### **Health** and **Wellbeing** Board Hertfordshire

Agenda Item No.

4

#### HERTFORDSHIRE COUNTY COUNCIL

HEALTH AND WELLBEING BOARD WEDNESDAY 18 JUNE 2014 AT 10.00 A.M.

#### SUBJECT: ADDITION TO HEALTH AND WELLBEING STRATEGY

Report of the Assistant Directors of Health and Social Care Integration East and North Herts CCG AND Herts Valleys CCG and Hertfordshire County Council

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#### 1.0 Purpose of report

1.1 To present an addendum to the Health and Well-being Strategy to reflect the agreements that the Health and Well-being Board has made on the Better Care Fund and its vision for integrated working.

#### 2.0 Summary

- 2.1 At the Health and Wellbeing Board on 28th March, the Board agreed an outline Better Care Fund, with a pooled budget of approximately £240m for older people's care. The plan contains:
  - agreement on the existing budgets used to deliver care for adults and older people that will be pooled
  - key performance indicators and targets that will need to be met and agreed targets for improvement
  - commitment to deliver a number of initiatives designed to improve outcomes for patients through integrated working and transforming of existing services
- 2.2 Based on the Better Care Fund plan, progress that has been made on a number of strategic integration initiatives, and the agreement of CCG Operational Plans, it is proposed to amend the Health and WellBeing Strategy so that it includes:
  - a separate 'enabling' priority that focuses on how partners on the Health and Well-being Board will work together to jointly commission services for older people, and deliver effective integrated services. This includes a commitment to develop and agree robust joint commissioning arrangements, pooled budgets and clear governance arrangements. It also includes Better Care Fund 'national conditions' around the commitment to deliver 7-day working, protecting levels of social care services, and the sharing of data across the NHS and social care.
  - amendments to the existing priorities to reflect the aspirations in the Better Care Fund plan and the relevant Better Care Fund Performance indicators.

#### 3.0 Background

3.1 The Hertfordshire Health and Well-being Strategy (2013-2016) was agreed in February 2013 after extensive consultation. The focus was rightly on improving outcomes for individuals, their families and their carers. In March 2014, the Health and Well-Being Board agreed the Better Care Fund and associated plan after engagement and consultation in early 2014. This Fund involves the pooling of £240m of health and social care monies, with plans to jointly commission services and transform services to deliver better care as cost effectively as possible. Given this, it is important that the Board's Strategy reflects this agreement, and that progress in delivering the aspirations of the Better Care Fund is monitored and managed as part of the wider Strategy.

#### 4.0 Draft Amendments to the Strategy

- 4.1 A separate priority that relates to integrated working and the Better Care Fund is proposed, *Integrated Working Jointly commissioned care services for older people.* This is an 'enabling' priority which would help to deliver a number of the existing priorities, especially those relating to *Promoting Independence.* There are a number of commitments and objectives in the priority that will be monitored as part of the performance management of the Strategy. Included in this priority is the draft vision statement for integrated working:
  - "... a system that delivers the right care and support at the right time and in the right place for individuals, their families and their carers. We will work together to help individuals and their families and carers support themselves wherever possible. We want all services to be coordinated around people's needs, helping to identify problems early or preventing them happening in the first place and helping people live as independently as possible, for as long as possible..."

This vision statement can be tested at the Health and Well-being Board conference on the 26<sup>th</sup> of June. In addition to this, a number of the existing priorities have been amended to reflect the Better Care Fund, and these are outlined below.

- 4.2 The Promoting Independence priority on Enhancing quality of life for people with Long Term Conditions has been renamed as Enhancing quality of life for Older People and people with Long Term Conditions. This now includes specific Better Care Fund Performance Indicators around:
  - Delayed Transfers of Care
  - Avoidable Emergency Admissions,
  - Long term admissions to residential care
  - Effectiveness of Reablement

The Board's commitment to deliver enhanced community health and social care provision around primary care, a Discharge to Assess model of care and the Board's commitment to deliver a fully integrated Early Supported Discharge service for stroke patients is also included under this priority. In addition, a commitment to deliver improved end of life care, with more individuals dyeing in their preferred place of death is also included. Both

Hertfordshire CCGs and the local authority are developing new End of Life strategies which will inform this work.

