

## 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

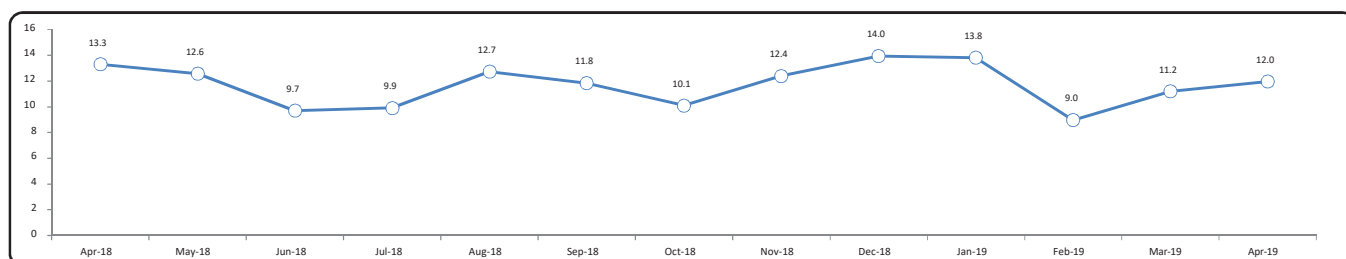
### Delayed Transfers of Care (DToc) beddays per 100,000 adult pop per day

Latest data available Apr-19	12.0
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Vs same period last ye ar Apr- 18	13.3
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Latest full quarter available Jan-Mar 19	11.4
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Vs BCF plan Jan-Mar 19	9.1
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Source: NHS England Statistics

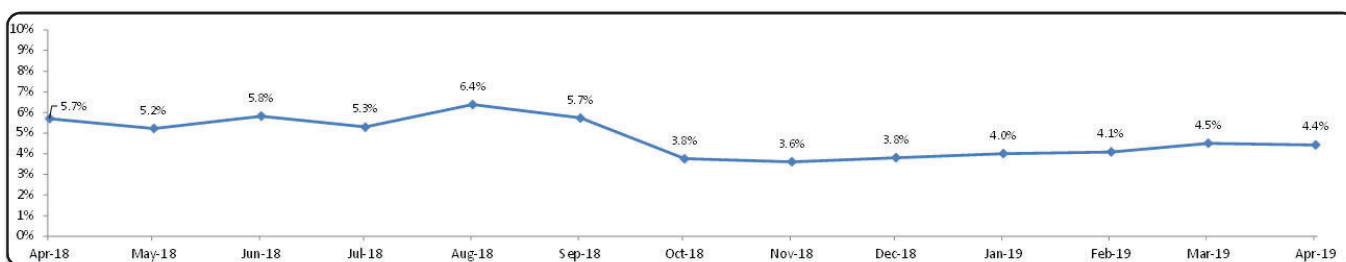
The number of Delayed Transfers of Care beddays per 100,000 Brighton and Hove population per day, over the year 2018/19 has decreased against the same periods last year, 13.3 in April 2018 to 11.2 in March 2019. During the intervening months winter pressures on the health and care system saw delays peak at 14.0 in December 2019. There is an overall improvement in the number of delayed transfers although performance is still not at the desired standard set by the system and so continues to be a major focus for the care system and the Better Care Fund.

