

## Better Care Fund Performance Metrics

1. Performance figures reports are most recent data for each indicator
2. Latest performance is presented against planned performance as an indication of variance from target and a comparison is given to previous year
3. Regional or National benchmark data is provided where available, dependent on the indicator

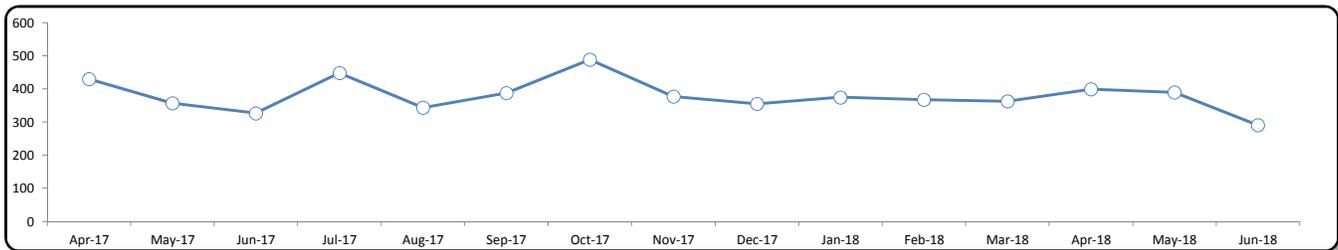
### Delayed Transfers of Care (DToC) beddays per 100,000 adult pop

Latest data available Jun-18	291
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Vs same period last year Jun-17	327
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Latest full quarter available Apr - Jun 18	1,080
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Vs BCF plan Apr - Jun 18	826
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Source: NHS England Statistics

The number of Delayed Transfers of Care beddays per 100,000 Brighton and Hove population in June-18 has decreased against the same month last year, 291 in June-18 vs 327 in June-17. The total delayed days for Brighton and Hove during June-18 was 696. This is an improvement from last month and from the same period last year, although performance is still not at the desired standard set by the system. This change demonstrates a reduction in length of stay for delayed discharge patients, and a focus is currently being given to patients with the longest length of stay.

