

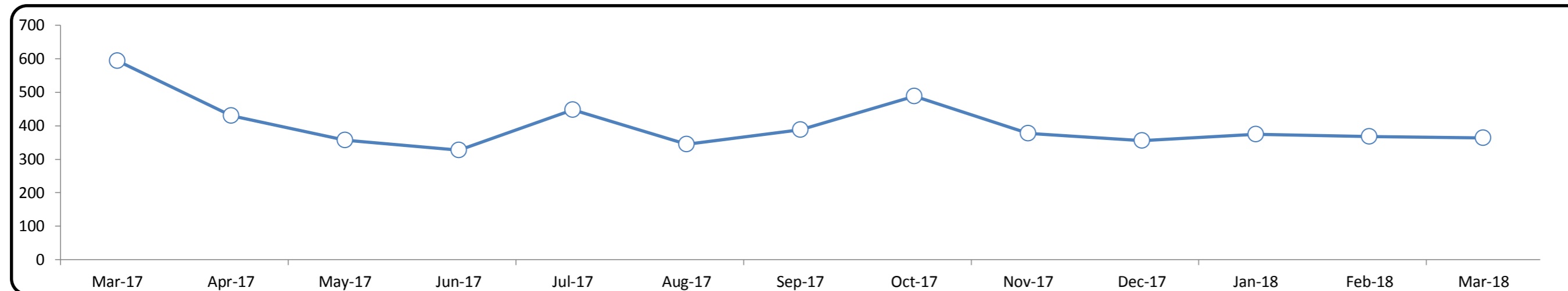
## Appendix 3

### Better Care Fund Performance Metrics

1. Performance figures reports are most recent data for each indicator
2. Latest performance is presented against the 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 Mar-18	363	Vs same period last year Mar-17	593	Latest full quarter available Jan - Mar 18	1,105	Vs BCF plan Jan - Mar 18	817
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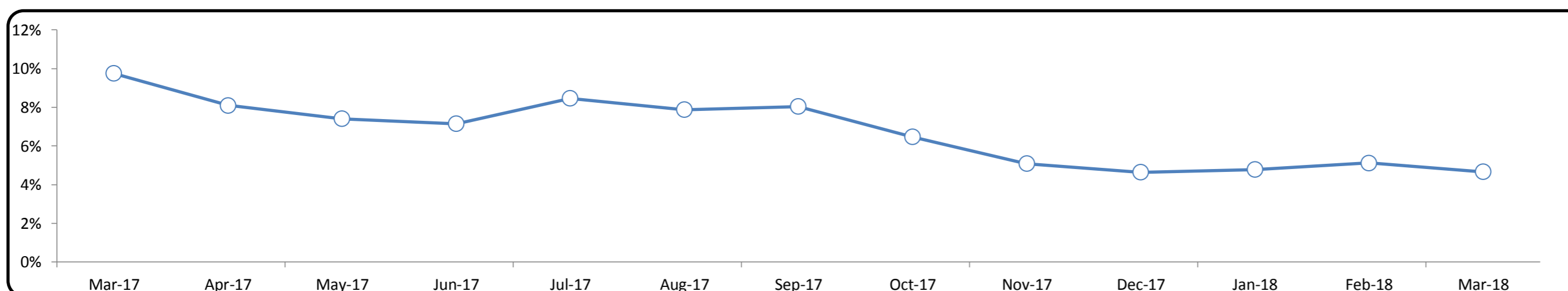


Source: NHS England Statistics

The number of Delayed Transfers of Care beddays per 100,000 Brighton and Hove population in Mar-18 has decreased against the same month last year, 363 in Mar-18 vs 593 in Mar-17. The total delayed days for Brighton and Hove during Mar-18 was 869. This demonstrates a significant improvement in delayed discharge performance in the Brighton and Hove System, returning performance to that which was seen 2 years ago. This is a response to the significant joint working across health and social care which will continue to drive down delayed discharges in 2018-19. However the performance is still not quite meeting the quarterly target we would like to achieve. Key causes of delays are time to assessment, discharge planning and identification of suitable capacity following discharge, these are foci of the BCF this year.