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

Latest data available Apr-19	4.4%
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Vs same period last ye ar Apr- 18	5.7%
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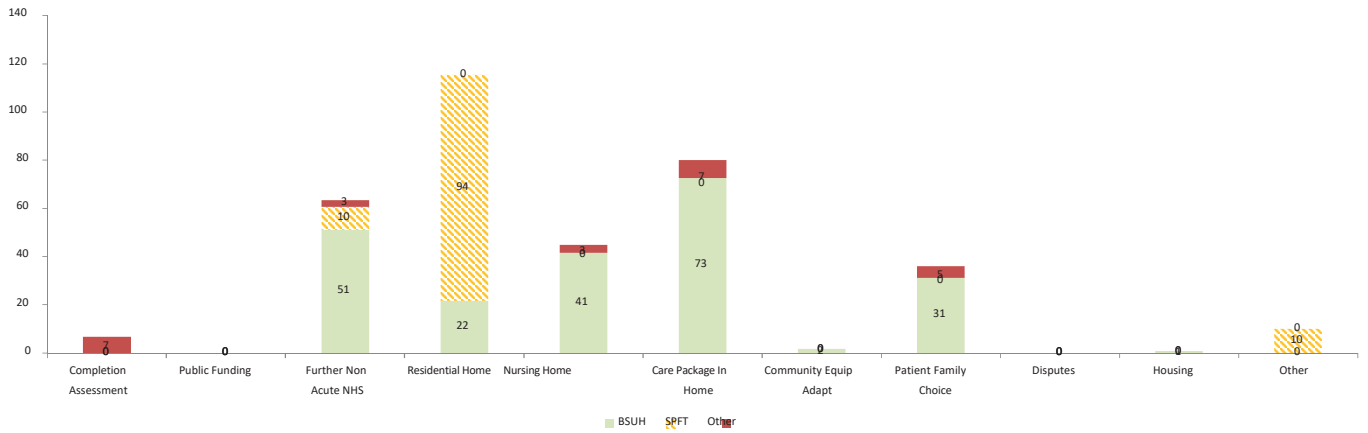
National standard	3.5%
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Source: NHS England Statistics

The number of beds occupied by a delayed transfers of care patient at Brighton and Sussex University Hospital has decreased year on year, 4.5% in March 2019 vs 5.7% in April 2018. 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%.

**Total Brighton and Hove Unitary Authority area - Delays by reason per 100,000 - Apr-19**



Source: NHS England Statistics

The top reason for delays for Brighton and Hove Unitary Authority area per 100,000 population is finding Residential Home placements. This is a change from the previous year where the main single driver for delays was Care Packages. 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.

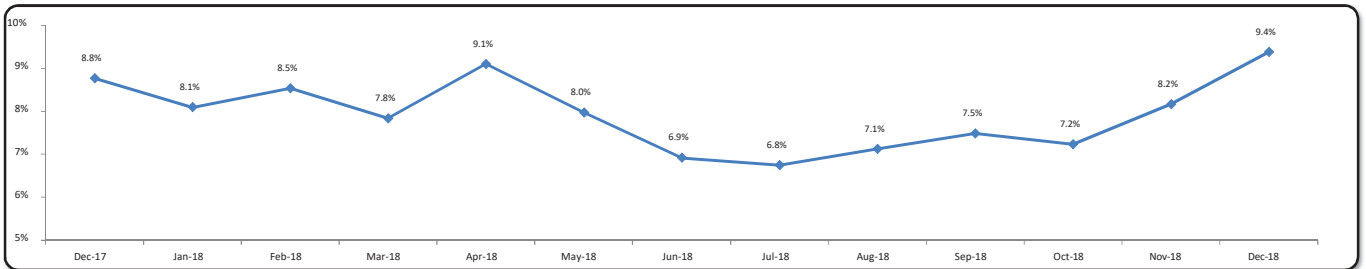
**Emergency readmission rates (within 30 days) - All Ages**