## % of beds occupied by Delayed Transfers of Care (DToC) patient at Brighton & Sussex University H

Latest data available  
Jun-18

5.6%

Vs same period last  
year Jun-17

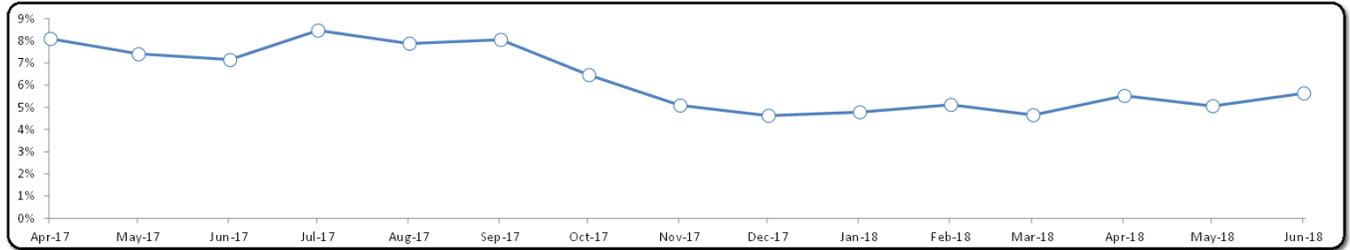
7.1%

Other Adult Major  
Trauma Centres Jun-  
18

4.7%

National standard

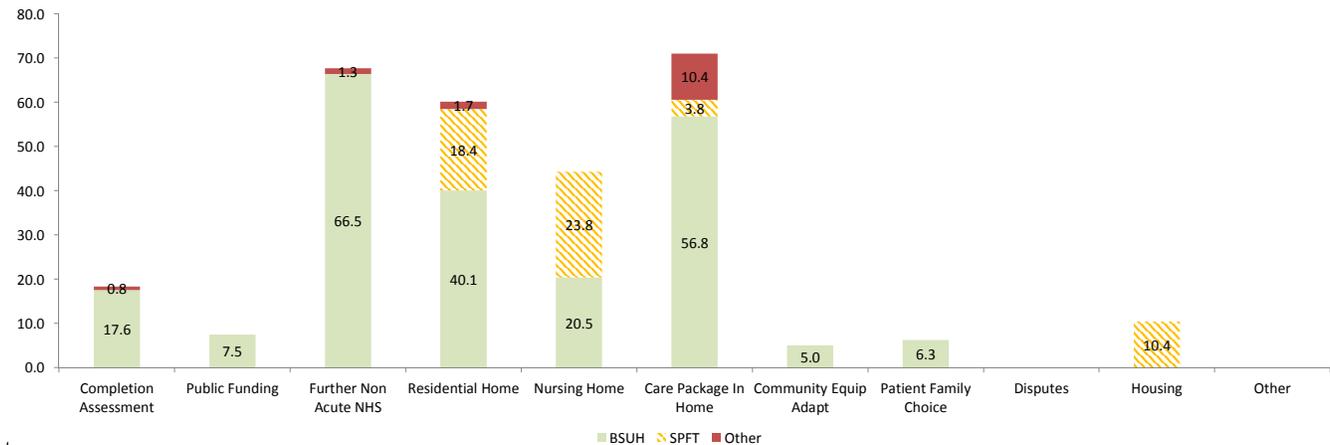
3.5%



Source: NHS England Statistics

The number of beds occupied by a delayed transfers of care patient at Brighton and Sussex University Hospital in Jun-18 has decreased against the same month last year, 5.6% in Jun-18 vs 7.1% in Jun-17. This metric has a direct relationship with the number of delayed bed days per 100,000, thus the performance improvement is in line with that described above. However delayed discharges are still 2% above the desired system target of 3.5%. Under the Better Care Fund programme, the new model of HomeFirst begins its roll out across The Royal Sussex County Hospital in September, with all wards covered by the end of November in preparation for expected winter pressures, and it is anticipated that this will have a positive impact on delayed discharges. Additional work around nursing home beds and CHC assessment processes are also expected to contribute to an improvement in this target from November.

## Total Brighton and Hove Unitary Authority area - Delays by reason per 100,000 - June 18



The top reason for delays for Brighton and Hove Unitary Authority area is Nursing Home with 24.4% of the delays. 75.7% of the Brighton and Hove Unitary Authority area delays are from Brighton and Sussex University Hospital, 19.4% are from Sussex Partnership Foundation Trust and 4.9% from others providers. The top reason for delays for England is care package in home with 20.8% of the delays and 16.9% for further non-acute NHS.

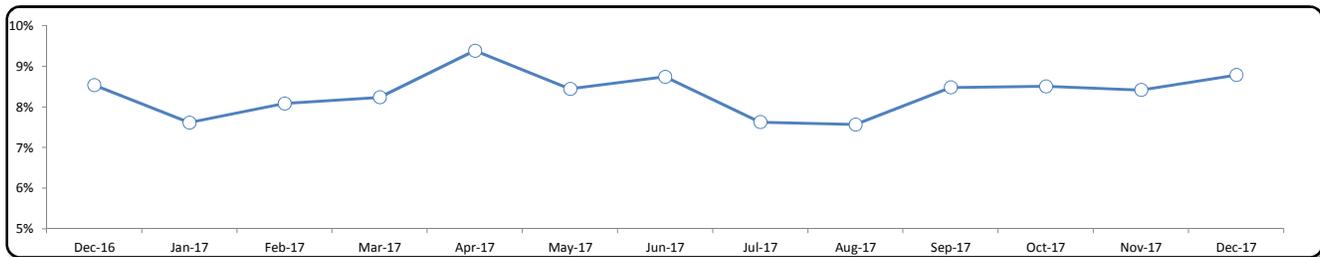
## Emergency readmission rates (within 30 days) - All Ages

Latest data available Dec-17	8.8%
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Vs same period last year Dec-16	8.5%
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Latest full quarter available Oct - Dec 17	8.6%
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Vs Oct - Dec 16 rates	8.1%
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Source: Dr Foster

The percentage of emergency readmission rates (within 30 days) for Brighton and Hove CCG in Dec-17 has increased against the same month last year, 8.8% in Dec-17 vs 8.5% in Dec-16. The number of emergency readmissions was 430 in Dec-17, out of 4,904 emergency spells. This demonstrates a disappointing lack of progress around re-admissions. The CCG will be launching its Care Homes locally commissioned service at the end of September and will be putting in additional services over Winter to support vulnerable people and reduce the chance of readmission. However this remains an area of concern for our system.

