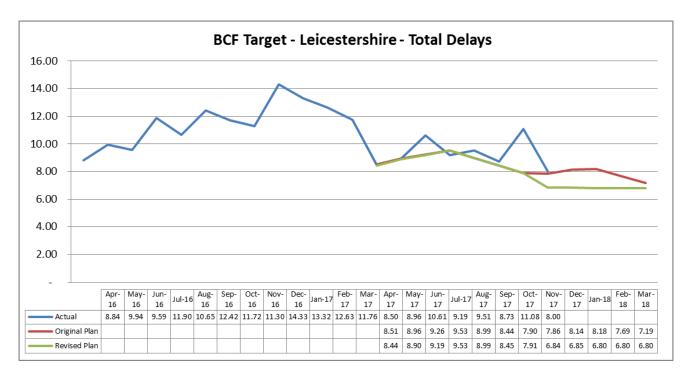
- 17. DTOC data is captured in three categories:
  - i. Patients who are delayed due to NHS reasons:
  - ii. Patients who are delayed due to Local Authority reasons;
  - iii. Patients whose delay is jointly attributable.
- 18. Delayed days from all inpatient settings of care and against all three categories are brought together to measure overall performance for each local area. Any Leicestershire residents delayed in out of area hospitals also count towards Leicestershire's overall performance.
- 19. The national target set by NHS England is that no more than 3.5% of occupied bed days should be delayed nationally, by November 2017.
- 20. The national target has been apportioned across each Health and Wellbeing Board area and translated into a rate per 100,000 population for each local area. In order to make its contribution to the national percentage, Leicestershire is required to achieve a rate of no more than 6.84 beds delayed per 100,000 population, by November 2017 (reported 11 January 2018).

#### **DTOC Target and Current Performance and Actions**

21. In November there were 1,311 days delayed, a rate of 240.03 per 100,000 population against a target of 205.32. This is 8.0 average days delayed per day per 100,000 population, against a target of 6.84. The table below shows the Leicestershire 6.84 target broken down into the three categories, against the actual performance.

	NHS Delays	LA Delays	Joint	Total
Target for November 2017	3.78	1.33	1.73	6.84
Actual performance at November 2017	5.80	1.20	0.99	8.00

22. Below is graphical representation of performance, mapped against Leicestershire's original trajectory (shown in red) and the revised trajectory (shown in green).



23. The LLR wide DTOC action plan is being enacted by all partners and this continues to be a top priority. The paragraphs below details a summary of current actions to improve the DTOC target.

# **Summary of Actions in Progress**

- 24. A detailed joint action plan is in progress to improve the delayed transfers of care position. The following paragraphs provide an update on actions since the last report in November.
- 25. Throughout November, twice weekly discharge escalation calls took place at a senior level with engagement of all CCG and Local Authority partners. The calls focused on patient specific delays within Leicestershire Partnership Trust Community Hospitals.
- 26. The Multi Agency Discharge Events (MADE) commenced from 11 December. Calls focused on identifying high level thematic actions and patient level actions to facilitate effective discharge. These calls have been system level calls covering all discharge issues across acute, community hospital and mental health.
- 27. Conference calls have been established between the Council's Assistant Director Care Pathway West, University Hospitals of Coventry and Warwickshire and Coventry and Rugby CCG to improve the accuracy of coding and data sharing.
- 28. In December, a letter was received from Association of Directors of Adult Social Services (ADASS) to all Local Authorities, CCGs and provider Chief Officers regarding assuring that DTOC reporting is credible. The letter stated that providers must ensure that before DTOC data is uploaded to Unify that Social Care and jointly attributable delays should be agreed by the relevant Local Authority's Director of Adult Social Services or their nominated representatives. A process has been put in place between Leicestershire Partnership Trust and Leicestershire County Council, and a process is being developed for University Hospitals of Leicester NHS Trust. Steps are being taken for introducing similar processes with nearby out of county providers.

### Conclusion

29. The Leicestershire BCF DTOC target was not achieved by November 2017 but due to the improvements that have been made in the performance the risk of having IBCF funding withheld in 2018/19 has been removed.

### **Background papers**

High Impact Change Model – Managing Transfer of Care <a href="http://ow.ly/IYhT30g7jlK">http://ow.ly/IYhT30g7jlK</a>

Report to Health and Wellbeing Board: 16 November 2017 – Delayed Transfers of Care Target, Performance and Risk Analysis <a href="http://politics.leics.gov.uk/ieListDocuments.aspx?MId=4941">http://politics.leics.gov.uk/ieListDocuments.aspx?MId=4941</a>

## **Circulation under the Local Issues Alert Procedure**

None.

## **Officer to Contact**

Name and Job Title: Helen Seth, Interim Director of Health and Care Integration

Telephone: 0116 3054212

Email: <u>Helen.Seth@leics.gov.uk</u>

# **List of Appendices**

Appendix A – Letter from DCLG and DH regarding DTOC Performance

# **Relevant Impact Assessments**

#### **Equality and Human Rights Implications**

- 30. The BCF aims to improve outcomes and wellbeing for the people of Leicestershire, with effective protection of social care and integrated activity to reduce emergency and urgent health demand.
- 31. An equalities and human rights impact assessment has been undertaken which is provided at

http://www.leicestershire.gov.uk/sites/default/files/field/pdf/2017/1/11/better-care-fund-overview-ehria.pdf. This finds that the BCF will have a neutral impact on equalities and human rights.

# Partnership Working and associated issues

- 32. The delivery of the BCF Plan and the governance of the associated pooled budgets is managed in partnership through the collaboration of commissioners and providers in Leicestershire.
- 33. Day to day oversight of delivery is via the Integration Executive through the scheme of delegation agreed via the Integration Executive's terms of reference which have been approved by the Health and Wellbeing Board.

34. The delivery of the Leicestershire BCF ensures that a number of key integrated services are in place and contributing to the system wide changes being implemented through the five year plan to transform health and care in Leicestershire, known as Better Care Together <a href="http://www.bettercareleicester.nhs.uk">http://www.bettercareleicester.nhs.uk</a>.