This template is to be used for part 2 of HWB BCF plans and replaces the original template available on the NHS England BCF webpage. The new version contains more information in the metrics section and is locked in order to assist in the NHS England assurance process .

This new template should be used for submitting final BCF plans for the 4th April

Association

Finance - Summary

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. It is important that these figures match those in the plan details of planning template part 1. Please insert extra rows if necessary

Organisation		Spending on BCF schemes in 14/15 /£	Minimum contribution (15/16) /£	Actual contribution (15/16) /£
East Riding of Yorkshire Council (ERoYC)	Y	£6,627,000	£2,008,000	£2,008,000
East Riding of Yorkshire CCG (ERYCCG)	N		£19,212,000	£19,212,000
Vale of York CCG (YoYCCG)	N		£1,258,000	£1,258,000
BCF Total		£ 6,627,000	£ 22,478,000	£ 22,478,000

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.

The BCF pooled budget arrangements will be supported by agreed financial risk sharing protocol. Key mitigating actions include:

Appropriate Key Performance Indicators and associated financial implications for service providers
 Identifying financial contingencies in plans commensurate to identified risk

Contingency plan:	2015/16	Ongoing	
	Planned savings (if targets fully achieved)	2,160,000	2,160,000
Secondary Care admissions for ambulatory care	Maximum support needed for other services (if targets not achieved)		
	Planned savings (if targets fully achieved)		
Outcome 2	Maximum support needed for other services (if targets not achieved)		

Image shows and sho	BCF Investment	Lead provider	2014/15 spend		2014/15 b	enefits	2015/16	6 spend	2015/16 benefits		
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Outcomes and metrics

Outcomes & Metrics

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Please provide details of how your BCF plans will enable you to achieve the metric targets, and how you will monitor and measure achievement

All the metrics identified below will be delivered by the ambulatory care model. The model will commence to deliver reductions in Avoidable Non Elective Admission from 1st October 2014 n 2 CGC localities. There will therefore only be a small saving seen in 2014 f. the full year effect will not be seen until 2015/16. The anticipated full year reductions will be equa to 1,080 spells in a full year or a 16% reduction in total annual ACS spells and a financial saving of £2.2m. The King's Fund suggest that reductions in ACS spells in the winter period, Therefore the reduction only appears to be on the first 6 months when compared to the average of the baseline 12 month period. The baseline has been ranged of 8% to 18% of all ACS spells. The baseline has the winter period, Therefore the reduction only appears to be on the first 6 months when compared to the average of the baseline 12 month period. The baseline has been raduced to 12, 45% of 14, 45\% of 14, 45\%

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

The CCG has established several local measures for patient experience, including a Friends and Family test (FFT), within the operation of our new Long Term Conditions Comorbidity scheme, which meet the criteria stated in the guidance and would be collected monthy. The FTT measure has been introduced for a 3 month period for LTC to ask patients 'How Welvy are you to recommend the long term conditions service to your friends and family if they required similar care or thera? There are 6 possible responses. Patients are also asked to confirm the main reason for their score. Our preference is to use the scores from this test, however, the scheme has only recently commenced and we do not have a baseline for performance comparison at this time and cannot set a level of improvement. We are proposing to use this local measure when available earlier.

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

Please see Better Care Fund assurance process within main template (Part 1).

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

Not applicable.

Please complete all pink cells:

Metrics Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000 population Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services	Metric Value Numerator Denominator Metric Value Numerator	Baseline* 718.6 545 75700 (Apr 2012 - Mar 2013) 89.20 75	Performance underpinning April 2015 payment N/A N/A	Performance underpinning October 2015 payment 690.0 575 83300 (Apr 2014 - Mar 2015) 92.00 86	
NB. The metric can be entered either as a % or as a figure e.g. 75% (0.75) or 75.0	Denominator	85 (Apr 2012 - Mar 2013)		93 (Apr 2014 - Mar 2015)	
Delayed transfers of care (delayed days) from hospital per 100,000	Metric Value	224.7	222.3	205.2	
population (average per month)	Numerator	9285	5558	3448 280113	
NB. The numerator should either be the average monthly count or the	Denominator	275467	277840		
appropriate total count for the time period		(April 12 - June 13)	Apr - Dec 2014 (9 months)	Jan - Jun 2015 (6 months)	
Avoidable emergency admissions (average per month)	Metric Value	167.9	157.3	170.8	
NB. The numerator should either be the average monthly count or the	Numerator	6803	3227	3530	
Appropriate total count for the time period	Denominator	337716	341997	344422	
		(April 14- March 15)	Apr - Sep 2014 (6 months)	Oct 2014 - Mar 2015 (6 months)	
Patient / service user experience For local measure, please list actual measure to be used. This does not need to be completed if the national metric (under development) is to be used		(State time period and select no. of months)	N/A	(State time period and select no. of months)	
Emergency readmissions within 30 days of discharge from hospital.	Metric Value	14.3	14.3	14.3	
	Numerator	4132	2039	2122	
The metric is the count of readmissions expressed as a percentage of relevant Non-Elective admissions. Readmissions and Non-Elective emergency spell activity at main acute providers as determined using the algorithm agreed within the national acute provider contract based on ONS resident population. Definition as per Monitor guidance 2014/15 National Tariff Payment System - revised 26/2/2014, clause 6.3.2 Emergency readmissions within 30 days. (http://www.monitor.gov.uk/NT).	Denominator	28931 (February 2013 - January 2014)	14278 (April - September 2014)	14861 (October 2014 - March 2015) 6	