- 4.3 The priority on *Living well with Dementia* now includes the Better Care Fund indicator on the Diagnosis Rate for People with Dementia.
- 4.4 Future performance reporting of the strategy will include monitoring of the Better Care Fund indicators, but also an update on delivery against the new 'enabling' priority on Integrated Working Jointly commissioned care services for older people. The relevant elements of the strategy that contain the additions and amendments is attached at Appendix 1

#### 5.0 <u>Better Care Fund Indicators</u>

- 5.1 Work has taken place between colleagues in the Clinical Commissioning Group and the County Council to ensure data for the performance indicators can be collected and reported on as regularly as possible.
- 5.2 NHS England has identified 6 metrics to underpin the performance element of the Better Care Fund. There are 4 pre-determined national metrics, 1 locally determined patient / service user metric and 1 local metric.
- 5.3 The 4 Pre- determined National Metrics are outlined below, and work has taken place to ensure the data across the CCGs and the County Council can be collected and reported on reliably
  - The number of people (65+) admitted into permanent residential and nursing care homes per 100,000 population (Adult Social Care Outcomes Framework (ASCOF) 2A(2)
  - Proportion of 65+ who were still at home 91 days after discharge from hospital into reablement /rehabilitation services ASCOF 2B(1)
  - Delayed transfers of care from Hospital per 100,000 population (NHS England)
  - Avoidable Emergency Admissions (Composite Measure Hospital Episode statistics)

## 5.4 Locally determined patient / service user metric - 'Have your say questionnaire for enablement.

This questionnaire is already in place and offers a historical dataset from 2011onwards. It measures feedback on respect, understanding, choice, information and overall outcome. Returns are scored and collated into quarterly percentages of those satisfied with the service.

This metric was selected as it:

- targets the population we are focussing on improving the health and well-being of (people aged 65+ with social care and health needs being discharged from hospital),
- is centred upon the core areas of improvement we are trying to make regarding patient experience (people are supported to remain independent, manage their health or social care needs and require less or no support in order to do so)
- has SMART criteria (Specific, Measureable, Attainable, Realistic and Timely).

# Local metric - Estimated Diagnosis rate for People with Dementia (NHS Outcomes Framework 2.6i)

This metric was one of a number of local metrics recommended by the NHS England BCF guidance. This metric was selected due to the impact that early care planning for patients that have early diagnosis of dementia can have on:

- reducing emergency admissions
- delaying residential care and nursing placements.
- 5.2 More detailed information on each indicator is presented at **Appendix 2.**

#### 6.0 Recommendation

6.1 Hertfordshire Health and Wellbeing Board is requested to discuss and approve the additions and amendments to the Strategy.

Report signed off by	HCC, HVCCG & ENHCCG	
Sponsoring Health HWB Members	Councillor Colette Wyatt Lowe (Chair)	
Hertfordshire HWB Strategy	This report supports all 9 priorities of	
priorities supported by this report	the Health and Wellbeing Strategy	

#### **Needs assessment**

The original HWB Priorities and the priorities in the Better Care Fund have been underpinned by data from the JSNA

#### **Consultation/public involvement**

Extensive engagement took place around the Health and Well-being Strategy. In addition there were 4 public engagement events around the Better Care Fund in addition to engagement with specific providers.

#### **Equality and diversity implications**

The Strategy itself has been subject to an Equality Impact Assessment.

<b>Acronym</b>	s or	terms	used

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Initials	In full	
HCC	Hertfordshire County Council	
HVCCG	Herts Valleys CCG	
ENHCCG	East and North Herts CCG	
ASCOF	Adult Social Care Outcomes Framework	