

# Wirral Health and Care Plan Dashboard

## Date of Report

January 2024

## About the Wirral Health and Care Plan



Wirral Place Health and Care plan 23.24.11.d...

## Escalation Reports



Wirral Health and Care Plan Benefits Report



Wirral Health and Care Plan Risk Report



Wirral Health and Care Plan Issue Report

## Guiding Programmes

### Neighbourhood Model Programme

#### Programme SRO

Graham Hodgkinson

#### Programme RAG



#### Date of Update

02/01/24

#### About the Programme



Neighbourhoods Model

#### Programme Commentary

Core Group Workshops held 31 October (Birkenhead A) and 7 November (Wallasey C) and feedback collated  
 Planning meeting held 06.12.23 with Wirral CVS and the CVFSE reps to agree next steps  
 Dates for next core group meetings to be set with membership initially EOI collaborators, primary care, CVS and ICB/LA.  
 Funding to be transferred to CVS to manage allocations to specific schemes  
 Meeting held with JMU with offer of PHD student available, further discussions with core group and qualitative insights team needed  
 Papers presented to Health and Wellbeing Board and Place Partnerships Board

Project Name	Project Status	Overall Project RAG	Milestone RAG	Benefits RAG	Risk RAG	Issue RAG	Highlight Report
Neighbourhood Care Model	No Change						<a href="#">Neighbourhood Care Model - Highlight Report</a>

### Population Health Management Programme

#### Programme SRO

Dave Bradburn

#### Programme RAG



#### Date of Update

05/12/23

#### About the Programme



Population Health Management

#### Programme Commentary

The Health and Wellbeing Strategy is dynamic and evolving and will flex and respond to changes in local circumstances as appropriate. As a system partnership, we have agreed to take a different approach to tackling the root causes of poor health and wellbeing in an attempt to make a meaningful impact with a smaller group of core issues. The agreed overarching partnership focus is employment, however the content below will provide some highlights (but not an exclusive list) of the system activities that are currently taking place across the whole of the strategy.

- Development and mobilisation (led by Wirral Council, OD/HR directorate) of an Early Opportunities Pipeline, designed to target sustainable employment opportunities to those furthest from the jobs market and attract this potential talent into the organisation. The approach is to pilot a number of vacancies with local employment support programmes and offer these jobs directly to a number of priority groups before going out to the wider market. In the first month, two Council vacancies have been successfully filled following this approach and there are a number of conversations with system partners in train. It is anticipated that this approach will be adopted by all our anchor organisations.
- CVD Prevention is key to reducing early deaths. 1 in 5 people in Wirral have circulatory problems such as heart disease. Health checks are a key enabler to early detection, prevention and treatment. Wirral ICB leads on health checks for those with a serious mental health illness and people with a learning disability. Public Health leads the universal health checks offer currently delivered via primary care networks (health checks in GP practices, targeting those that live in the most deprived areas) and One Wirral CIC who have trained local providers to deliver health checks in community locations targeting people who do not traditionally come forward or who find it difficult to access primary care.
- Wirral has its first Family Hub (Seacombe) and Midwifery Continuity of Care model being implemented.
- Cradle to Career (C2C) programme well-established in North Birkenhead.
- Healthy Homes community outreach has been set up to address poor housing and inequalities, operating drop-in support to residents having issues with private landlords.
- Fuel poverty service commissioned to support residents and household support fund distributed to local communities.

### Use of Resources Model Programme

#### Programme SRO

Martin McDowell

#### Programme RAG



#### Date of Update

08/01/24

#### About the Programme



Use of Resources Model

#### Programme Commentary

Wirral Financial Recovery plan complete and submitted to the ICB and NHSE. Wirral is forecast to achieve a deficit for 2023/24 of £19.5m, against a target of £19m. As of November, the deficit is £12.3m (December figures not yet available)  
 While the recovery plan has been accepted by the ICB, the level of risk associated with Wirral achieving the target is not, the risk rating for this currently sits at a Red.  
 Work continues to identify how to deliver the £500k gap through monthly Expenditure Control Meetings, where all spend over a set amount must be approved, and Peer Reviews, with positive results to date.

