



WIRRAL PLACE BASED PARTNERSHIP BOARD

28th September 2023

REPORT TITLE:	UNSCHEDULED CARE IMPROVEMENT PROGRAMME UPDATE
REPORT OF:	JANELLE HOLMES, CEO WIRRAL UNIVERSITY TEACHING HOSPITAL

REPORT SUMMARY

At July's meeting it was reported that the Unscheduled Care Improvement Programme continues to make significant progress in 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 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 seeing. This report provides the Board with evidence of that improvement to date and assurance of the decision of endorsement of the programme presented at the July meeting.

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 171 in July to 124 in August. The progress made is reflected in Wirral's improved position in the Cheshire & Mersey ICS with Wirral moving to 2nd position out of 7 areas, where Wirral consistently was in bottom position at the start of the programme.

This improvement is directly related to the establishment and ongoing development of the Transfer of Care Hub - Discharge. The new hospital led model which was in shadow form from the 1st April 2023 and went live on the 1st July, established a 'single hospital led' leadership team aligned to the transfer of adult social care responsibilities back to the Local Authority. The Hub has been further embedding standardised daily workflow processes as the SOP's are developed. The impact of this is demonstrated by the NCTR number reaching 104 in August from improved flows of patients across the sector. In addition, all other programme workstreams have met milestones this month with the anticipated benefits of Home First, Care Market Sufficiency and Reablement creating further improvements to the NCTR numbers as they further develop.

The improved Wirral performance has been recognised by NHSE with the NHSE Head of Urgent Care and Winter planned to visit the Transfer of Care Hub – Discharge in September.

RECOMMENDATION

It is recommended that the Wirral Place Based Partnership Board notes the update.

SUPPORTING INFORMATION

1.0 REASON FOR RECOMMENDATION

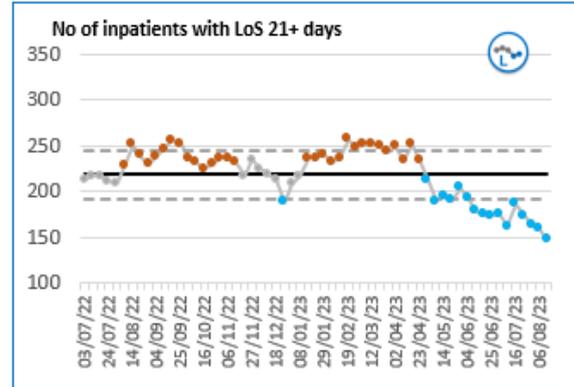
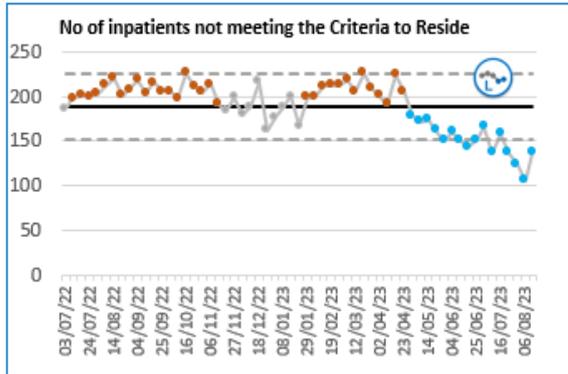
- 1.1 This report is to provide the Board with information and assurance on the work of the Unscheduled Care Improvement Programme for Wirral.

2.0 OTHER OPTIONS CONSIDERED

- 2.1 No other option has been considered as the report is at the request of the Board.

3.0 BACKGROUND INFORMATION

- 3.1 Since the Wirral Place Based Partnership Board (WPBPB) meeting on the 27th July 2023, programme delivery has been progressing within the refreshed Unscheduled Care Improvement Programme.
- 3.2 The improved Wirral discharge performance has been recognised by NHSE with the NHSE Head of Urgent Care and Winter for Cheshire and Merseyside to visit the Transfer of Care Hub – Discharge in September.
- 3.3 Transfer of Care Hub - Discharge: Following the go-live of the new Transfer of Care Hub - Discharge on the 1st July, which coincided with Adult Social Care staff transferring back to the Council, there has been a significant amount of work undertaken. The focus has been on the delivery of the medium-term objectives, which include developing detailed Standard Operating Procedures for all processes, making changes to the Cerner system 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. In addition, work has started on staff development and the more practical elements of the Hub. Work is underway with the Wirral University Teaching Hospital (WUTH) Organisational Development team to develop a set of recommendations and development plan and 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:



- 3.4 Transfer of Care Hub – Discharge shared governance arrangements will commence shortly with the monthly Quality Governance Meeting to meet for the first time in September.
- 3.5 The two enabling workstreams established, to support the implementation of the programme, which report into the Urgent and Emergency Care (UEC) Programme Board are well established and delivering their objectives.
- 3.6 Finance, Contracts and Commissioning Enabling Workstream Group (FCC Group): This group has been established to ensure that budget and commissioning intentions are aligned to well understood capacity and demand requirements and support the transformation work. The workstream is led by the Wirral Place Director and includes representatives from all partner organisations. The initial review of Unscheduled Care services is now complete and the output, the Wirral Service Development and Investment Plan Draft 23/24 and 24/25 now circulated with organisations for review and feedback.
- 3.7 Workforce Enabling Programme Group: 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 now met twice, with all elements of all programme projects which relate to workforce deliverables and workforce related risks and issues identified, captured and discussed with the Group.
- 3.8 Progress against the programme and project metrics for the month of July:
- Programme Headline Metric NCTR - A revised programme trajectory has been endorsed by place partners in July with the new trajectory targets revised from 1st August onwards. This metric is captured as a snapshot on the first of every month. August's data shows a significant reduction from the previous month, from 171 on the 1st July to 121 on the 1st August meaning the revised target of 143 has been exceeded.
 - As a direct consequence of the improvement of the NCTR position, improvement is being seen in other key indicators. Long length of stay (LLOS)

for patients who have resided in a bed for over 21 days has seen a notable reduction from 180 in July to 144 in August.

- 3.9 Supporting Metrics - 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.
- 3.10 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 to 3,212hrs per month in September. 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. Both metrics cover all referral sources (e.g. community and acute). July's data shows that the target trajectory has been met for both the overall number of new hours picked up (3459 against a target of 3056) and the number of new packages accepted (281 against a target of 278).
- 3.11 Virtual Wards - the Virtual Ward project aims to double throughput on its frailty ward from 40 patients per month in November 22 to 80 patients per month in September 2023 and to increase throughput on the respiratory virtual ward by 202% from 58 patients per month in November 22 to 175 patients per month by September 2023. July's data shows a reduction in throughput on its frailty ward on the previous month, from 59 in June to 50 in July, therefore the target of 60 was not met. This was due to gap in the medical staff capacity with plans now in place to mitigate this. Throughput on the respiratory ward increased on the previous month, from 59 in June to 68 in July, however the target of 116 was not met. This trajectory is being reviewed given that the issue of not achieving the target is not a capacity issue it is demand driven, given the summer months see fewer patients admitted with respiratory illness.
- 3.12 The HomeFirst service is undergoing a large-scale expansion to its core staff base. As such, it aims to increase the number of patients referred by the service by 215% from 54 patients per month in April 23 to 170 patients per month in December 23. Up to 88% of the patients referred into the service will be from the acute hospital and will be patients who would otherwise have remained in hospital with no criteria to reside. Performance for July shows that, overall, there has been an increase in referrals accepted on the previous month from 91 in June to 95 in July, however the target of 101 for July was not met. July's data shows that referrals accepted from hospital have increased on the previous month however are under target (81 against a target of 91). July's data shows pick ups for CICC are above target (13 against a target of 10)
- 3.13 Wirral Reablement service are on track to agree the project level metrics. The Community Reablement Target Operating Model was endorsed at Adult Social Care and Public Health Committee on 13th June and the WPBPB meeting on the 22nd June 2023. This project has moved into implementation phase following the endorsement of the model and project plan is being developed.

4.0 FINANCIAL IMPLICATIONS

- 4.1 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.

5.0 LEGAL IMPLICATIONS

5.1 There are no legal implications directly arising from this report.

6.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

6.1 N/A

7.0 RELEVANT RISKS

7.1 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.

7.2 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.

8.0 ENGAGEMENT/CONSULTATION

8.1 Weekly meetings are taking place within each of the individual project teams, to ensure that progress is being tracked and that stakeholders are engaged.

8.2 A weekly senior operational managers group is in place to review and manage the many co-dependencies between the projects.

8.3 A monthly Programme Board is in place to provide a point of escalation from the projects and to unblock issues.

8.4 A fortnightly SRO meeting is in place with the senior leads from each workstream.

9.0 EQUALITY IMPLICATIONS

9.1 All projects will give due regard to equality implications and will complete an equality impact assessment where needed.

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

10.1 There are no environment and climate implications from the report.

11.0 COMMUNITY WEALTH IMPLICATIONS

11.1 Recruitment programmes are actively seeking to recruit Wirral residents.

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APPENDICES

Appendix 1 – Unscheduled care programme highlight report 29.08.23
Appendix 2 – C&M report for NCTR

BACKGROUND PAPERS

Cheshire and Merseyside long length of stay report

SUBJECT HISTORY (last 3 years)

Council Meeting	Date