Latest data available Dec-18 9.4%

Vs same period last year Dec-17 8.8%

Latest full quarter available Oct-Dec 18 8.2%

Vs Oct-Dec 17 rates 8.5%



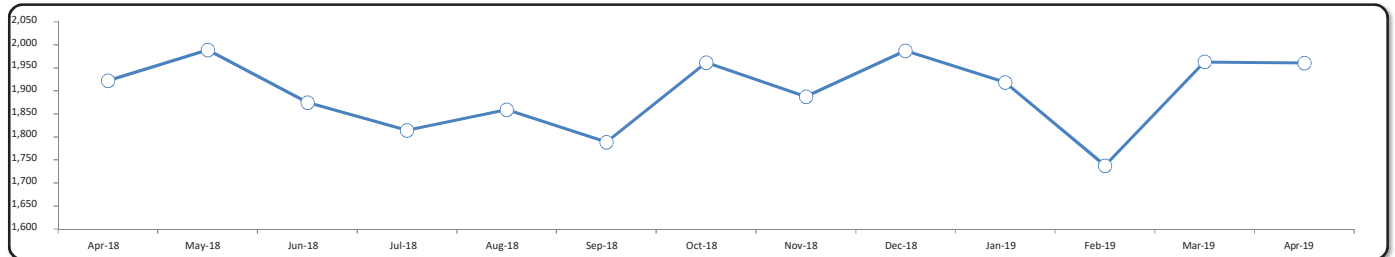
Source: Dr Foster

The percentage of emergency readmission rates (within 30 days) for Brighton and Hove CCG in Dec-18 (latest data) has increased against the same month last year, 9.4% in Dec-18 vs 8.8% in Dec-17. This demonstrates a need for further progress on work to target re-admission rates. The CCG is rolling out its Care Homes locally commissioned service and has put in additional services 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	1,961
Apr-19	

Vs same period last year	1,922
Apr-18	



Source: SUS TnR / NHS England

The number of Non-elective spells for Brighton and Hove CCG in April 2019 has stayed virtually the same against the same month last year, 1,961 Mar 19 vs 1,922 in Mar 18. 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.

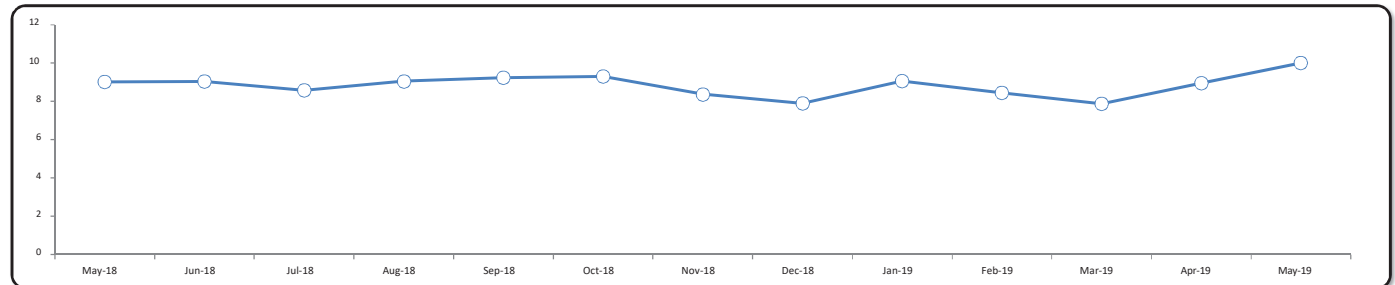
### Emergency average length of stay for patients aged 65+ (days)

Latest data available	10.0
May-19	

Vs same period last year	9.0
May-18	

Latest full quarter	8.5
Jan - Mar 19 Avg.	

Vs Jan - Mar 18 Avg.	8.4
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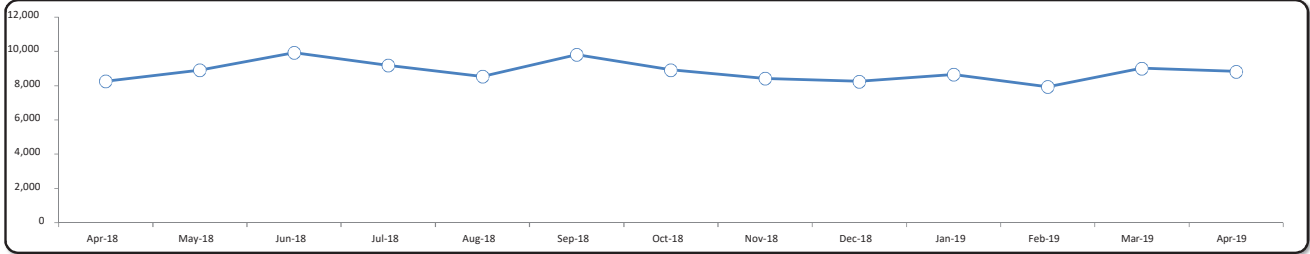
Source: SUS

