

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	17 th October 2024

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 and endorses the changes set out via the refresh of the programme.

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 26th September 2024:

- *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:

- Potential harm brought about by ambulance handover delays and corridor care
- 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.

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

Governance journey

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

28 th September 2023	Wirral Place Based Partnership Board	Update on the Transfer of Care Hub Workstream, Unscheduled Care Improvement Programme	Resolved – That the update be noted.
19 th October 2023	Wirral Place Based Partnership Board	Unscheduled Care Improvement Programme Update	Resolved – That the update be noted.
23 rd November 2023	Wirral Place Based Partnership Board	Unscheduled Care Improvement Programme Update	Resolved – That the update be noted.
21 st December 2023	Wirral Place Based Partnership Board	Unscheduled Care Improvement Programme Update	Resolved – That the update be noted.
25 th January 2024	Wirral Place Based Partnership Board	Unscheduled Care Improvement Programme Update	Resolved – That the update be noted.
22 nd February 2024	Wirral Place Based Partnership Board	Unscheduled Care Improvement Programme Update	Resolved – That the update be noted.
21 st March 2024	Wirral Place Based Partnership Board	Unscheduled Care Improvement Programme Update	Resolved – That the update be noted.
7 th May 2024	Wirral Place Based Partnership Board	Unscheduled Care Improvement Programme Update	Resolved – That the update be noted.
25 th July 2024	Wirral Place Based Partnership Board	Unscheduled Care Improvement Programme Update	Resolved – That the update be noted.
26 th September 2024	Wirral Place Based Partnership Board	Unscheduled Care Improvement Programme Update	Resolved – That the update be noted.

1.1	Overview
1.1.1	At the meeting of the Wirral Place Based Partnership Board (PBPB) on 26 th September 2024, it was reported that good progress had been made with the refresh of the 24/25 Unscheduled Care Improvement Programme structure. This progress has again, continued over this reporting period. This report provides the Board with an overview of the programme refresh and provides an update on key items the Board have asked for. The Board is asked to note the report and endorse the changes to the programme.
1.1.2	In line with the change in national focus Wirral has been highlighted as a system that would benefit from additional national improvement support ahead of the winter period given the challenges with patients waiting longer than 12 hours following a decision to admit through the Emergency Department (ED) at Arrowe Park Hospital. This support will focus on two main themes which is alternatives to ED, given the significant increase in ambulance conveyances in the first quarter of the year, and in hospital ward processes. On site support will commence from the 7 th October 2024 and the Chief Operating Officer of Wirral University Teaching Hospital (WUTH) is the Senior Responsible Officer (SRO), providing weekly updates to the Chief Executive and wider executive team.
1.1.4	The Board is asked to note the update.
1.2	Programme Refresh Detail
1.2.1	Wirral's Unscheduled Care Programme delivered significant improvement to the sentinel programme success measure of no criteria to reside (NCTR) position in Wirral in 2023/24, which is a sustained reduction in the NCTR numbers. To this point, Wirral system had 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. The refresh of the programme aims to now build on the work undertaken to-date, further augmenting existing development and broadening the scope of the existing programme to focus on the front door of the hospital and co-ordinating services to support patients staying out of hospital across Wirral.
1.2.2	<p>The programme sits within Cheshire and Merseyside Health and Care Partnership's Recovery Programme, which is responsible for improving the ICBs operational and financial control framework and functional efficiency, through which the ICB will deliver its short and long-term recovery plans. As a consequence of this, programme priorities align to 2024/25 priorities and operational planning guidance and supports the ambition of NHS Cheshire and Merseyside to eradicate corridor care in acute hospital Emergency Departments.</p> <p>The refreshed programme objectives and outcomes are set out below:</p> <p>Objectives:</p> <ul style="list-style-type: none"> • To eliminate corridor care over the course of 24/25 • To improve both the 4-hour and 12-hour ED performance targets • To reduce No Criteria to Reside (NCTR) • To reduce length of stay (LoS) • To ensure that residents are supported in the right place in the community <p>Outcomes:</p> <ul style="list-style-type: none"> • Wirral patients and residents will only occupy a hospital bed if they meet the national criteria to reside • Reduced risk of deconditioning and patient harm associated with long lengths of stay • Eliminate the elective recovery backlog

