



Shropshire Clinical Commissioning Group



Health and Wellbeing Board Meeting Date: 16th January 2020

Item Title Shropshire Care Closer to Home – Update Report

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1. Summary

This paper provides an update on the Shropshire Care Closer to Home programme.

2. Recommendations

The Health and Wellbeing Board is recommended to note the information and progress outlined in the report.

REPORT

Programme Phases & Progress Updates

Phase 1

The Frailty Intervention Team (FIT) is based within the A&E Departments of both Royal Shrewsbury Hospital and Princess Royal Hospital in Telford and the service runs 5 days per week at both sites. Recent recruitment to the teams has improved the staffing issues previously identified, including the recent appointment of a substantive Consultant Geriatrician, however adequate levels of support to the teams remains a concern, through Matron support at RSH and Rapid Response input to the PRH team. Both teams are reporting positive results around reducing length of stay, improving discharge and avoiding emergency admissions to the acute hospitals.

Phase 2

Case Management has been underway at the eight pilot sites since mid-August and 463 patients have been contacted to gain their consent to take part in the pilots. As at the end of November, 43% of patients had consented to be Case Managed. A small number declined consent and the remainder are yet to respond. Initial assessments have been taking place to develop holistic care plans which will be co-ordinated by the Case Manager and delivered by a multi-disciplinary team including health, mental health and social care colleagues.

In terms of system impact, for the risk stratified cohort of individuals from the GP practices involved in the pilots, in the first 2 months across 8 practice locations, the teams have prevented:

- 30 ambulance conveyances;

- 46 A&E attendances;
- 44 acute admissions;
- 12 acute readmissions.

Feedback from both staff and patients involved in the pilots has been very positive so far and the Case Management teams have captured a number of case study examples of how earlier identification of needs and provision of proactive preventative care via joined up working is improving lives, conditions and outcomes and demonstrating the positive impact of this new model of care.

Monitoring of the progress of the pilots will continue until the end of March 2020 when the pilots are due to end although discussions are taking place with partners around potentially extending the pilot period to test out the model more fully and evaluate the impact over a longer period.

Risk stratification data is being drawn in early January 2010, combining primary and secondary care data before applying a number of criteria and filters that are used to identify individuals who may be at risk of hospital admission and who could benefit from earlier support and intervention. At this stage the data is only being drawn to give the team an idea of numbers from each practice who would potentially be referred into Case Management to help inform wider workforce modelling for the system that is underway.

Phase 3

The Programme Team have been working with partner and provider organisations over several months to impact assess the Phase 3 models of care which were approved by Shropshire Clinical Commissioning Committee in June 2019. A number of workshops have taken place with colleagues in the various organisations to identify any unintended consequences of implementing the new models and pathways. Where impact or risk has been identified further assessment has taken place with input from the CCG Quality Team to plan mitigation. The process is now almost complete with an outcome report expected around February 2020 which will go to the CCG Clinical Commissioning Committee who will agree next steps.

Enablers

Work continues with partner and provider organisations to implement a Shropshire Council system, Liquid Logic, as an interim IT solution allowing data flow from partner organisations and enabling Case Managers to have an overview of the people they are working with. The task and finish group are working through the technical aspects of the data transfer and are also involving Information Governance colleagues to ensure all data protection requirements are considered and met at an early stage in the project.

Whole system workforce transformation planning is now underway with all partner and provider organisations and is being driven by Health Education England and the STP at a system level. This work will map out the shift required in terms of workforce to deliver the new models of care in Shropshire Care Closer to Home.

Next Steps

Public Health colleagues are now refining the draft Joint Strategic Needs Assessment document following input from stakeholders across the whole system. This document will establish the general direction of travel for the county in terms of what health and social care

needs will be required over the coming years and will shape the services provided in Shropshire. An easy read version of the JSNA is also being developed that will be released for public information.

A public and provider event to explore the JSNA findings was due to take place in December 2019 but due to guidance received from NHS England on purdah restrictions surrounding the general election the event was deferred until Wednesday 26th February 2020. This workshop will be an opportunity to discuss in detail what the data in the JSNA indicates for the people of Shropshire and following this event work will begin on developing the requirements for step-up community beds in Shropshire.

List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)
Cabinet Member (Portfolio Holder)
Local Member
Appendices

