

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)
Swindon Borough Council NHS transfer	Y	£3,394,293	£926,000	£926,000
CCG Swindon	N		£11,749,000	£11,749,000
<b>BCF Total</b>		<b>£3,394,293</b>	<b>£12,675,000</b>	<b>£12,675,000</b>

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.

£3,396m is subject to payment by result. There will be a number of planned activities to mitigate risk to improvement in outcomes in particular the challenging targets to reduce admissions to residential care and hospital admissions. The majority of the planned services are commissioned from SEQOL social enterprise, and we are considering a shared risk approach with partners. Community navigator scheme will be evaluated before roll out to other practices. Mental health well-being pilot will be evaluated before roll out. All voluntary sector contracts have performance monitoring arrangements in place. As our investment is in community health services, any loss of income will put early intervention services at risk. Swindon spends £24m per annum on community care packages for people with a learning disability compared to £9m on older people services. This is out of a total budget of £60m for 2014/15. We are therefore targeting learning disability services for remodelling so that we support more people locally than in residential care. 8 people coming out of residential care with access to training and employment will reduce spend on LD residential care budget.

Contingency plan:		2015/16	Ongoing
<b>Outcome 1 Permanent admissions to residential care</b>	Planned savings (if targets fully achieved)	SBC: £0.5m	
	Maximum support needed for other services (if targets not achieved)	£0.5m for funding admissions to residential care	
<b>Outcome 2: Proportion of older people still at home after discharge from hospital - Effectiveness of reablement</b>	Planned savings (if targets fully achieved)	SBC: £0.5m	
	Maximum support needed for other services (if targets not achieved)	£0.5m for funding admissions to residential care	
<b>Outcome 3: Improved discharge and reduction in delay</b>	Planned savings (if targets fully achieved)	CCG: £ 2m	
	Maximum support needed for other services (if targets not achieved)	£2m for costs associated with length of stay in acute setting	
<b>Outcome 4: Avoidable hospital admissions</b>	Planned savings (if targets fully achieved)	CCG: £0.5m and cost avoidance from community navigator of potentially £2.8m	
	Maximum support needed for other services (if targets not achieved)	£0.5m hospital over activity	
<b>Outcome 5: Patient satisfaction</b>	Planned savings (if targets fully achieved)	SBC: £	
	Maximum support needed for other services (if targets not achieved)		
<b>Outcome 6; increase in people with a learning disability in employment</b>	Planned savings (if targets fully achieved)	SBC: £3m	
	Maximum support needed for other services (if targets not achieved)	fund residential placements if people with a learning disability cannot be supported locally	

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 benefits	
		Recurrent	Non-recurrent	Recurrent	Non-recurrent	Recurrent	Non-recurrent	Recurrent	Non-recurrent
Scheme 1/5 Integrated Crisis Hospital discharge and 7 day working, telehealth, overnight	SEQOL	£1,501,800		managing 40% (£200k) of our rising demand in Older Peoples services £500k		£1,501,800		managing 100% of our rising demand in Older Peoples services £500k and £1m inflation. Virtual Wards, telehealth and SWICC step up beds all offer alternatives to acute care and focus on managing patients care in the most appropriate setting such as at home will produce efficiencies of over £1.5m. The CCG has set itself a target of shifting 1.5% from emergency admissions into planned or ambulatory care over the next 5 years	
Scheme 2/4 Reablement/Community rehabilitation	SEQOL	£911,635		managing 40% (£200k) of our rising demand in Older Peoples services £500k		£1,086,635		managing 100% of our rising demand in Older Peoples services £500k and £1m inflation. Programmes aimed at a number of ambulatory care conditions such as COPD, Heart Failure again focusing on alternative community based care which were instigated in 1314 will expand in 1415 and 1516 to produce savings in excess of £300k. Primary Care support to paramedics assessing patients with more urgent needs to establish whether they require admitting to acute sector and expanding Home Visiting Service are all aimed at stemming inappropriate admissions. Savings achieved on piloting such schemes in 1314 are over £200k; these are anticipated to increase with full roll out in 1415 and 1516	
Scheme 3 Carers	carers centre	£542,600		contributing towards managing 47.5% (£950k) of our £2m rising demand in Older Peoples & LD services		£890,600		contributing towards managing 100% of our rising demand in Older Peoples & LD services £2m and £1m inflation	
Scheme 6 remodelling LD and befriending	SEQOL	£313,258		contributing towards managing 50% (£750k) rising demand in LD services £1.5m		£313,258		contributing towards managing 100% of our rising demand in LD services £1.5m and £1m inflation	
Scheme 7 Capital and care Bill	SBC			950k		£926,000		contribute to managing the £2m per annum demand challenge and £2m inflation	
Scheme 8: Care Bill implementation						£400,000			
Scheme 8 Alternative community based health services to avoid hospital admission (Single Point of Access (SPA) & Crisis Services, Hospital Team, Urgent care, community navigator (125k)		£125,000				£2,466,707		Range of schemes aimed at reducing avoidable admissions such as the Fix Me Hub and increasing flow through the system by ensuring prompt discharge such as DART are expected to continue to yield savings of over £500k and contribute to overall savings of £1.5m within acute settings. The CCG has set itself a target of reducing emergency admission rates by 1.5% over its 5 year Strategic Plan.	
Scheme 9: Supporting Independence (Community intermediate care, Community rehabilitation, Stroke, community health )						£4,090,000		Virtual Wards, telehealth and SWICC step up beds all offer alternatives to acute care and focus on managing patients care in the most appropriate setting such as at home will produce efficiencies of over £1.5m. Providing greater support to those with Long Term Conditions to meet CCG target of ensuring that 80% feel supported	
Scheme 10: Integrated services for learning disabilities						£1,000,000		Contribute to managing learning disability savings of £2m	
<b>Total</b>		£3,394,293		950k		£12,675,000		SBC: £4m CCG £2m	