	<ul style="list-style-type: none"> • Shared resources are used in the most efficient and effective way possible, aiding financial recovery and sustainability • Reduced harm brought about by ambulance handover delays and corridor care
1.2.3	<p>The programme will be delivered via 4 workstreams, the scope of which is outlined below.</p> <p>Pre-hospital This work will focus on ensuring our community based service offer has the capacity and capabilities to avoid attendance that would result in admissions. The workstream is made up of the following component projects.</p> <ul style="list-style-type: none"> • AtED (DOS review, UCR, Right Care Hub, Streaming, OPAT) • Step-up offer • Conveyance avoidance (NWS) • AbleMe / Local Authority offer • HIU <p>Hospital This work will be led by WUTH and will focus on the improvement and optimisation of hospital lead services. The workstream is made up of the following component projects.</p> <ul style="list-style-type: none"> • Virtual Wards • SDEC • Hospital wide flow (LoS) <p>Post Hospital This work builds on the successful initial phase of the programme delivery over 2023/24. The focus on further augmenting existing developments, optimising pathways to further the safe patient flow out of hospital. The workstream is made up of the following component projects.</p> <ul style="list-style-type: none"> • Complex pathway optimisation • Care Market Sufficiency • Home First • Capacity & Demand • Voluntary Sector <p>Mental Health The Mental Health programme is a priority Wirral Place Health & Care programme. This workstream brings in relevant Mental Health Service Improvement plans where there are linkages with UEC, including the response to Mental Health Demand in ED. This workstream ensures there is close, transparent working between both programmes, identifying and managing interdependencies effectively.</p> <p>All workstreams have appointed Senior Responsible Officers (SROs) and have all mobilised collaboratively, working with partners which has been overseen by the Wirral UEC Operational Management Group and have held their initial workstream meetings. The initial priority for all workstreams is to finalise their workplans and workstream level outcome metrics, which will feed into overall programme sentinel metrics agreed by Cheshire and Merseyside Health and Care Partnership.</p> <p>It is recognised interdependencies exist between programme workstreams and wider Wirral Health and Care Plan Priority programmes. Interdependencies have already</p>

been identified and will be continue to be, as they arise. Workstreams have been established in a way where these interdependencies will be actively managed, making links and exploiting opportunities. The Unscheduled Care Programme Board has overall responsibility to ensure all interdependencies are managed effectively.

1.2.4

The governance arrangements are shown in the diagram below and are unchanged. The Wirral Place reporting requirements also remain unchanged.



Programme leads continue to work very closely with Cheshire and Merseyside colleagues to provide assurance of delivery, completing key documentation and attending focus sessions to support delivery of the 24/25 plans, and providing regular highlight reporting.

An overview of the System Control Centre and Operational Pressures Escalation Levels (OPEL) will be included in the next report to Board.

1.2.5

Cheshire and Merseyside Health and Care Partnership have set out the key sentinel metrics for the all UEC recovery programme as set out below. All workstream work plans, and respective workstream level metrics will contribute to the overall sentinel metrics.

Summary of the sentinel metrics identified for the Cheshire & Merseyside UEC Recovery Programme. The tables below show the average daily position for each indicator by month for 2023/24. Use the drop-down filter to select Provider(s) or Place(s) and use the toggle button below to switch between a Provider or Place based metrics.

C&M Provider-Specific Indicators: Wirral University Teaching Hospital NHS Foundation Trust Provider Place

