



# University Hospital Lewisham System Resilience Plans 16/17 Report to HCSC October 16



- Central funding for system resilience allocated to CCGs and included in 16/17 baseline
- Lewisham CCG figure agreed at £1.4Million to be spent at University Hospital Lewisham
- Initial submission and impact on trajectory agreed with CCGs as part of wider System Resilience and Trajectory Plan in early July
- Schemes initially identified based on those that had shown impact in 15/16
- Complemented work ongoing within Medical Redesign and Enhanced Care and Support Programmes
- Total resilience scheme impact on 4 hour standard predicted to be 2.42%
- Detail of initial schemes, impact of those in place and further plans for schemes to address slippage in other improvements provided in following slides:

## Initially Agreed Schemes

	Performance Improvement Cost	Start month	End month	Lead in at 50% impact
Additional ED SpR Saturday evenings	0.01%£11,700.00	October	March	0
Additional medic in ED overnight	0.50%£120,000.00	October	March	0
Additional GP 7 days per week in UCC	0.80%£400,000.00	July	March	0
ENP Streaming 12 hours per day	0.30%£227,000.00	July	March	1
RAT in place	0.50%£566,800.00	August	March	1
Pathway Navigators	0.30%£120,000.00	May	March	1
Improved Discharge Information	0.01%£15,000.00	June	March	0
<b>Total</b>	<b>2.42%£1,460,500.00</b>			



## Current Stock Take

A review of the resilience schemes as well as wider improvement programmes has just been completed and identified some delay in three of the schemes:

- GP streaming (commenced this week)
- ENP streaming ( plan to commence in October but difficulty in recruiting
- RAT (commenced this week)

UHL Resilience Schemes	Impact	Start Date	In place?
Additional ED SpR Saturday evenings	0.01%	October	Will be in place
Additional medic in ED overnight	0.50%	October	Will be in place
Additional GP 7 days per week in UCC	0.80%	July	Trialled in July, full model from October
ENP Streaming 12 hours per day	0.30%	July	Trialled in July, full model from October
RAT in place	0.50%	August	Delayed start due to recruitment, in place from October
Pathway Navigators	0.30%	May	Yes
Improved Discharge Information	0.01%	June	Yes
Total	2.42%		

In addition it has been identified that the Enhanced Care and Support programme is likely to be delayed in delivering one of its key elements – Home Ward due to recruitment difficulties. There is therefore an opportunity to consider how any slippage within current resilience spending should be used to bridge impact on performance until the Home Ward is in place.



# Schemes

The two schemes already in place are the Navigators and Improved Discharge Information

## **Navigators**

4 Band 4 WTE Navigators started on a 3 month trial basis in May, with the purpose of supporting the wards in ensuring all the necessary paperwork for a supported discharge was completed in a timely manner. They were assigned to wards and enable the Discharge Coordinators to concentrate on the more complex patients.

They made a significant impact on the number of days for CHC paper work to be completed (reduced from an average of 12 days to less than 4) and have been well received by wards and clinical teams. Their appointments have been extended to end of March 2017

## **Improved Discharge Information**

The Trust is now using a specially commissioned database to track all complex discharges, this links with the Icare system and enables all those involved in a patients discharge to update what is happening with the patient and share this with colleagues. We are currently rolling out access to other agencies on site to enable them to input updates directly and reduce time lost whilst awaiting progress updates from panel etc.



## Further Schemes

Discussion within the Trust has suggested that there is benefit in supporting the following schemes to increase resilience internally. Exact costings are currently being agreed with finance to enable this:

- Additional nurse in ED 24/7 to increase safety levels due to demand on the department
- Additional pharmacist and pharmacy technician to reduce delays in TTOs and support discharges before 1pm.

In addition Operation Bridge, a project to reduce the number of Ready For Discharge patients from Lewisham CCG within acute beds, which has been running since August and is showing significant impact, is likely to be extended to cover the gap until Home Ward is in place.



## Operation Bridge

Operation Bridge is funded from CCG held resilience monies (separate to the £1.4Million) and consists of the following:

- Increasing Resource for CHC Nurse Assessment
- Family Caseworkers
- Social Worker Complex Case Manager
- Advocacy
- Flexible funding

It has been running since mid August and has improved the number of Lewisham CCG patients on the Ready for Discharge list to below 40, it has made significant impact on waits for CHC outcome, IMCA (Independent Mental Capacity Assessment) Social work assessment and equipment.

There is further work ongoing to provide increase support at evenings and weekends for families identifying care homes as there are a number of patients delayed while families make these choices.

