Better Care Fund 2024-25 Update Template

7. Metrics for 2024-25

Selected Health and Wellbeing Board:

Leicestershire

8.1 Avoidable admissions

		2023-24 01	2023-24 02			valiable at time of publication Rationale for how the ambition for 2024-25 was set. Include how learning and performance to date in 2023-24 has been taken into account, impact of demographic and other demand drivers. Please also describe how the ambition represents a stretching target for	Please describe your plan for achieving the ambition you have set.	<u>Complete:</u>
		Actual	Actual	Plan	Plan	the area.	and how BCF funded services support this.	
	Indicator value	203.6	189.8	161.8	160.2	For 24-25 we have maintained the targets for each quarter as per	Reductions in admissions will be realised by continuous use of the	Yes
	Number of Admissions	1,693	1,578	-	-	retain them would be a stretch target from current performance	unscheduled care hub, Intermediate care step-up model for both P2 beds and P1 intake capacity.	
ndirectly standardised rate (ISR) of admissions per 100,000 population	Population	712,572	712,572	-	-	actuals. We recognise as a system that demand at the front door has increased locally and nationally. As LLR we are working to		
(See Guidance)			2024-25 Q2	2024-25 Q3		extend our Intermediate Care offer to reduce step-up demand which should bring us closer to achieving this years' targets.		
see outurney	Indicator value	165.1	163.5	161.8	160.2			Yes

>> link to NHS Digital webpage (for more detailed guidance)

8.2 Falls

		2023-24 Plan	2023-24 estimated	2024-25	Rationale for how the ambition for 2024-25 was set. Include how learning and performance to date in 2023-24 has been taken into account, impact of demographic and other demand drivers. Please also describe how the ambition represents a stretching target for the area.	Please describe your plan for achieving the ambition you have set, and how BCF funded services support this.
	Indicator value	1,628.1	1,810.2		The target count of 2800 is approx 1% improvement based on 23- 24 estimated performance. The actuals from 2019 onwards have fluctuated so estimating a reduction target has been kept to a	A review of current commissioned falls services is to take place within 24-25 to reduce the numbers of falls. The number has fallen during 23- 24 but the rate hasbeen afected by the change in population figures.
Emergency hospital admissions due to falls in people aged 65 and over directly age standardised rate per 100,000.	Count	2,427	2828	2800	minimum. The population increase has been taken into account for	Work with care homes who had the highest rate of admissions due to falls will continue. In 23-24 this saw a reduction of 15% of admissions
	Population	148,067	156228		residential care admissions metric below.	

Public Health Outcomes Framework - Data - OHID (phe.org.uk)

8.3 Discharge to usual place of residence

					*Q4 Actual not av	vailable at time of publication		_
						Rationale for how the ambition for 2024-25 was set. Include how learning and performance to date in 2023-24 has been taken into account, impact of demographic and other demand drivers. Please		
						also describe how the ambition represents a stretching target for	Please describe your plan for achieving the ambition you have set,	
		Actual	Actual	Actual	Plan	the area.	and how BCF funded services support this.	I
i da se	Quarter (%)	92.3%	92.2%	95.1%		For 24-25 the target has been set at a 0.8% improvement to 23-24	Increased capacity in reablement teams during 24-25 by an aditional	
	Numerator	14,112	14,539	14,500	13,750	· · · · · ·	59 people per month will further increase the amount of people that	1
Percentage of people, resident in the HWB, who are discharged from acute hospital to their normal place	Denominator	15,291	15,769	15,251	15 000		can be discharged home. Integrated locality team will also increase the ability for people to remain independent and able to return home	1
		2024-25 Q1	2024-25 Q2	2024-25 Q3	2024-25 Q4		with an increase in community capacity.	1
of residence		Plan	Plan	Plan	Plan	ispectively.	with an increase in community capabily.	1
(SUS data - available on the Better Care Exchange)	Quarter (%)	92.7%	92.6%	95.1%	91.7%			I
	Numerator	13,700	14,000	14,500	13,750			
	Denominator	14,774	15,125	15,251	15,000			

8.4 Residential Admissions

		2022-23 Actual	2023-24 Plan	2023-24 estimated	2024-25	Rationale for how the ambition for 2024-25 was set. Include how learning and performance to date in 2023-24 has been taken into account, impact of demographic and other demand drivers. Please also describe how the ambition represents a stretching target for the area.	Please describe your plan for achieving the ambition you have set, and how BCF funded services support this.
	Annual Rate	552.8	514.6	510.8			Panels within ASC and Intermediate care capacity improvements in P1 have contributed to an overall decrease of approx 35% of use of short-
Long-term support needs of older people (age 65 and over) met by admission to residential and nursing care homes, per 100,000 population	Numerator	824	804	798		U ,	term residential care on dischrge. These will continue in 24-25 to maintain the good performance.
	Denominator	149,067	156,228	156,228		authorities and those within the East Midlands. Excellent improvement has been made in 2023/24 in Leicestershire,	

Long-term support needs of older people (age 65 and over) met by admission to residential and nursing care homes, per 100,000 population (aged 65+) population projections are based on a calendar year using the 2018 based Sub-National Population Projections for Local Authorities in England:

https://www.ons.gov.uk/releases/subnationalpopulationprojectionsforengland2018based

Please note, actuals for <u>Cumberland</u> and <u>Westmorland and Furness</u> are using the <u>Cumbria</u> combined figure for the Residential Admissions metrics since a split was not available; Please use comments box to advise.

Yes