SENTINEL METRICS

Financial Year	2023/24												2024/25												Year to Date		
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	2024	2025	% Var
Condition Care: Average Daily Minimum																									87	173	...
Plan																									...	...	...
Var to Plan																									...	...	...
Bed Occupancy: % of G&A Beds	93.1%	91.5%	92.0%	90.7%	90.7%	94.2%	94.4%	95.0%	92.3%	95.0%	95.1%	94.5%	94.1%	93.9%	92.6%	92.6%	93.0%	92.0%	91.8%	92.0%	2.0%						
Plan																									...	...	...
Var to Plan																									...	...	...
Virtual Ward: Daily Referrals Accepted	3	3	3	3	2	3	3	4	4	4	5	4	4	4	4	4	4	4	3	4	28%						
Plan																									...	...	...
Var to Plan																									...	...	...
A&E: Daily Attendances (All Dept)	254	248	279	263	259	277	272	270	259	240	255	244	259	275	267	257	243	223	247	258	-9%						
Plan																									...	...	...
Var to Plan																									...	...	...
S&DEC: Daily Attendances (S ECDS)																									...	...	...
Plan																									...	...	...
Var to Plan																									...	...	...
LOS: Average NEL LOS Excl 0 & 1 Day	133	125	114	107	109	104	104	105	108	107	109	114	101	102	104	...	...	...	120	104	-12%						
Plan																									...	...	...
Var to Plan																									...	...	...
NOR: % Beds Occupied	27.4%	23.4%	21.2%	20.3%	17.3%	13.3%	14.3%	14.5%	14.7%	14.4%	15.2%	17.8%	15.5%	14.4%	14.8%	14.7%	17.5%	14.3%	23.2%	15.3%	-7.8%						
Plan																									...	...	...
Var to Plan																									...	...	...
Discharge Ready Date: Av Days Delay	124	120	97	93	7.8	7.2	7.2	6.3	-2.9	-0.8	1.5	2.8	5.2	6.5	5.4	6.3	...	...	...	109	57	-44%					
Plan																									...	...	...
Var to Plan																									...	...	...
Discharges Daily NLT Age 65+	51	50	54	51	54	53	51	55	54	54	59	54	59	40	57	59	...	...	...	52	59	14%					
Plan																									...	...	...
Var to Plan																									...	...	...
Discharges: % Pathway 0	95.8%	94.6%	94.9%	94.1%	94.1%	95.7%	94.1%	94.5%	97.8%	97.4%	98.2%	98.8%	92.3%	94.2%	94.6%	92.8%	92.6%	91.5%	95.3%	89.9%	-5.5%						
Plan																									...	...	...
Var to Plan																									...	...	...
Discharges: % Pathway 1	2.4%	2.2%	2.3%	2.4%	2.4%	2.7%	2.2%	1.4%	1.2%	1.1%	0.7%	1.4%	0.8%	2.4%	12.7%	13.1%	11.8%	10.5%	2.4%	4.5%	4.1%						
Plan																									...	...	...
Var to Plan																									...	...	...
Discharges: % Pathway 2	1.3%	0.8%	1.5%	1.9%	1.9%	0.9%	1.2%	1.4%	0.4%	1.0%	0.8%	0.9%	0.9%	0.4%	1.7%	2.2%	2.0%	2.8%	1.4%	1.3%	-0.1%						
Plan																									...	...	...
Var to Plan																									...	...	...
Discharges: % Pathway 3	0.5%	0.5%	1.3%	1.5%	1.4%	0.7%	0.5%	0.7%	0.4%	0.5%	0.2%	0.7%	0.8%	0.8%	4.9%	3.9%	3.7%	5.2%	0.9%	2.4%	1.4%						
Plan																									...	...	...
Var to Plan																									...	...	...

The initial programme priority is to agree trajectory targets for all sentinel metrics. This is being done collaboratively and supported by a nominated Cheshire and Merseyside ICB Business Intelligence lead. An agreed action plan is in place to complete this.

Financial benefits have also been scoped by Wirral finance leads.

2	Implications
2.1	<p><i>Risk Mitigation and Assurance</i></p> <p>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.</p> <p>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.</p>
2.2	<p><i>Financial</i></p> <p>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.</p>
2.3	<p><i>Legal and regulatory</i></p> <p>There are no legal implications directly arising from this report.</p>
2.4	<p><i>Resources</i></p> <p>There are no additional resource implications arising from this report.</p>
2.5	<p><i>Engagement and consultation</i></p> <p>Weekly meetings are taking place within each of the individual project teams, to ensure that progress is being tracked and that stakeholders are engaged.</p> <p>A weekly senior operational managers group is in place to review and manage the many co-dependencies between the projects.</p> <p>A monthly Programme Board is in place to provide a point of escalation from the projects and to unblock issues.</p> <p>A fortnightly SRO meeting is in place with the senior leads from each workstream.</p>
2.6	<p><i>Equality</i></p> <p>All projects will give due regard to equality implications and will complete an equality impact assessment where needed.</p>
2.7	<p><i>Environment and Climate</i></p> <p>There are no environment and climate implications from the report.</p>

2.8	<i>Community Wealth Building</i> Recruitment programmes are actively seeking to recruit Wirral residents.
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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 report provides the Board with an overview of the programme refresh and sets out the changes to the programme moving forward.

4	Appendices

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