Project Name	Project Status	Overall Project RAG	Milestone RAG	Benefits RAG	Risk RAG	Issue RAG	Highlight Report
Financial Recovery Plan	No Change						<a href="#">Financial Recovery Plan - Highlight Report</a>
Value For Money	No Change						<a href="#">Value For Money - Highlight Report</a>

## Delivery Programmes

### All Age Disability Programme (incl LD & Autism)

#### Programme SRO

Graham Hodgkinson

#### Programme RAG



#### Date of Update

08/01/23

#### Programme Commentary

A feedback form has been produced to be shared with contributors to the All Age Disability Strategy to support signoff. The Autism strategy document has been reviewed and is currently under redesign. All Age Learning Disability Officer has been appointed and with start date in January, pending pre-employment checks. Working groups have now been established for the review and coproduction of transitions protocols.

Project Name	Overall Project RAG	Milestone RAG	Benefits RAG	Risk RAG	Issue RAG	Highlight Report
All Ages Disability	●	●	●	●	●	<a href="#">All Age Disability Revi - Project Highlight Report</a>
Remote Monitoring for LD	●	●	●	●	●	<a href="#">Remote Monitoring for L - Project Highlight Report</a>
Education, Health and Care Plan Review	●	●	●	●	●	<a href="#">Education, Health and C - Project Highlight Report</a>
LD&A Housing Options Strategy	●	●	●	●	●	<a href="#">LD&amp;A Housing Options St - Project Highlight Report</a>
Supported Employment Strategy	●	●	●	●	●	<a href="#">Supported Employment St - Project Highlight Report</a>

## Children and Young People Programme

Programme SRO	Programme RAG	Date of Update	About the Programme
Simone White	●	15/09/23	 Children and Young People

### Programme Commentary

WSoA progress - Performance meetings held monthly where progress against actions reported: 84.6% actions complete (green), 10.8% actions delays (amber) and 4.6% actions have not started (red). Mitigation plans in place. EHWB transformation progress - Tender for SPA platform complete. Alliance tender underway. Slightly delayed Aug release now Sept but shouldn't impact overall timescales. My Happy Minds funding agreed 100% coverage of Primary Schools. Thorne Heys - Joint commissioned specialist/transitional provision project underway. Work started on Complex Children's pathway. Joint Commissioning progress - Workshop held with senior leaders (Wirral Place & LA) agreed focus on 3 priorities: ND Pathway, SALT & Complex children. Paper confirming priorities will go to JHCCG in October for ratification.

Project Name	Project Status	Overall Project RAG	Milestone RAG	Benefits RAG	Risk RAG	Issue RAG	Highlight Report

## Mental Health Programme

Programme SRO	Programme RAG	Date of Update	About the Programme
Suzanne Edwards	●	08/01/24	 Mental Health

### Programme Commentary

Focused work throughout December on inpatient flow has seen a reduction in the number of inappropriate out of area placements. Work continues to sustain the improvements and move towards reducing appropriate out of area usage to support financial recovery. Approximately four SuperMADE events have taken place to date with success in supporting discharge for patients where difficulties have been experienced previously. A review is to take place, post meeting 5, to understand trends and any learning from UEC Discharge Hub events. Improvements in communication and information flows have been identified as part of the Integrated Housing Project. Analysis of costs known to date has provided some insight on the current high levels of spend per individual. Terms of Reference is currently underdevelopment for side-by-side acute working groups for First Response, in addition to Lessons learnt being undertaken for current crisis solutions with acute partners.