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

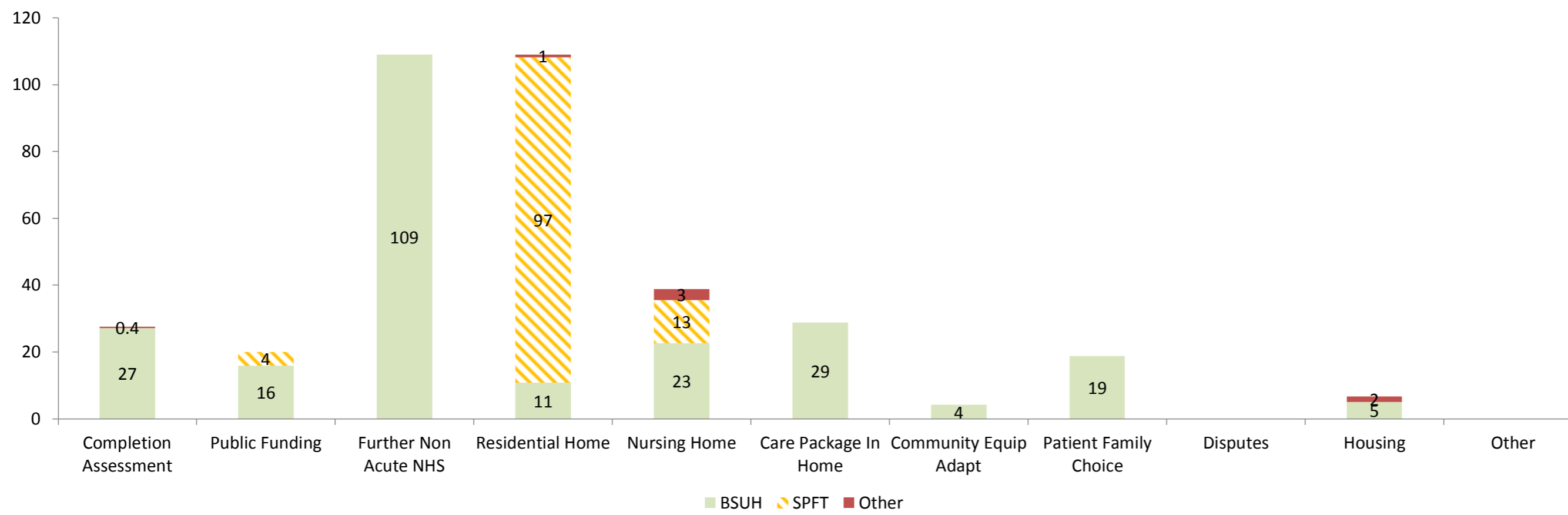
Latest data available Mar-18	4.7%	Vs same period last year Mar-17	9.7%	Other Adult Major Trauma Centres Mar-18	5.3%	National standard	3.5%
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Source: NHS England Statistics

The number of beds occupied by a delayed transfers of care patient at Brighton and Sussex University Hospital in Mar-18 has decreased against the same month last year, 4.7% in Mar-18 vs 9.7% in Mar-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.

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

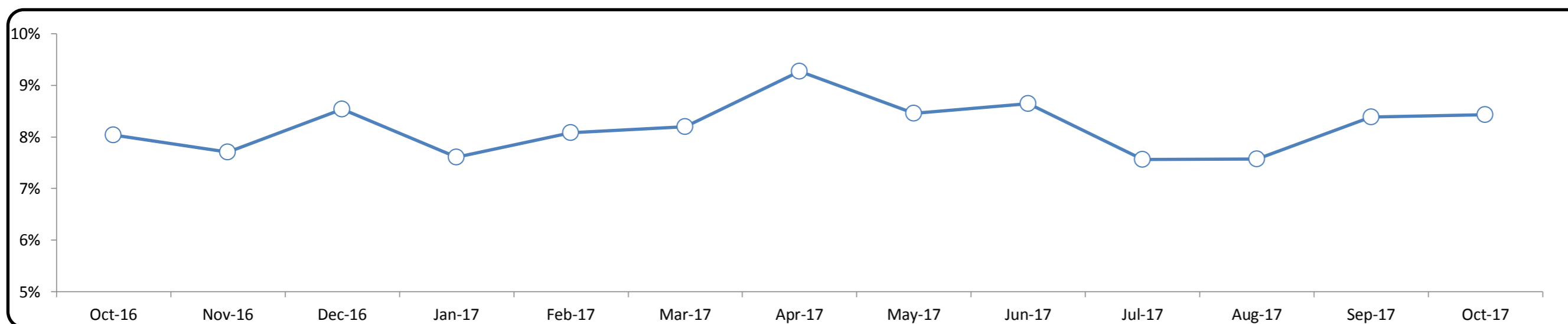


Source: NHS England Statistics

The top reason for delays for Brighton and Hove Unitary Authority area is Further Non Acute NHS and Residential Home with 30.0% of the delays each. 66.7% of the Brighton and Hove Unitary Authority area delays are from Brighton and Sussex University Hospital, 31.5% are from Sussex Partnership Foundation Trust and 1.7% from others providers. The top reason for delays for England is care package in home with 21.7% of the delays and 19.0% for further non-acute NHS.