## 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

1. Reduction in admission to residential and nursing homes through good crisis support, reablement both within the community and in short term residential facilities (Fessey). Benefits of the scheme are described in section 8 of the Better Care Fund Plan. The out turn data for 2012/13 was 612 per 100k population. We are expecting an increase in admissions in 2013/14 to 200 and a rate of 660 per 100k population. Therefore the planned reduction suggests 171 admission based on the statistical calculator. This would be a 16% reduction which we don't believe is achievable and are therefore proposing a 10% reduction to 193 admission in 2014/15. we propose to exclude service users where the community based care package would be more expensive than residential and nursing care. 2. The enhanced reablement service and fessey will support people to regain their skills with an increase of 5% so out turn would be 85% of service users at home 91 days following discharge from hospital which is better than the national average. This is measured over 3 month period October to December 2014. We are anticipating a small increase in the denominator to 72 due to population increase. 3. Reduction in delayed discharge from hospital due to social care delay by 5% by October 2015 through enhanced social work 7 day working and hospital discharge. 4. Reduction in avoidable hospital admission by 1.5% based on commissioning for value modeling.

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.

Local indicator increase the proportion of people with a learning disability into employment from 3.6% in March 2013 by 40% by October 2015. Swindon has a higher rate than nationally of people with a learning disability in residential care. The total number is 186 people at a cost of £11m per annum. We therefore want to focus on preventing residential care by offering people with a learning disability community supported accommodation, training and employment opportunities. this indicator is used as a proxy for our reshaping of learning disability services

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

assurance will be provided through monthly reports to the Strategic Forum and formally to the Joint Commissioning Board which monitors the section 75 Agreements for Swindon Borough Council and the CCG.

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

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	Proj 660 per 100k March 2014 (586.6 per 100k 12/13)	N/A	595 per 100k (10% reduction)
	Numerator	Proj 200 March 2014 (180 12/13.		193 from 200 baseline March 2014.
	Denominator	30,345		32,427
		31.3.2013		(April 2014 - March 2015)
Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services	Metric Value	80%	N/A	85%
	Numerator	56		61
	Denominator	70		72
		( October 2012 - December 2012 )		(October 2014 - December 2014)
Delayed transfers of care from hospital per 100,000 population (average per month)	Metric Value			4% reduction from baseline
	Numerator	3,151 bed days (6 months = 525 bed days per month)	4,698 (9 months = 522 bed days )	3,110 (6 months data = 518 bed days per month)
	Denominator	168015	170409	172789
		June- November 2013	April 2014 - December 2014	January 2015 - June 2015
Avoidable emergency admissions (composite measure)	Metric Value	enter rate per 100k population	enter rate per 100k population	1.5% reduction on rate per 100k
	Numerator	2,022 (6 months = 337 avoidable admission per month)	2,006 ( 6months = 334 avoidable admission per month)	1,992 (6 months = 332 avoidable admission per month)
	Denominator	216,001	219,141	222,236
		April - September 2013	( April 2014 - September 2014	( October 2014 - March 2015)
Patient / service user experience (for local measure, please list actual measure to be used. This does not need to be			N/A	
		( insert time period )		( insert time period )
People with a learning disability into employment or training	Metric Value	3.60%	20 % increase from baseline	40% increase from baseline
	Numerator	20	24	28
	Denominator	553	553	553
		April 2012 - March 2013	April 2014 - December 2014	January 2015 - June 2015)