The average emergency spells length of stay (days) for patients aged 65+ within Brighton and Hove CCG in May 2019, has increased slightly against the same month last year, 10.0 vs 9.0 Mar-18. 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 (Excluding planned follow ups) - All ages

Latest available data  
Apr-19 8,820

Vs same period last  
year Apr- 18 8,246



Source: SUS TnR / NHS England

The number of A&E attendances for Brighton and Hove CCG in April 2019 has increased against the same month last year, 8,820 in April 2019 vs 8,246 in April 2018

\*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

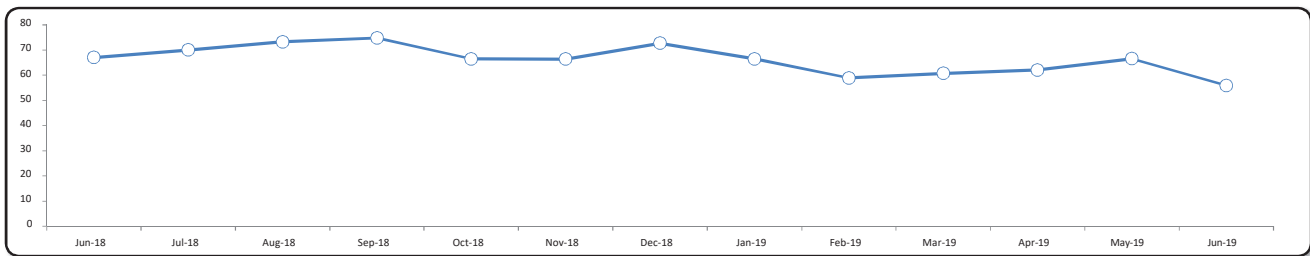
### Super Stranded patients (21+ days length of stay) at Brighton and Sussex University Hospital (B&H CCG)

Latest available data  
Jun-19 56

Vs same period last  
year Jun- 18 67

Quarter to date  
Apr - Jun 19 Avg. 62

Vs Apr - Jun 18 Avg. 72



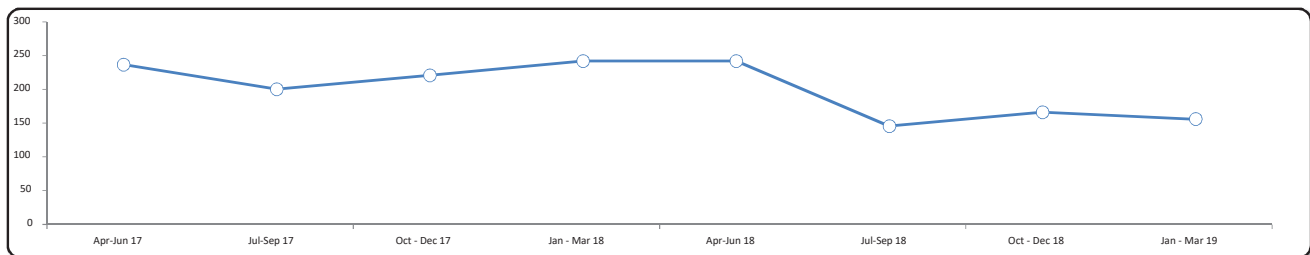
Source: BSUH Urgent Care pathway, B&H CCG only, Oct-18 not a full month

The average number of Brighton and Hove super stranded patients (21+ days length of stay) at Brighton and Sussex University Hospital in April - June 2019 (latest data) has decreased slightly against the same quarter last year, 62 in Apr - Jun 2019 vs 67 in Apr - Jun 2018. 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  
Jan-Mar 19 156

Vs same period last ye  
ar Jan- Mar 18 242



Source: Brighton and Hove LA

In the latest quarter Jan-Mar 19, the number of new permanent admissions to nursing/residential care per 100,000 has decreased against the same quarter last year, 156 in Jan-Mar 19 vs 242 in Jan-Mar 18.