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

Latest data available Oct-17	8.4%	Vs same period last year Oct-16	8.0%	Latest full quarter available Jul - Sep 17	7.8%	Vs Jul - Sep 16 rates	8.3%
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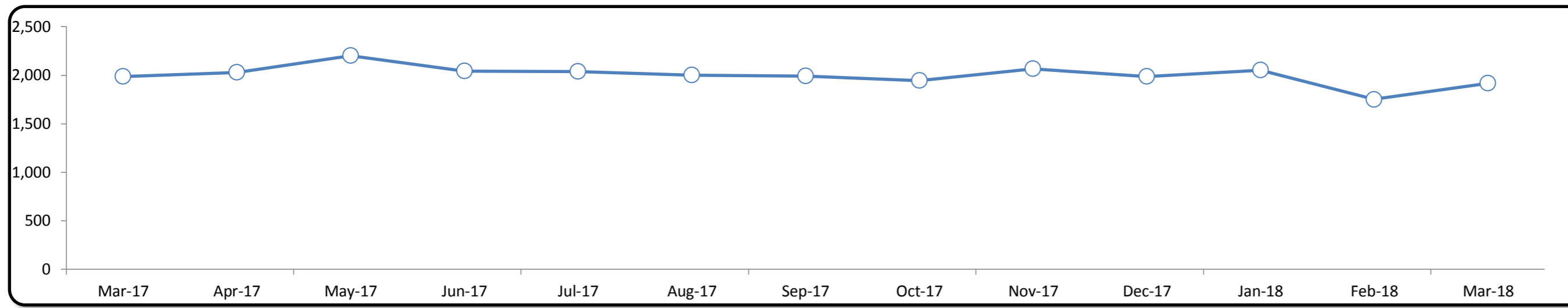


Source: Dr Foster

The percentage of emergency readmission rates (within 30 days) for Brighton and Hove CCG in Oct-17 has increased against the same month last year, 8.4% in Oct-17 vs 8.0% in Oct-16. The number of emergency readmissions was 455 in Oct-17, out of 5,399 emergency spells. This demonstrates a disappointing lack of progress around re-admissions. This is also a focus for the BCF steering group through this investment in Home First and a care homes locally commissioned service with Primary care.

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

Latest data available Jan - Mar 18	5,717	Vs same period last year Jan - Mar 17	6,136	Latest full quarter available Jan - Mar 18	5,717	Vs Annual planning (Jan - Mar 18)	5,818
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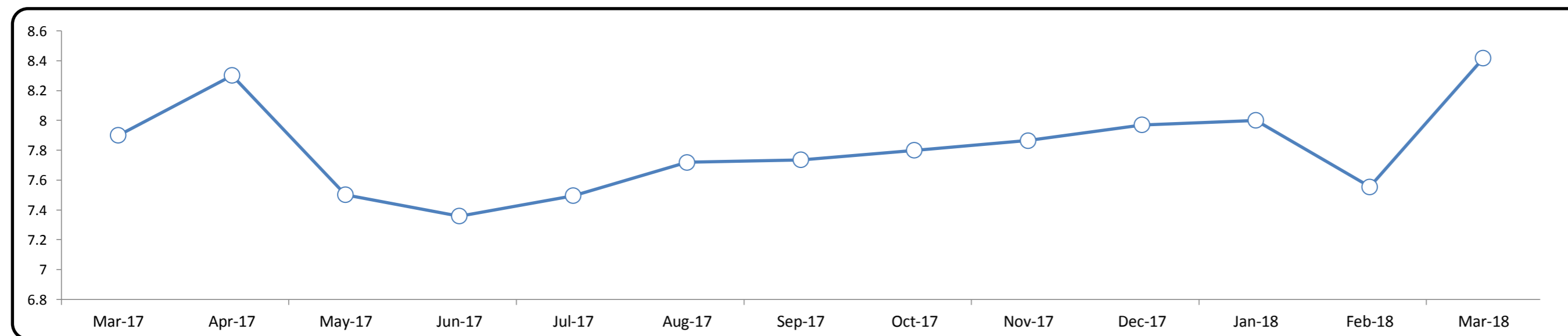


Source: SUS TnR / NHS England

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.