Project Name	Project Status	Overall Project RAG	Milestone RAG	Benefits RAG	Risk RAG	Issue RAG	Highlight Report
Community Mental Health Transformation	No Change	●	●	●	●	●	<a href="#">Community Mental Health Transformation - Highlight Report</a>
First Response	No Change	●	●	●	●	●	<a href="#">First Response - Highlight Report</a>
SuperMADE	No Change	●	●	●	●	●	<a href="#">SuperMADE - Highlight Report</a>
Integrated Housing	No Change	●	●	●	●	●	<a href="#">Integrated Housing - Project Highlight Report</a>
Acute Capacity, Demand and Flow	No Change	●	●	●	●	●	<a href="#">Acute Capacity, Demand - Project Highlight Report</a>
Dementia Strategy	No Change	●	●	●	●	●	<a href="#">Dementia Strategy - Project Highlight Report</a>

## Primary and Community Care Programme

Programme SRO	Programme RAG	Date of Update	About the Programme
Karen Howell	●	08/01/24	 Primary and Community Care

### Programme Commentary

Workshop to take place on 30/01/2024. Invitations have been sent to providers across the sector with a request for updates from each on their priorities and challenges. Invitees will then be asked to support work on the development of three top priorities for Wirral for delivery to start 2024/25. This work will later be shared wider to ensure that there is synergy with other programmes such as Neighbourhoods and UEC.

Project Name	Project Status	Overall Project RAG	Milestone RAG	Benefits RAG	Risk RAG	Issue RAG	Highlight Report
Falls Prevention and Management	No Change	●	●	●	●	●	<a href="#">Falls Prevention and Management - Highlight Report</a>

## Urgent and Emergency Care Programme

Programme SRO	Programme RAG	Date of Update
Janelle Holmes	●	08/01/24

### Programme Commentary

Headline Metric (NCTR): This metric is captured as a snapshot on the first of every month. December's data shows continued good progress with a reduction from the previous month, from 108 on the 1st November to 98 on the 1st December, exceeding the target of 100.

It remains three out of five projects have agreed their supporting metrics and are actively reporting (i.e. metrics that will lead to a reduction in the NCTR headline metric). The metrics for the Transfer of Care Hub have been agreed and the Cerner build change are now live to enable the reporting of these metrics. The BI development work required to produce

these report is continuing with the ambition to have in place at the earliest opportunity.

The care market sufficiency project aimed 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. This trajectory has now been developed further, post September. Both metrics cover all referral sources (e.g. community and acute). November's data shows both metrics have achieved their trajectory target. The overall number of new hours picked up is 3154 against a target of 3120 and the number of new packages accepted is 299 against a target of 293.

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 August, 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 to 70 in September, then incrementally to 120 per month in November 2023. November's data shows a decrease in throughput on its frailty ward on the previous month, from 57 in October to 40 in November, the target of 120 was not met. Throughput on the respiratory ward increased on the previous month, from 58 in October to 85 in November, however not meeting the target of 120.

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 January 24. 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 November shows that, overall, there has been an increase in referrals accepted on the previous month from 121 in October to 133 in November, however the target of 150 was not met. November's data shows that pick-ups from hospital have increased on the previous month from 106 in October to 124 in November, however the target of 150 was not met. November's data shows pick-ups for CICC were 5 recognising there is no target set for November due to the focus on pick-ups from hospital.

Community Reablement are yet to agree project level metrics. However, action plans are in place and being actively tracked and managed by the project SRO.

Project Name	Project Status	Overall Project RAG	Milestone RAG	Benefits RAG	Risk RAG	Issue RAG	Highlight Report
Virtual Wards	Improving	●	●	●	●	●	<a href="#">Virtual Wards - Highlight Report</a>
AbleMe	Improving	●	●	●	●	●	<a href="#">Community Reablement - Highlight Report</a>
Transfer of Care Hub	No Change	●	●	●	●	●	<a href="#">Wirral Discharge Hub - Highlight Report</a>
HomeFirst Expansion Project	No Change	●	●	●	●	●	<a href="#">HomeFirst Expansion - Highlight Report</a>
Care Market Sufficiency	Improving	●	●	●	●	●	<a href="#">Care Market Sufficiency - Highlight Report</a>

## Enabling Programmes

### Place Digital Maturity Programme

Programme SRO	Programme RAG	Date of Update
Chris Mason	●	03/01/24

#### Programme Commentary

Summary/Progress this month:

- We've initiated conversations with Wirral stakeholders with a focus on consolidating our digital programme portfolios and aligning them to create a Place-level portfolio. This will establish a baseline for assessing our current Digital Maturity scores at Place level, helping identify areas that require improvement and prioritisation for 2023-4 and beyond.
- Additionally, we're initiating discussions with Wirral Senior Responsible Officers (SROs) to gain deeper insights into how the Digital Maturity programme can act as an enabler for other initiatives within the Wirral Health and Care plan, assisting in accomplishing their specific programme objectives.

