Agenda Item x

Title	Unscheduled Care Improvement Programme Update
Authors	Janelle Holmes, Chief Executive, Wirral University Teaching Hospital NHS Foundation Trust
Report for	Wirral Place Based Partnership Board
Date of Meeting	23rd November 2023

Report Purpose and Recommendations

The purpose of this report is to provide the Board with information and assurance on the work of the Unscheduled Care Improvement Programme for Wirral.

It is recommended that the Board notes this update.

Key Risks

The report relates to the following key strategic risks identified in the Place Delivery Assurance Framework presented to the Wirral Place Based Partnership Board on 19th October 2023:

- *PDAF 1 Service Delivery:* Wirral system partners are unable to deliver the priority programmes within the Wirral Health and Care Plan which will result in poorer outcomes and greater inequalities for our population.
- *PDAF 3 Collaboration:* Leaders and organisations in the Wirral health and care system may not work together effectively to improve population health and healthcare.

There are also associated operational risks for the system when acute hospital beds are not available for people who meet the criteria to reside in hospital. This may result in the further risks of:
- Patient deconditioning and potential harm associated with long lengths of stay.
- The inability to work through the elective recovery backlog.
- Shared resources are not used in the most efficient and effective way possible, therefore not aiding financial recovery and sustainability.
- Potential harm brought about by ambulance handover delays and corridor care.

The main driver for the Unscheduled Care Improvement Programme is to mitigate the above risks.

Governance journey

Date	Forum	Report Title	Purpose/Decision
22nd June 2023	Wirral Place Based Partnership Board	Unscheduled Care Programme	Resolved – That: (1) the update be noted (2) the programme approach be endorsed.
27th July 2023	Wirral Place Based Partnership Board	Unscheduled Care Improvement Programme	Resolved – That the update be noted.
	Wirral Place Based	Update on the	Resolved – That the

28th September 2023	Partnership Board	Transfer of Care Hub Workstream, Unscheduled Care Improvement Programme	update be noted.
19th October 2023	Wirral Place Based Partnership Board	Unscheduled Care Improvement Programme Update	Resolved – That the update be noted.

| 1	Narrative
1.1	**Overview**
1.1.1	At the meeting of the Wirral Place Based Partnership Board (PBPB) on 19th October 2023, it was reported that the Unscheduled Care Improvement Programme continues to make significant progress in the delivery of the key programme milestones. This progress has again continued across its 5 workstreams with the aim of improving urgent and emergency care services in Wirral. The sentinel measure of the programme's success is a sustained reduction in the No Criteria to Reside (NCTR) numbers, where the Wirral system has been a national and regional outlier for a significant period. This has brought with it national NHS and Local Authority leadership scrutiny and an expectation for improvement, which we are now continuing to see. This report provides the Board with evidence of that improvement to date and assurance of the decision of endorsement of the programme presented at October's meeting.
1.1.2	Analysis of data since the previous report, shows a 'statistically significant' reduction in the number of hospital inpatients with NCTR (sentinel measure). In direct correlation with the improvement of the NCTR position, statistically significant improvement is also being seen in the Length of Stay (LOS) of both 14 and 21 days. The NCTR number has reduced from 117 in September 2023 to 111 in October 2023. The progress made is reflected in Wirral's improved position in the Cheshire and Merseyside Integrated Care System (ICS), with Wirral remaining in 2nd position out of 7 areas, where Wirral consistently was in bottom position at the start of the programme.
1.1.3	It continues to be the case that the continued improvement is directly related to the new Transfer of Care Hub. The Hub is continuing to embed standardised daily workflow processes and developing the Standard Operating Procedures (SOPs). The impact of this is demonstrated by the NCTR number reaching 101 in October from improved flows of patients across the sector. The development of the transfer of care hub command centre is continuing which will provide live demand and capacity information from across the system. This is enabled through the development of digital systems and improved reporting which enables patients to be tracked through any part of their discharge journey.
1.1.4	The Home First service supported more people home in October 2023 than any previous month (123), which is a >10% increase from September (110). This reflects a continuing increase in service capacity plus a focus on filling available slots, with success being due to the close working between hospital and community teams. In October 2023, Home First started to offer 6 discharge slots per weekday (2 per day at the weekend); the fill rate of these slots is one of the key factors in achieving planned discharges. Outcomes for Home First patients are among the best in Cheshire and Merseyside. A recent intermediate care review showed Wirral had the highest % of