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

Latest data available Mar-18	8.4	Vs same period last year Mar-17	7.9	Latest full quarter Jan - Mar 18 Avg.	7.8	Vs Jan - Mar 17 Avg.	8.0
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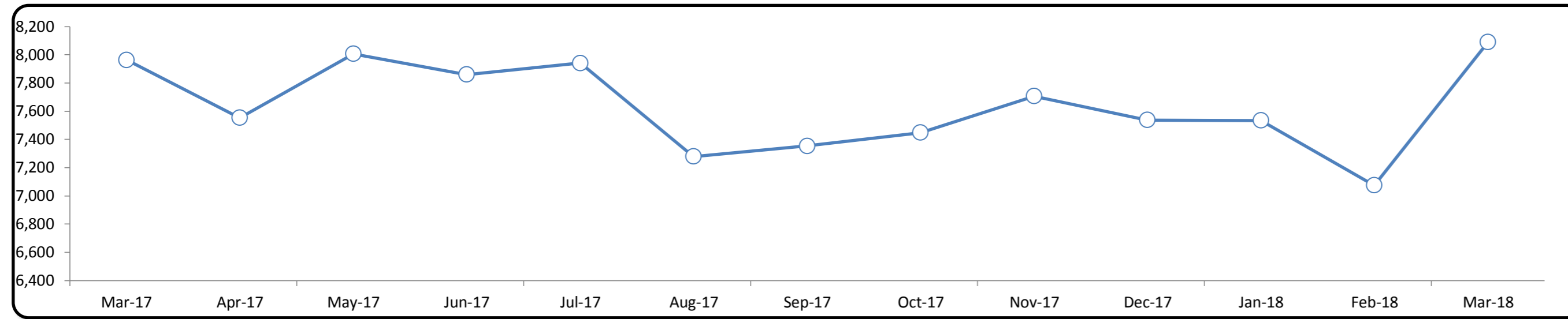


Source: SUS

The average emergency spells length of stay (days) for patients aged 65+ within Brighton and Hove CCG in Mar-18, has increased against the same month last year, 8.4 in Mar-18 vs 7.9 in Mar-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 Mar-18	8,090	Vs same period last year Mar-17	7,963	Latest full quarter Jan - Mar 18	22,698	Vs Jan - Mar 17	22,244
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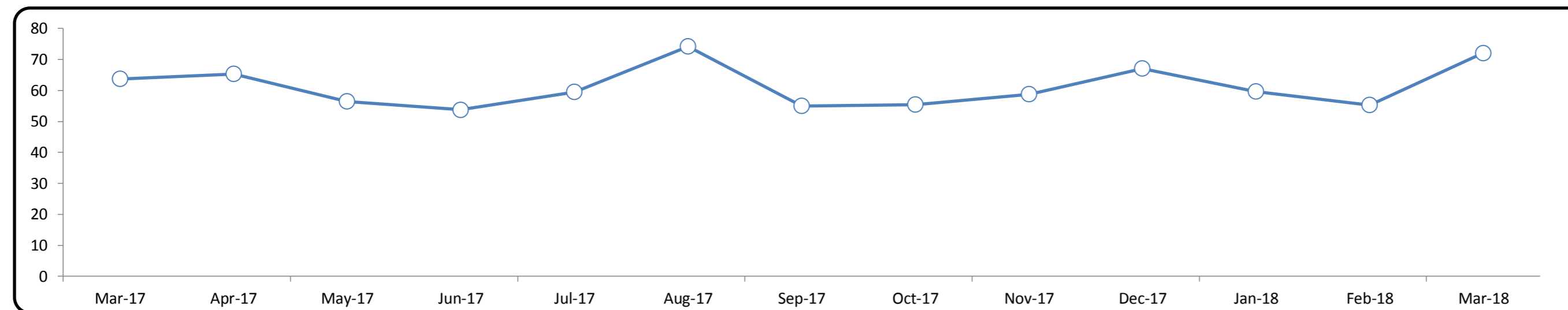
Source: SUS

The number of A&E attendances for Brighton and Hove CCG in Mar-18 has increased against the same month last year, 8,090 in Mar-18 vs 7,963 in Mar-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 (all ages)