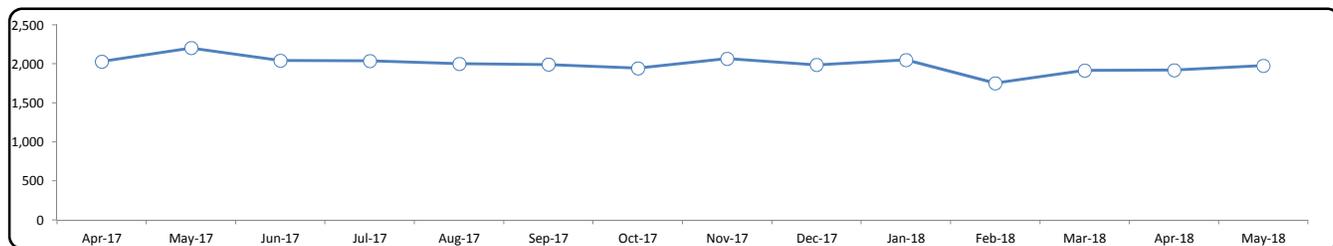
## Total Non-Elective Spells (Specific Acute) - All Ages

Latest data available Jan - Mar 18	5,717
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Vs same period last year Jan - Mar 17	6,136
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Latest full quarter available Jan - Mar 18	5,717
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Vs Annual planning (Jan - Mar 18)	5,818
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Source: SUS TnR / NHS England

The number of Non-elective spells for Brighton and Hove CCG in Jan - Mar 18 has decreased against the same months last year, 5,717 in Jan - Mar 18 vs 6,136 in Jan - Mar 17 (A decrease of -6.8%). There is a complex range of variables that contribute to the number of emergency admissions to hospital. These can include an improvement in the way the population is cared for in the community with primary and social care. The CCG Care Homes locally commissioned service is also expected to have a positive impact on this activity.

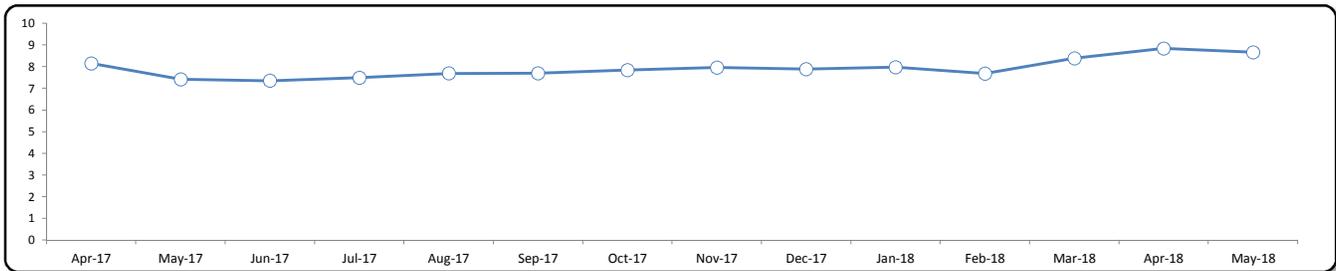
## Emergency average length of stay for patients aged 65+ (days)

Latest data available May-18	8.7
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Vs same period last year May-17	7.4
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Latest full quarter Jan - Mar 18 Avg.	7.8
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Vs Jan - Mar 17 Avg.	8.0
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Source: SUS

The average emergency spells length of stay (days) for patients aged 65+ within Brighton and Hove CCG in May-18, has increased against the same month last year, 8.7 in May-18 vs 7.4 in May-17. Whilst the whole number of admissions has reduced, along with delayed discharges, the average length of stay is skewed upwards by a number of very long admission spells.

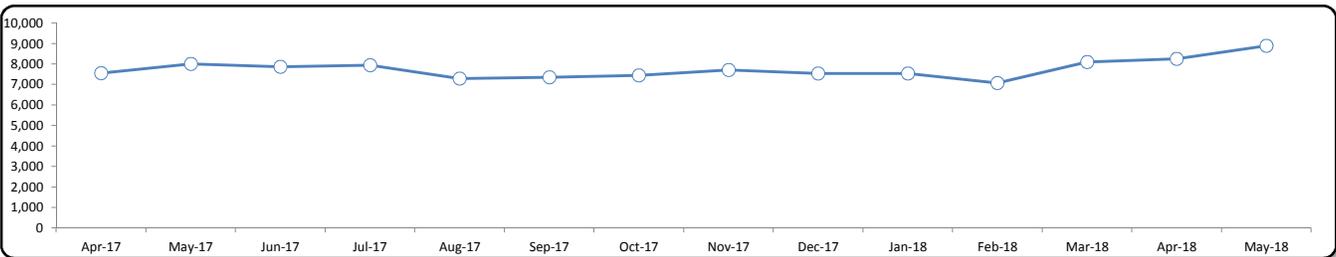
## A&E attendances (type 1-2 only\*) - All Ages