	people going home from hospital with support and not needing long term care. In addition, all other programme workstreams have met milestones this month with the anticipated benefits of, Care Market Sufficiency and AbleMe creating further improvements to the NCTR numbers as they further develop.
1.1.5	At the PBPB meeting in October 2023 it was reported that Wirral system leads had agreed for Sir John Bolton OBE, an expert in capacity planning to work with the Wirral system to help Wirral develop a medium-term system demand and capacity plan. The 5 days that Sir John is providing to the system have been funded by the national Better Care Fund (BCF) team. A Wirral Place working group has met twice now and work is progressing well. Links have also been made with the intermediate care review. The medium-term system demand and capacity plan is expected to be completed by the end of November 2023.
1.1.6	Work is continuing to progress to finalise the Winter Plan which is being overseen by the Wirral Chief Officers Operational Management Group. The Winter Plan was taken to Unscheduled Care Programme Board on 31st October 2023 and was well received. The Board set out actions to undertake further due diligence before the report is finalised. Once all actions are complete the Winter Plan will be brought to the Wirral Place Based Partnership Board at the earliest opportunity.
1.1.7	The Board is asked to note the update.
1.2	**Programme Delivery Detail**
1.2.1	*Transfer of Care Hub*
	Following the go-live of the new Transfer of Care Hub on 1st July 2023, which coincided with Adult Social Care staff transferring back to Wirral Council, there has been a significant amount of work undertaken. The focus continues to be on the delivery of the medium-term objectives, which include developing detailed SOPs for all processes, making changes to the Cerner system, with some now complete, to enable the improved management of the patient discharge pathway, improved reporting and establishing an electronic transfer of care form to improve the assessment of patients and improving the time between the patient having no criteria to reside and discharge from hospital. Following the acceptance of a proposal developed by the Wirral University Teaching Hospital (WUTH) Organisational Development team a full day's interactive development session has taken place with the Transfer of Care Hub Leadership Team, with a further development session planned. Work continues with the Estates team to improve the workplace and Hub environment, developing the "control room" approach to the transfer of care. This activity will continue to contribute to a more effective way of working, improved performance and improved patient experience and outcomes along with improving Wirral's performance against the NCTR metrics, given pre-April 2023 Wirral was a regional and national outlier in this area. The improvements against the NCTR and long LOS metrics are detailed in the graphs below: Transfer of Care Hub shared governance arrangements, between Wirral Borough Council and WUTH have commenced, with the Transfer of Care Hub Quality Board

		meeting for the second time in October. The Board will continue to meet monthly.
1.2.2		*Enabling Workstreams*
		At the PBPB on 19th October 2023 it was reported that one of the two enabling workstreams established, to support the implementation of the programme, the Finance, Contracts and Commissioning Enabling Workstream Group had agreed to be stood down until further notice due to the good progress made. All actions that have arisen from this group have been assigned to executive level groups to be progressed.
		The Workforce Enabling Programme Group remains well established and continues to deliver its objectives. The objective of this group is to develop a joined-up and sustainable workforce plan because many of the delivery projects include a strong reliance of having a robust and sustainable workforce. The group was established following the recognition that there is a potential for Wirral partners to work together smarter when planning and designing our unscheduled care workforce, especially during times of scaling up teams. The group is being led by one of the partner Directors of Human Resources and has input from all partner organisations. The group has met three times and provided ongoing opportunities to raise any workforce related issues. The group is scheduled to meet again in November 2023.
1.2.3		*Headline Metrics*
		Progress against the programme and project metrics set out in Appendix 1. The NCTR metric is captured as a snapshot on the first of every month. The August 2023 data shows continued good progress with a reduction from the previous month, from 117 on 1st September 2023 to 111 on 1st October 2023 meaning the target of 114 has been exceeded.
		The supporting metrics are managed at a project level. Each of the five supporting projects must be able to measure progress against one or more metrics which, if achieved, will result in an improvement to the headline metric.
1.2.4		*Supporting Projects*
		Care Market Sufficiency - the care market sufficiency project aims to increase the overall number of new hours picked up by 14% from 2,822hrs per month in April 2023 to 3,212hrs per month in September 2023. Additionally, it aims to increase the number of new packages accepted by 10% from 263 packages per month in April to 288 packages per month in September 2023. Both metrics cover all referral sources (e.g., community and acute). The date for September 2023 shows both metrics are under their trajectory target. The overall number of new hours picked up is 2922 against a target of 3212 and the number of new packages accepted is 273 against a target of 288.
		Virtual Wards - the Virtual Ward project aims to double throughput on its frailty ward from 40 patients per month in November 2022, to 80 patients per month in August 2023, then to 120 per month in November 2023. For the respiratory virtual ward, the project aims to increase throughput from 60 per month in August 2023 to 70 in September 2023, then incrementally to 120 per month in November 2023. The data for September 2023 data shows an increase in throughput on its frailty ward on the previous month, from 31 in August 2023 to 55 in September 2023, the target of 80 was not met. Throughput on the respiratory ward decreased slightly on the previous month, from 53 in August 2023 to 51 in September 2023, not meeting the target of 70.
		The **Home First** service continues to expand its core staff base and focus on aligning staff resources for community assessments to ensure it can support rapid discharges. The service aims to support 170 people home from wards by the end of December 2023. The project trajectory was revised in September 2023 to reflect changes in the workforce model, aimed at ensuring sufficient capacity of different staffing groups in the service. In October 2023, there were 123 Home First discharges (108 from

WUTH with others from Clatterbridge Intermediate Care Centre (CICC) or admission avoidance services, (e.g. Virtual Frailty Ward). This was against an overall target of 130. This is a substantial increase from 82 hospital discharges in September 2023, which contributed to 110 total pickups against a September 2023 target of 130. This increase is the result of close coordination between hospital and community teams. Increasing the number of people being discharged in planned slots has been a focus during October 2023. With increasing capacity, the service has made available six discharge slots per weekday and two per day at the weekend. Wirral's Home First model was presented at NHS England's (NHSE) North West England Winter Planning Event at Bolton Stadium in September 2023, and identified by NHSE as an example of good practice to be shared nationally. One of the significant positive outcomes shared was the reduction in people needing a long-term package of care after a Home First discharge: this is between 10-15%, much reduced compared to comparable predecessor pathways in Wirral. Based on a recent Intermediate Care review it is currently the best in Cheshire and Merseyside.