Latest available data Mar-18	72	Vs same period last year Mar-17	64	Quarter to date Jan - Mar 18 Avg.	62	Vs Jan - Mar 17 Avg.	62
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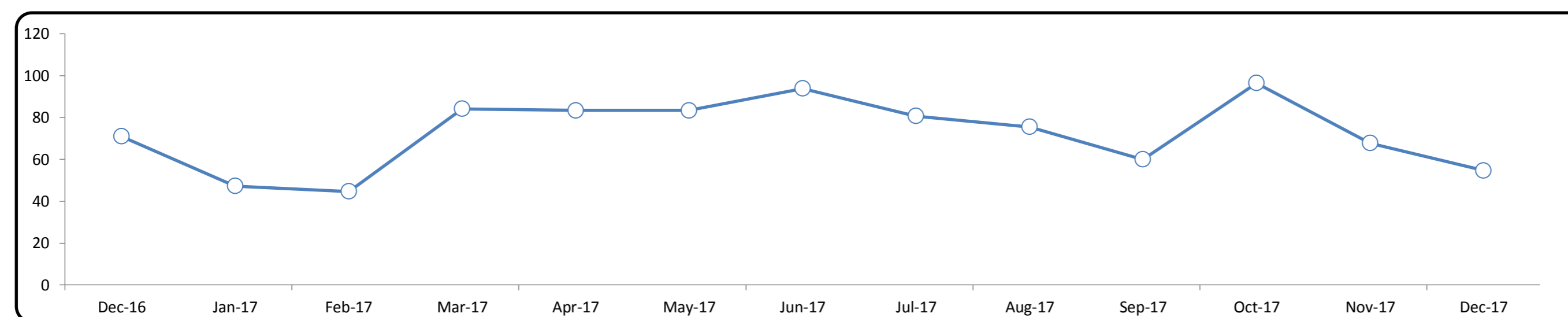


Source: BSUH Urgent Care pathway

The average number of super stranded patients (21+ days length of stay) at Brighton and Sussex University Hospital in Mar-18 has increased against the same month last year, 72 in Mar-18 vs 64 in Mar-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 Dec-17	55	Vs same period last year Dec-16	71	Quarter to date Oct - Dec 17	219	Vs plan	N/A
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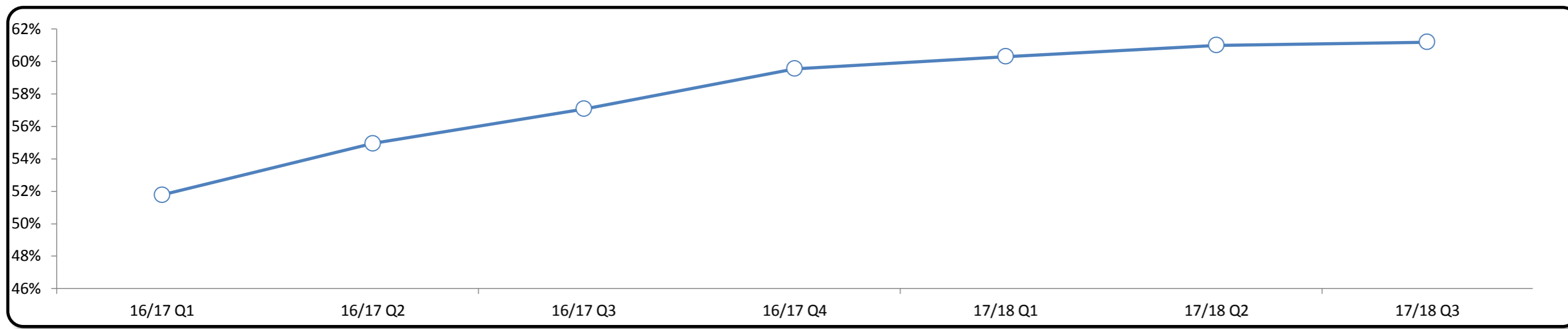


Source: Brighton and Hove LA

In the latest period Dec-17, the number of new permanent admissions to nursing/residential care per 100,000 has decreased against the same month last year, 55 in Dec-17 vs 71 in Dec-16. The actual number of new permanent admissions to nursing/residential care in Dec-17 was 21.

