

Report of Rachel Potts, Chief Operating Officer, NHS Vale of York
Clinical Commissioning Group

Urgent Care and Delayed Transfers of Care Update

Summary

1. This report provides a summary of how the national Winter Pressures Money allocation has been used to support the local health and social care economy. The report outlines the schemes which have been agreed by local Urgent Care Working Group (UCWG) and how Vale of York Clinical Commissioning Group (CCG) is monitoring outcomes.

Background

2. Winter pressures monies were allocated to the Vale of York CCG in October 2013 to be used across the local health and social care economy. Key areas identified for the use of the fund included admission avoidance, supported discharge and equipment. As a result of detailed discussions with partners, funds were allocated to a number of schemes in late October and implemented throughout November, December and into January 2014. Each scheme was agreed by the Urgent Care Working Group (UCWG), where stakeholders and partners across the health and social care system are represented. A number of metrics were agreed by the UCWG to ensure that impact of each scheme could be measured, and changes made where schemes did not deliver as anticipated.

Main/Key Issues to be considered

3. The key issues were to allocate funding in line with the description from NHS England. Schemes were prioritised which could be implemented quickly, where staffing could be put in place, and where defined and measurable outcomes could be identified.

4. **Consultation**

The Urgent Care Working Group approved all the plans. This group has representation from Vale of York, Scarborough and Ryedale and East Riding CCG's; Yorkshire Ambulance Service; City of York Council and North Yorkshire County Council; Mental Health Trusts from Tees, Esk and Wear Valley and Leeds and York Partnership Foundation Trust; Healthwatch and NHS England.

5. **Options**

This paper is for information only.

6. **Analysis**

The schemes prioritised by the UCWG to be funded by the winter pressures money are as follows. All schemes are providing evaluation information to the UCWG to enable the impact on the health and social care system to be

- 6.i. **Phlebotomy Outreach Services**; Following analysis of the amount of time that the Community District Nursing service spent taking routine blood samples, a proposal has been funded to deliver this service through the hospital phlebotomy team. This is expected to free up the skilled District Nursing team to undertake more complex tasks. The impact on the District Nursing Service is being monitored to ensure that additional activity is undertaken to support vulnerable patients.
- 6.ii **Hospice At Home and End of Life Practitioners**; this project is providing additional weekend and evening support to individuals on an end of life pathway to enable them to die at home when at the end of their life, if this is their place of choosing.
- 6.iii **Emergency Department workforce**; additional funding has been committed to support the hospital to provide additional Registrars and senior nurses to work in the Emergency Department (ED) during the winter period. The aim is to enable more people to be discharged from ED following senior clinical review and decision making.

- 6.iv **Patient Transport;** funds have been allocated for additional discharge support by the voluntary sector to ensure elderly patients can be discharged in a timely way. The scheme provides transport home at times when other patient transport services are not available. If required, help can also be provided when individuals get home for carer support overnight to support individuals staying at home in the first few hours after discharge.
- 6.v **Extension of the Rapid Access and Treatment Service** into the early evening; the joint hospital and social care team has received additional funding to increase the hours of support available. This will help to ensure that packages of care are put into place as quickly as possible to prevent unnecessary admission to health and/or social care beds.
- 6.vi **Additional social work posts;** additional hours funded to support the main reablement teams during the winter period and optimise the number of individuals supported.
- 6.viii **Equipment;** additional funding over the winter period to ensure that there are no delayed discharges due to lack of availability of equipment, including items such as beds, mattresses and hoists.
- 6.ix **Homeless support worker;** this project is providing funding for a support worker for the three busiest evenings of the week within the Emergency Department. The support worker will work with staff to identify homeless patients who have no medical need and transfer them to the ArcLight centre for support.
- 6.x **Block and spot purchase of step-up and step-down beds;** this project increases the bed capacity available for patients to be transferred to if they require step up, or step down support from the acute hospital. This capacity aims to ensure that individuals do not remain in hospital beds when they may be appropriately supported in other settings, and hence which maintain patient flow across the health and social care system.
- 6xi **Integrated hospital/community team;** this team has been provided with additional funding to continue to support individuals outside of a hospital setting until March 2014. The scheme is being evaluated to understand the impact of this additional team over and above the core community nursing service.

- 6xii **Emergency Care Practitioners**; an additional three members of staff from the Yorkshire Ambulance Service have been employed to work alongside regular ambulance crews to attend falls, faints and minor injuries. This service aims to see and treat individuals in the home or at the scene instead of conveyance to hospital. Similar pilots in our locality have shown a 50% reduction in conveyance to the Emergency Department for minor call outs.
- 6.xiii **Care Homes Support Project**; this project is currently being developed with partners to be implemented in the near future as one of the schemes for the Better Care Fund. It aims to support care homes in the management of vulnerable patients and prevent unnecessary admissions to hospital or to other escalation beds. Where individuals need to be admitted for elements of their care, the scheme will aim to support discharge at the earliest appropriate opportunity. This pilot project will be extended beyond the winter pressure funding to enable it to be implemented and tested fully.
- 6.xiv **Community Single Point of Access**; this project will set up a single point of access for health and social care professionals to call for referral or advice. The initial pilot is being developed in partnership with Yorkshire Ambulance Service and will be sustained beyond the winter pressure funding to enable testing of the model on improved pathways of care. This project responds to one of the key issues identified by the community in recent engagement events run by the CCG for a single point of access to services.

Following the most recent UCWG on 19th December 2013, a proposal for a whole system dashboard has been approved. This will be taken forward at the next meeting of the 23rd January 2014.

7. Strategic/Operational Plans

The above schemes all have specific metrics identified and data will be recorded so that their effectiveness can be reviewed and schemes maintained if appropriate. Where plans are larger scale these have been included as proposals for the Better Care Fund planning process and form part of the 2014/15 CCG strategic plan to test and pilot potential transformational schemes.

8. Implications

- 8.i **Financial** – all schemes are funded out of time limited winter pressures monies. Where there is an ongoing funding requirement these are being fully risk and value assessed prior to a decision for longer term funding from the various partner agencies.
- 8.ii **Human Resources (HR)** – all teams that have been continued until March 2014 have been notified. Temporary staff or extensions to existing hours have been implemented for other trial schemes
- 8.iii **Equalities** – all schemes cover patients within all of the Vale of York area who would usually access services within this catchment area.
- 8.iv **Legal** – no legal implications anticipated
- 8.v **Crime and Disorder** – no implications anticipated
- 8.vi **Information Technology (IT)** – where IT is involved for healthcare professionals, appropriate training is provided
- 8.vii **Property** – no schemes involve additional property
- 8.ix **Other** - none

9. Risk Management

All schemes have been reviewed by the UCWG and agreed as appropriate and have appropriate data recording mechanisms in place. The CCG is using this opportunity to test innovative schemes and has encouraged new ideas from providers not previously involved in winter pressures funding. All schemes are being assessed on performance, finance and outcomes on a monthly basis and if not delivering anticipated benefits will be reviewed. Where mitigating actions cannot be put in place to deliver expected outcomes, then schemes will be terminated and alternative projects identified.

Recommendations

- 10. The Health and Wellbeing Board are asked to note the work being undertaken to support the health and social care system throughout the winter period and to support pilot projects which may form part of the future Better Care Fund approach.

Reason: So that the Board is kept informed.

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Report



Approved

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Rachel Potts, Chief Operating Officer