Latest available data May-18	8,888
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Vs same period last year May-17	8,005
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Latest full quarter Jan - Mar 18	22,698
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Vs Jan - Mar 17	22,244
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Source: SUS

The number of A&E attendances for Brighton and Hove CCG in May-18 has increased against the same month last year, 8,888 in May-18 vs 8,005 in May-17. This included the Easter Bank holiday, which occurred in April last year. whilst March showed a higher number of attendances, this followed a longer trend of a reduction in the number of people attending A&E.

\*Type 1 definition - consultant led 24 hour service with full resuscitation facilities and designated accommodation for the reception of accident and emergency patients. Type 2 definition - A consultant led single specialty accident and emergency service (e.g. ophthalmology, dental) with designated accommodation for the reception of patients

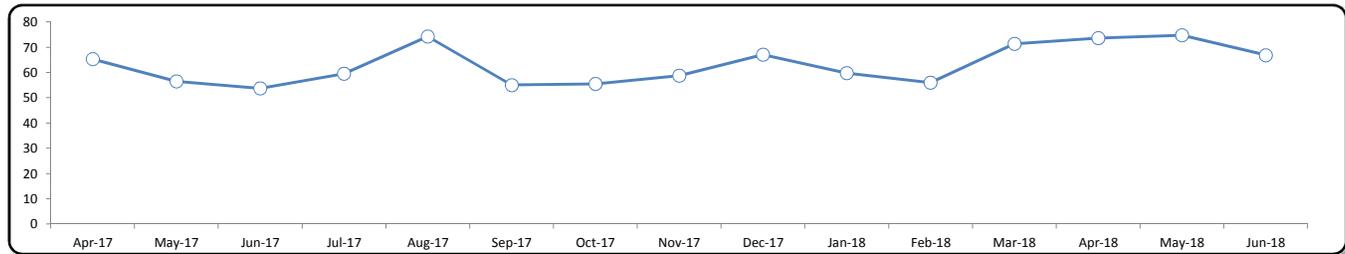
### Super Stranded patients (21+ days length of stay) at Brighton and Sussex University Hospital (B&H)

Latest available data  
Jun-18      67

Vs same period last  
year Jun-17      54

Quarter to date  
Apr - Jun 18 Avg.      72

Vs Apr - Jun 17 Avg.      58



Source: BSUH Urgent Care pathway, B&H CCG only

The average number of Brighton and Hove super stranded patients (21+ days length of stay) at Brighton and Sussex University Hospital in June-18 has increased against the same month last year, 67 in June-18 vs 54 in June-17. This represents a small number of patients, however it is a poor patient experience for these individuals. This is an area of concern and a focus of partnership working between the hospital, CCG and Adult Social Care

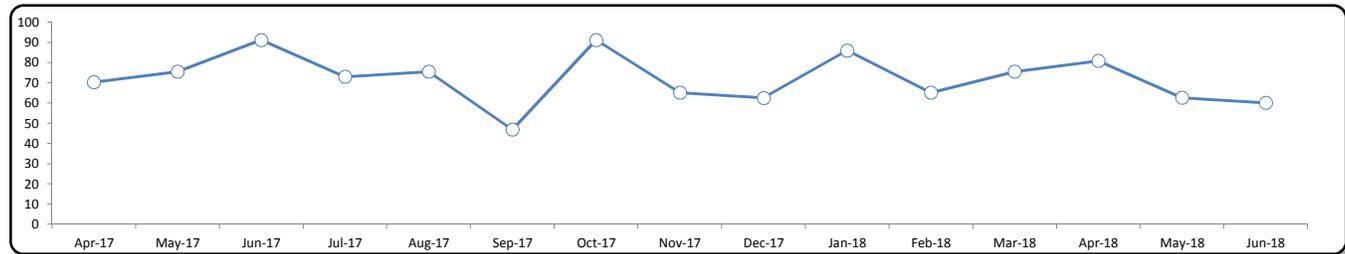
### New permanent admissions to nursing/residential care per 100,000

Latest available data  
Jun-18      60

Vs same period last  
year Jun-17      91

Quarter to date  
Apr - Jun 18      203

Vs plan      175



Source: Brighton and Hove LA

In the latest period Jun-18, the number of new permanent admissions to nursing/residential care per 100,000 has decreased against the same month last year, 60 in Jun-18 vs 91 in Jun-17. The actual number of new permanent admissions to nursing/residential care in Jun-18 was 23.