Project updates:

- CIPHA Migration - Migration from WCR to CIPHA is in initiation phase. We've engaged with system stakeholders to conduct a comprehensive gap analysis, which has enabled us to determine which data flows need to be established as a pre-requisite. We are also engaging our clinical stakeholders to facilitate in design of new tools. Key milestones are as follows: Complete gap analysis' and confirm work plans with stakeholders (Jan24), Establish any outstanding data flows (Apr24), Replicate PHM tools within CIPHA (Jun-Dec24).
- Shared Care Record development - Preparing scope and pre-requisites for project to connect Wirral Shared Care Record (HIE) to Cheshire Care Record. We plan to also determine wider C&M ShCR strategy to ensure Wirral's plans are in alignment.
- Digital Diabetes - To utilise CIPHA diabetic elective care patient list and target cohort with pre-hab offer using the Surgery Hero app. Project Live in pilot phase: (<https://www.youtube.com/watch?v=-kJN56TgKlw>)
- Digital Hypertension - Housebound project now closed - this aimed to facilitate Housebound Hypertensive patients in Wirral to engage with BP@Home and identify barriers. Key benefits have been recognised including provision of infrastructure for a significant proportion of this cohort to continue to engage with BP@home concept. We have subsequently proposed that this project is adopted and expanded across the rest of C&M. Further proposals have also been submitted to C&M to explore how we approach Hypertension P2 projects including Florence (automated SMS), health literacy apps, health checks etc.
- Telederm - 1600+ cases raised, 45/45 Practices Live.

Escalations: Nil

Project Name	Overall Project RAG	Milestone RAG	Benefits RAG	Risk RAG	Issue RAG	Highlight Report
WCR / CIPHA Migration	●	●	●	●	●	<a href="#">WCR / CIPHA Migration - Highlight Report</a>
Health Information Exchange Enhancements	●	●	●	●	●	<a href="#">HIE Enhancements - Highlight Report</a>
Teledermatology	●	●	●	●	●	<a href="#">Telederm - Highlight Report</a>
Strategic Development Fund - Primary Care	●	●	●	●	●	<a href="#">DFPC - Highlight Report</a>

## Place Estates and Sustainability Programme

Programme SRO	Programme RAG	Date of Update
Paul Mason	●	08/01/24

#### Programme Commentary

Summary: The established Sustainability and Estates Group (SEG) will provide a supporting mechanism for programme delivery. SEG has hosted good examples of system wide working previously and baselining work has been developed. This has supported the completion of some key milestone achievements:

1. Wirral Place Estates Programme (Completed) - GB Partnership (attached)
2. Develop agreed RFI Register (Completed Q3 2022-23)
3. SEG Property Data Collection (Completed Q4 2022-23)
4. Green Plan and Associated actions plan oversight (Completed Q4 2022-23)
5. Wirral Place Sustainability Group established (Completed Q4 2022-23)

Progress this month Nov 23:

- Estates & Sustainability SRO submitted papers to support Strategic Transformation Group update on progress so far.
- Estates & Sustainability SRO presented at Wirral Place Based Partnership Board receiving positive consensus and acknowledgement of work concluded today.
- Feedback from Board to be reviewed at SEG scheduled for 18.12.23

Areas of Focus for delivery via SEG:

- Finalise through SEG Governance arrangements and work packages for delivery.
- Continue to collate and validate asset data across all Partners of Place
- Advance the data and understanding of backlog condition and costs
- Understand and control demand for space and requirements
- Optimising Assets through void space management / leased cost opportunities and maximising utilisation across all Partners
- Understand the future need of assets by aligning Assets to Clinical priorities/deprivation via the development of Neighbourhood strategies