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

Latest available data Oct - Dec 17	61%	Vs same period last year Oct -Dec 16	57%	Quarter to date Oct - Dec 17	61%	Vs plan	60%
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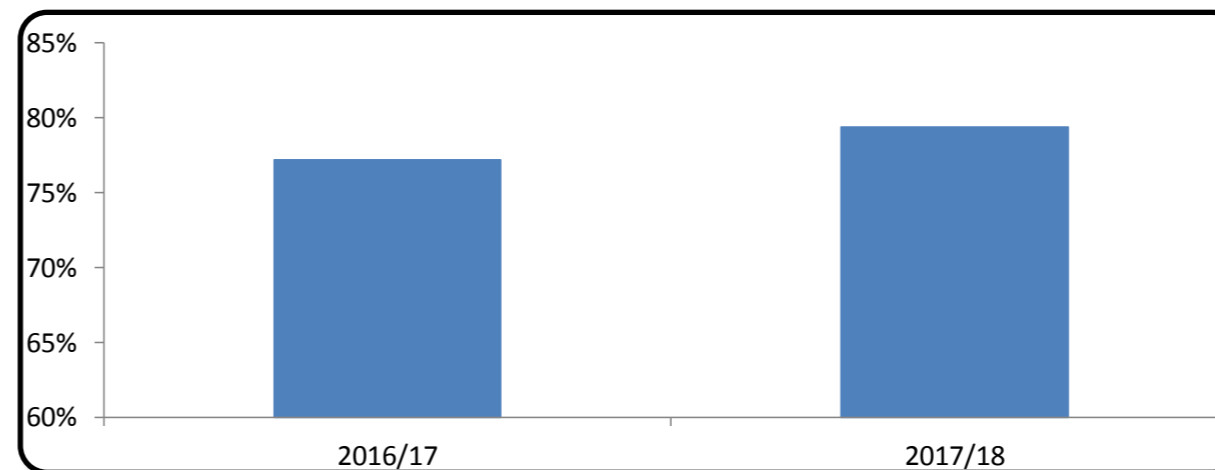


Source: Brighton and Hove LA

In the latest period 17/18 Q3, the % of support plans with telecare as a component has increased against the same quarter last year, 61.2% in 17/18 Q3 vs 57.1% 16/17 Q3.

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

Latest available data Year 17/18	79.4%	Vs same period last year 16/17	77.2%
		Vs plan	83%



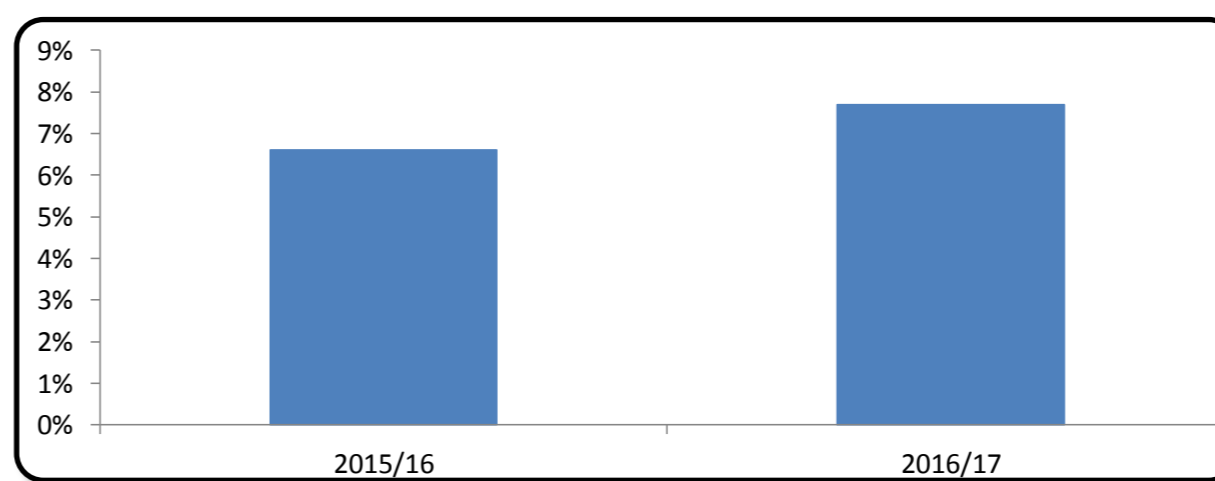
Source: Brighton and Hove LA

In the latest period 2016/17, the % older people at home 91 days after discharge from hospital into reablement/rehabilitation services has decreased against last year, 77.2% in 2016/17 vs 83.2% in 2015/16.

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 17/18	7.7%	Vs same period last year 15/16	6.6%
		Vs plan	7.8%



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).

