



Cheshire and Merseyside

## Wirral Place Review Meeting 24<sup>th</sup> October 2022



### Areas for discussion



Cheshire and Merseyside

- **Urgent Care**
  - Action plan for reduction in NCTR (non-criteria to reside).
  - Place wide report on urgent care system to include use of social care indicators.
  - Developed winter plans including your approach to delivery and oversight through winter period.
- **Place Maturity self-assessment**
  - Key outputs
  - Identification of areas of support the Central Team could provide.
  - Impact of delegation/governance changes.

## Urgent Care



### Urgent Care – No Criteria To Reside (NCR)

- ~220 at WUTH against 95% recording level.
- Daily tracking of people by Pathway and readiness for discharge.
- Internal report to check accuracy including those subject to ongoing care within hospital.
- System Discharge Cell and Discharge Director.
- Exploring 'lift and shift' of Pathway 1 waiters to residential care beds.
- Separate Integrated Discharge Team support function targeting NCR.
- End of Life Personal Care (Fast Track) expansion by end of year.
- Overall Winter Plan aims to support reduction in NCR - need assurance on delivery and impact.

## Urgent Care – System Indicators Overview (1)

- Daily operational performance reporting to Chief Operating Officers.
- Currently refining our Urgent and Emergency Care (UEC) triggers and tolerances.
- Tracking whether the system is meeting the targets and whether there is any change to common cause variation.
- Example of breakdown of metrics circulated prior to Place Review Meeting.
- Activity levels remain high and system flow blockages are being felt strongest in the acute and mental health inpatient facilities.
- General practice also reporting high demand for services.
- Home First and Virtual Wards are new services with less than one month data.
- Capacity in care homes is good but placing and matching is problematic. Domiciliary care availability is below pre-pandemic levels.

## Urgent Care – System Indicators Overview (2)

Data as of 17<sup>th</sup> October 2022

- ED 4 Hour Performance YTD: 76.67% All types & 50.91% Type 1 (7 from 9 in C&M)
- NEL: Marginal reduction compared to last year.
- NCR 220~ / G&A Occupancy ~98%/ Mental Health ~100%
- Ambulance: See and Treat/Hear and Treat @ C&M Average
- Ambulance Turnaround Times >60: Ave 5 per day.
- Type 3/Walk In Centre Activity - Rising activity trend since April 2022 and last year.
- UCR : 220 per month.
- D2A LOS >32 days v 21 day LOS target (Pathway main challenge but 27 down to 11 waiting now).
- Care Market Hours per month circa 30% less than pre covid (3,300/2,300).
- Care Home Capacity: ~340 but less admissible on the day.

## Urgent Care– Winter Plan (1)

- Developed by system partners in Wirral through Chief Operating Officers Group, Strategy and Transformation Group and A&E Delivery Board (AEDB).
- Operational delivery alongside change programmes (see accompanying information).
- Minimum ~£6.5m investment, mapped and agreed with Wirral Place Finance Investment and Resources Group.
- Key initiatives include: Virtual Wards, HomeFirst, Care Market Sufficiency, 71+22 D2A, Pathway 1 Step Down Beds, Frailty and Respiratory @ Front Door & EOL Personal Care.



Wirral University Teaching Hospital  
NHS Foundation Trust

Primary Care Partnership



Wirral Community  
Health and Care  
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## Urgent Care – Winter Plan (2)

- AEDB yet to sign off plan – meeting 25/10/22.
- Key risk of hospital occupancy vs ability of schemes to deliver reduced G&A utilisation.
- Delivery and oversight covered in supporting information, headlines:
  - Daily operational reporting.
  - Minimum weekly and up to daily Chief Operating Officer oversight of UEC and WP delivery.
  - Escalation to Place Director/Wirral System CEOs Group if required.
  - Fortnightly Strategy and Transformational Group oversight of new investments and review of existing initiatives.
  - AEDB monthly.

## Place Maturity Self Assessment



Category	Summary	Development Need	NHS C&M Support
<b>Ambition and Vision</b>	<ul style="list-style-type: none"> <li>Established.</li> <li>Ambition and vision developed by partners.</li> <li>Clear links to Wirral Plan 2026.</li> </ul>	<ul style="list-style-type: none"> <li>Ensure ambition communicated and understood.</li> <li>Alignment with new strategies, plans and objectives.</li> <li>Reporting of impact to Place Based Partnership Board.</li> </ul>	<ul style="list-style-type: none"> <li>Affirmation of importance of "place".</li> <li>Communication and engagement support.</li> <li>Engagement in HCP Strategy and any NHS plans.</li> <li>Place based finance and performance reports to demonstrate impact.</li> </ul>
<b>Leadership and Culture</b>	<ul style="list-style-type: none"> <li>Established place leadership and partnership working.</li> <li>Evolving culture (new people involved and new governance - need to revisit).</li> </ul>	<ul style="list-style-type: none"> <li>Values and behaviours and ways of working.</li> <li>Conclude MoU with VCFSE.</li> <li>Wider primary care and provider engagement.</li> <li>Developed communications and engagement approach.</li> </ul>	<ul style="list-style-type: none"> <li>Development programme for PBPB.</li> <li>Support for MoU.</li> <li>Support for wider engagement of primary care and providers.</li> <li>Place focused support for communications and engagement activities.</li> </ul>

Category	Summary	Development Need	NHS C&M Support
<b>Design and Delivery</b>	<ul style="list-style-type: none"> <li>Established.</li> <li>Finance, planning and delivery of services, estates (including sustainability) local working arrangements being built upon.</li> </ul>	<ul style="list-style-type: none"> <li>Connectivity to new place governance arrangements.</li> <li>Alignment with new strategies, plans and objectives.</li> <li>Alignment with NHS C&amp;M/ICS programmes.</li> </ul>	<ul style="list-style-type: none"> <li>Continue to develop place governance.</li> <li>Clarity on alignment of place and wider system programmes.</li> <li>Scheme of delegation for Place Director.</li> <li>Clear resource allocation to Place Director.</li> <li>Place reporting mechanisms.</li> </ul>
<b>Governance</b>	<ul style="list-style-type: none"> <li>Developed with partners.</li> <li>Established overall, with some elements evolving.</li> <li>Wirral Council and historic CCG relationship transposed into new arrangements.</li> <li>Provider collaboration evolving from strong position.</li> </ul>	<ul style="list-style-type: none"> <li>Finalised Terms of Reference for PBPB and supporting groups.</li> <li>Continue to develop shared/aligned governance across system.</li> <li>Clarity on delegation to place for (a) Council – NHS C&amp;M and (b) NHS C&amp;M – Place.</li> </ul>	<ul style="list-style-type: none"> <li>Ensure congruence of place governance with NHS C&amp;M requirements.</li> <li>Formal approval of place governance arrangements.</li> <li>Clarity on delegation to place.</li> </ul>