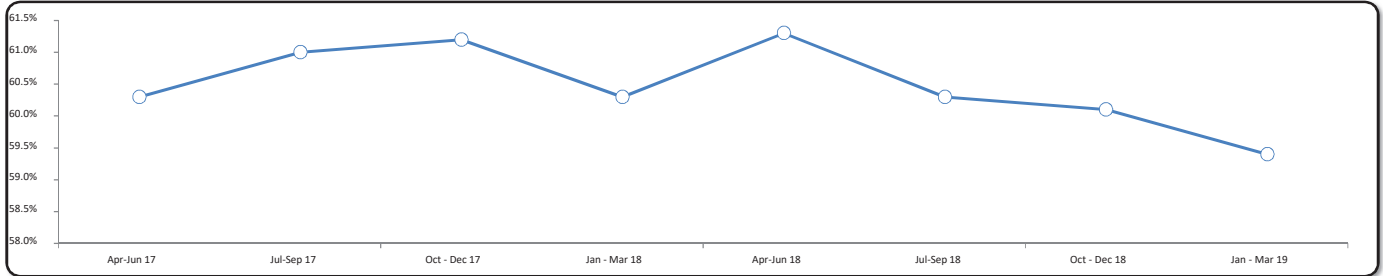
The actual number of new permanent admissions to nursing/residential care in Jan-Mar 19 was 60.

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

Latest available data Jan-Mar 19	59.4%
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Vs same period last year Jan-Mar 18	60.3%
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Vs plan	60.0%
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Source: Brighton and Hove LA

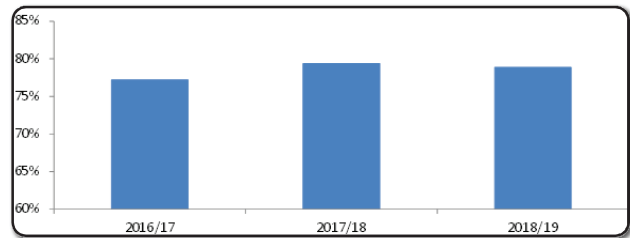
In the latest quarter Jan-Mar 19, the % of support plans with telecare as a component has decreased against the same quarter last year, 59.4% in Jan-Mar 19 vs 60.3% Jan-Mar 18.

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

Latest available data Year 18/19	78.9%
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Vs same period last year 17/18	79.4%
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Vs plan	82.1%
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Source: Brighton and Hove LA

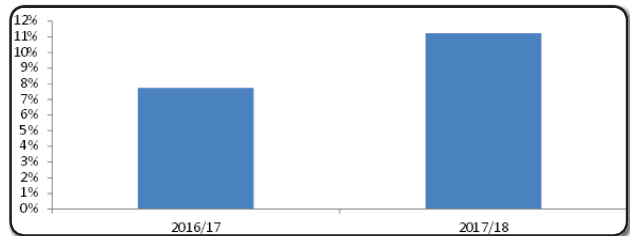
In the latest period 2018/19, the % older people at home 91 days after discharge from hospital into reablement/rehabilitation services has decreased against last year, 78.9% in 2017/18 vs 79.4% in 2018/19. Performance needs to be viewed alongside Part 2 of the indicator % of overall older people discharged 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	11.2%
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Vs same period last year 15/16	7.7%
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Vs plan	7.7%
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Source: Brighton and Hove LA

In the latest period 2017/18, the % older people discharged from hospital who go into reablement services has increased against last year, 11.2% in 2017/18 vs 7.7% in 2016/17. 2017/18 result is a high top quartile performance (Brighton and Hove ranked 1st of all England authorities).