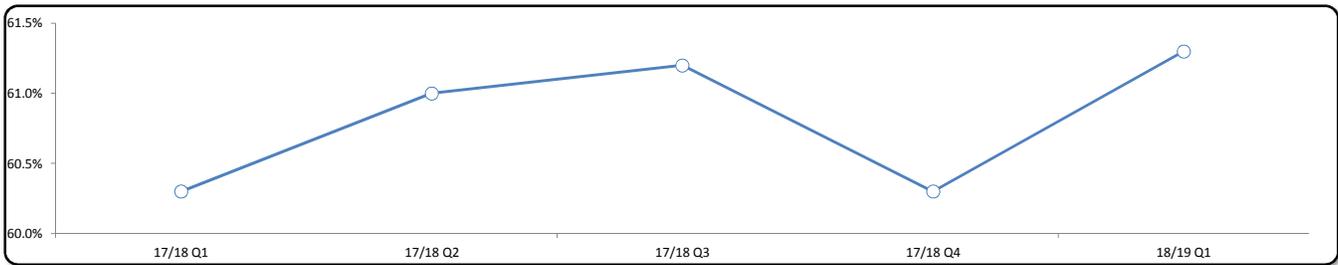
### % of support plans with telecare as a component

Latest available data Apr - Jun 18	61.3%
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Vs same period last year Apr - Jun 17	60.3%
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Quarter to date Apr - Jun 18	61.3%
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Vs plan	60.0%
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Source: Brighton and Hove LA

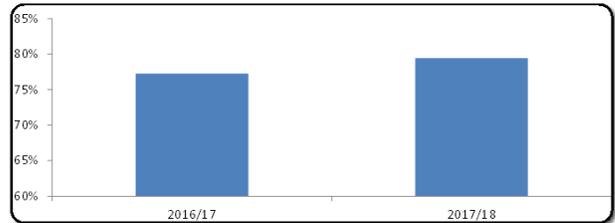
In the latest period 18/19 Q1, the % of support plans with telecare as a component has increased against the same quarter last year, 61.3% in 18/19 Q1 vs 60.3% 17/18 Q1.

### % older people at home 91 days after discharge from hospital into reablement/rehabilitation service

Latest available data Year 17/18	79.4%
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Vs same period last year 16/17	77.2%
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Vs plan	83%
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Source: Brighton and Hove LA

In the latest period 2017/18, the % older people at home 91 days after discharge from hospital into reablement/rehabilitation services has increased against last year, 79.4% in 2017/18 vs 77.2% in 2016/17.

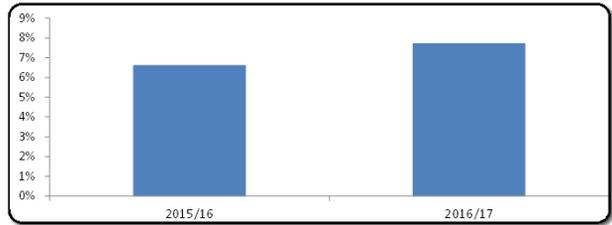
Performance needs to be viewed alongside Part 2 of the indicator % of overall older people discharged from hospital within the period who go into reablement services. Taken together these indicators reflect both effectiveness and coverage of the service.

## % older people discharged from hospital who go into reablement services

Latest available data Year 16/17	7.7%
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Vs same period last year 15/16	6.6%
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Vs plan	7.8%
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Source: Brighton and Hove LA

In the latest period 2016/17, the % older people discharged from hospital who go into reablement services has increased against last year, 7.7% in 2016/17 vs 6.6% in 2015/16. 2016/17 result is a high top quartile performance against comparators (Brighton and Hove ranked 1st out of 16 comparator authorities).