**Escalations/ Barriers to Delivery:**

- Need a good understanding of Clinical Drivers that will inform the Estates requirements and use of physical assets
- Allowing information flow and decision making to be understood to provide system assurance.
- Group need sight of (PCN) GP developed clinical strategies.
- Assessment of requirements needs to be integrated with Wirral Health Plan / programme
- Need to identify leads for transformational change programmes and work packages through the SEG forum. - awaiting nominations
- Need funding to support systems and programme delivery

Project Name	Project Status	Overall Project RAG	Milestone RAG	Benefits RAG	Risk RAG	Issue RAG	Highlight Report
Accommodation Requests and Move Management	No Change	●				●	<a href="#">Accommodation Requests and Move Management - Highlight Report</a>
Achieving Net Zero Carbon	No Change	●				●	<a href="#">Achieving Net Zero Carbon - Highlight Report</a>
Capital Overview Prioritisation and Pipeline	No Change	●				●	<a href="#">Capital Overview Prioritisation and Pipeline - Highlight Report</a>
Disposal and Void Management	No Change	●				●	<a href="#">Disposal and Void Management - Highlight Report</a>
Estates Data Baselineing	No Change	●				●	<a href="#">Estates Data Baselineing - Highlight Report</a>

## Place Medicines Optimisation Programme

Programme SRO	Programme RAG	Date of Update	About the Programme
Lucy Reid	●	08/01/24	Place Medicines Optimisation

### Programme Commentary

**Progress this month:**

- A significant milestone has been met with the Wirral Place Medicines Optimisation Group meeting for the first time on the 6th December. This follows the agreement to create a single oversight group for MO delivery in Wirral, bringing together Medicines Management Committee and Wirral Pharmacy System Leads group, which aligns with wider Wirral Place MO and ICS governance arrangements. The group agreed their terms of reference.
- Indicative project leads have been identified for each of the 9 component MO projects but further discussions to take place to finalise these prior to next joint MO meeting in January
- The Programme SRO, MLCSU Head of Medicines Support for C&M and Programme Manager are meeting to propose the final programme delivery structure and reporting/assurance processes on 9th January, to be endorsed by the Wirral Place Medicines Optimisation Group
- The Wirral Place Medicines Optimisation Group is meeting for the second time on the 17th January
- As part of the Polypharmacy and tackling health inequalities workstream, the Wirral Place Opioids/Chronic Pain Community of Practice has restarted with a very positive initial meeting on 20th December 2023
- Community Pharmacy representative to attend the January Core 20 Plus 5 group to discuss how we can improve access to the new pharmacy services.

Project Name	Project Status	Overall Project RAG	Milestone RAG	Benefits RAG	Risk RAG	Issue RAG	Highlight Report
Programme Mobilisation	No Change	●	●			●	<a href="#">Programme Mobilisation - Highlight Report</a>
Care Homes and Social care	No Change	●				●	<a href="#">Care Homes and Social Care - Highlight Report</a>
Patient awareness and engagement	No Change	●				●	<a href="#">Patient awareness and engagement - Highlight Report</a>
Mental Health	No Change	●				●	<a href="#">Mental Health - Highlight Report</a>
Community Pharmacy	No Change	●				●	<a href="#">Community Pharmacy - Highlight Report</a>
Polypharmacy and Tackling Health Inequalities	No Change	●				●	<a href="#">Polypharmacy and Tackling health inequalities - Highlight Report</a>
Medicines Value	No Change	●				●	<a href="#">Medicines Value - Highlight Report</a>
Medicines Safety	No Change	●				●	<a href="#">Medicines Safety - Highlight Report</a>
Antimicrobial Resistance and Stewardship	No Change	●				●	<a href="#">Antimicrobial Resistance and Stewardship - Highlight Report</a>
Collaboration	No Change	●				●	<a href="#">Collaboration - Highlight Report</a>

## Place Workforce Programme

Programme SRO	Programme RAG	Date of Update	About the Programme
Debs Smith	●	21/12/23	Place Workforce

### Programme Commentary

**Summary:** The key activities to build the strategic workforce planning and programme enabling functions require the establishment of clear and achievable programme priorities for 2023-4 and beyond. From this an accountability and reporting framework for the wider programme will be established alongside agreed project sub-groups, leadership and membership.