Discharge Outcomes
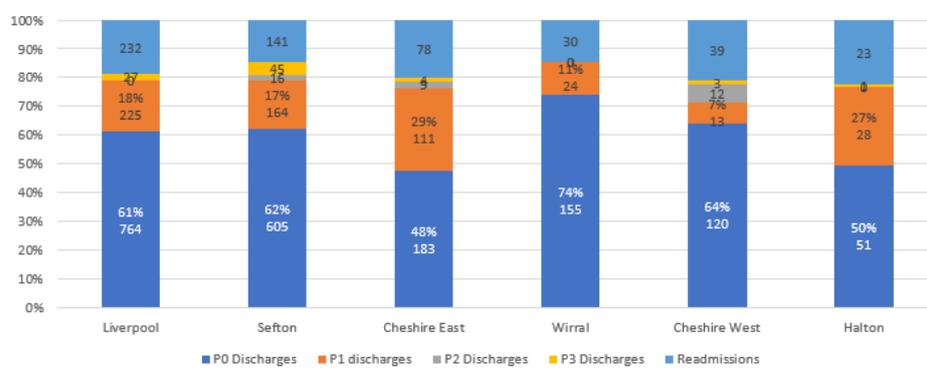
- Across C&M 61% of people who were discharged from home-based intermediate care services were discharged on pathway zero, which is in-line with LGA recommendations* and shows a much higher likelihood of successful rehabilitation compared to bed-based intermediate care (only 25% of people discharged from bed-based intermediate care services were discharged on pathway zero)

* Source: Developing a capacity and demand model for out of hospital care | Local Government Association

Source: Mental Health, Learning Disabilities & Community Collaborative, October 2023

The **AbleMe** project board met for the first time in September and continues to make good progress with the first draft of the Project Initiation Document (PID) and project plan now developed. Information Technology (IT) requirements for a supporting service system have been developed and are progressing to business case development. All recruitment activity is progressing for three key roles, temporary Business analyst, to support the Able me service development, AbleMe Registered Manager and AbleMe Practitioner. There is significant key activity planned to take place in November. The project remains on track to agree the project level metrics.

2	Implications
2.1	*Risk Mitigation and Assurance*

There is a risk that the projects will not be delivered in time due to availability of health and care staff, which will need to be recruited to support increased activity levels. This risk is being managed by the workforce leads across Wirral, who are actively monitoring recruitment levels against the trajectory and are actively seeking out innovative recruitment practices to help attract more people into the professions.

All project risks are captured and monitored in a programme risk register within a single

	electronic programme management system. Risks are managed in line with the framework set out in the Wirral Place monitoring and control strategy. Risks are reviewed and updated on a weekly basis and where a risk is not able to be resolved within the project it will be escalated to the Unscheduled Care Programme Board.
2.2	*Financial* Patients who remain in hospital with NCTR have a significant financial impact on the Wirral system. Having a programme that is focussed on moving people into services that provide the right type of care, at the right time, will bring about non-cashable efficiencies and improve quality and safety.
2.3	*Legal and regulatory* There are no legal implications directly arising from this report.
2.4	*Resources* There are no additional resource implications arising from this report.
2.5	*Engagement and consultation* Weekly meetings are taking place within each of the individual project teams, to ensure that progress is being tracked and that stakeholders are engaged. A weekly senior operational managers group is in place to review and manage the many co-dependencies between the projects. A monthly Programme Board is in place to provide a point of escalation from the projects and to unblock issues. A fortnightly SRO meeting is in place with the senior leads from each workstream.
2.6	*Equality* All projects will give due regard to equality implications and will complete an equality impact assessment where needed.
2.7	*Environment and Climate* There are no environment and climate implications from the report.
2.8	*Community Wealth Building* Recruitment programmes are actively seeking to recruit Wirral residents.

3	Conclusion
3.1	This report provides the Board with evidence and assurance that the Unscheduled Care Improvement Programme continues to make significant progress in delivery, improving patient experience for Wirral residents. This is clearly evidenced with the sentinel measure of the programme success, the sustained reduction in NCTR numbers where the Wirral system has been a national and regional outlier for a significant period.

4	Appendices
	Appendix 1 – Unscheduled Care Programme highlight report 31.10.23. Appendix 2 – Cheshire and Merseyside long length of stay report.

Author	James Barclay
Contact Number	
Email	james.barclay1@nhs.net