**Progress this month:** The Workforce Programme steering group met on 5th December and agreed the key priorities to take forward in phase 1 of the programme. This includes a baseline workforce profile for Wirral Place for which work has commenced, and a collaborative piece of work around entry into employment to pilot targeted support for a proposed cohort. of people aged 18-24yrs. Work will now commence to scope this.

Escalations: None

Project Name	Project Status	Overall Project RAG	Milestone RAG	Benefits RAG	Risk RAG	Issue RAG	Highlight Report
Baseline Mapping for Wirral Workforce	No Change	●				●	<a href="#">Baseline Mapping for Wirral Workforce - Highlight Report</a>
Wirral Workforce Strategy	No Change	●				●	<a href="#">Wirral Workforce Strategy - Highlight Report</a>

## At Scale Programme

### Place Supported Programmes

Programme SRO	Programme RAG	Date of Update	Performance Charts
Hayley Kendall	●	03/01/24	At Scale - Trajectories v Actual

### Programme Commentary

**ELECTIVE ACTIVITY**

In November 2023, the Trust attained an overall performance of 105% against plan for outpatients and an overall performance of 98% against plan for elective admissions. Underperformance against plan continues for Inpatients, predominantly due to the impact of large-scale cancellations for industrial action.

**REFERRAL TO TREATMENT**

The national standard is to have no patients waiting over 104 weeks from March 2023 and to eliminate routine elective waits of over 78 weeks by April 2023 and 65 week waits by March 2024. The Trust's performance at the end of November against these indicators was as follows:

- 104+ Week Wait Performance – 0

- 78+ Week Wait Performance – 0
- 65+ Week Wait Performance - 286
- 52+ Week Wait Performance - 1880

• Waiting List Size - there were 42,552 patients on an active RTT pathway against the Trust's trajectory of 37,718.

An in-depth analysis of waiting list size has been undertaken and key actions to address are underway across the divisions, including early escalation to clinical teams and proactively managing patient pathways ahead of breach dates

#### CANCER

• 2 Week Waits – This national standard has now been stood down. However, the Trust continues to measure performance internally to support the delivery of the Faster Diagnosis Standard. At the end of November 2WW performance was 78.1%.

• FDS – was 69.81% (freeze date 4.1.24) in November (latest available data) against a national target of 75% by March 2024. This standard has been impacted by industrial action and subsequent inability to maintain the 2WW standard.

• 31 day treatment numbers - above trajectory and expected to continue.

• 62 day performance is currently below trajectory with 149 patients against a plan of 170 for November.

• 104 day long waiters – performance is above trajectory at 39 against a plan of 28 for November.

#### DIAGNOSTICS

In November 94.68% of patients waited 6 weeks or less for their diagnostic procedure for those modalities included within the DM01. This is against the national standard of 95% and requirement for Trust's to achieve 90% by March 2024. ECHO, CT and Urodynamics remain challenged, however have recovery plans in place.

The Trust has commenced providing mutual aid for neighbouring Trusts for patients waiting longer than 6 weeks for diagnostic tests.

#### MATERNITY

##### RISKS TO RECOVERY AND MITIGATIONS

The clinical divisions are continuously working through options to reduce the backlogs of patients awaiting elective treatment and progress is being made to improve waiting times for patients. These include the recruitment of new staff, with a focus on consultants, additional activity outside of core capacity to ensure reductions in elective waiting times continue.

The major risk to the delivery of the elective recovery programme is medical staff industrial action, given the significant volumes of patients cancelled during this action. On strike days, elective activity is being managed patient by patient to ensure minimal disruption to our patients whilst maintaining safe standards of care across the hospital sites, with a focus to keep patient cancellations to an absolute minimum.