

2019/20 CCG Winter Schemes

A & E Delivery Board:	Bromley
Completed By:	Clive Moss, Urgent Care Lead Bromley CCG
Total Budget:	£646,000

Winter Schemes							
Organisation	Scheme Title	Scheme Description	Scheme length	Estimated Cost	Expected Impact	Key Performance Indicator	Staffing RAG rating
Bromley Healthcare	Community in-reach in PRUH	Creation of a hospital based team of community clinicians to support the discharge process and front door frailty from the hospital. Working 8am to 6pm across 7 days a week	Oct-March	£38,636	Having a community based clinician based in the PRUH will help facilitate a pull model of discharge as well as supporting the discharge process while new systems are embedded. This will build on the pilot scheme which has been in place since July 19 and has evidenced a positive impact on flow	Reduction Length of Stay Reduction in admissions Reduction in readmissions	
	Clinical triage function within the Bromley Healthcare Care Coordination Centre	All referrals from hospital and community to pass through a clinical team in the CCC who will identify the required clinical input and arrange directly with the required community clinicians. Includes initial project management support for three months to deliver UEC changes.	Dec-March	£113,915	Referrals will no longer be required to understand multiple pathways that lead to confusion and a lack of appropriate referrals. Instead referrals will be made based on patient need rather than by service	Reduce ED attendances Reduce admissions for patients presenting to ED Reduce re-admissions Reduction Length of Stay Improved patient experience	
	Telehealth monitoring	Implementation of the current telehealth system, a wearable armband that monitors patients vital signs and produces a live feed with alerts to a web based platform	Nov-March	£43,382	This would allow for more complex patients to be cared for in the community whilst providing assurance to the hospital consultant about their wellbeing. Alerts would be monitored via the CCC triggering a response from Rapid Response with any variation from baseline.	Reduce ED attendances / maintain people in own homes Improved patient experience	N/A
	Urgent response capacity within community therapy teams	Additional headcount in community occupational therapy and physio to facilitate a more urgent response for patients discharged from hospital over winter.	Dec-March	£66,176	Currently community physio and OT services are not set up to provide the kind of urgent response that is often required to facilitate a hospital discharge, waiting times have also acted as a deterrent for referrals from Primary Care. This additional staffing will allow us to set up a 2 day response route for therapies where required	Reduce re-admissions Reduction in waiting times Reduction Length of Stay Improved patient experience	
	Additional Rapid Response Capacity to Primary Care	Provide healthcare professional support (including ANPs) to undertake GP home visits, reducing demand on GP call outs	Dec-Feb	£69,888	To support increase in demand for home visiting providing timely provision of visits to reduce demand on primary care and preventing escalation of need such as hospital admission.	95% Utilisation of ANP home visiting capacity utilised by GP Practices	
Bromley GP Alliance	Additional GP Hub appointments	Providing additional hub appointments during key pressure times. Providing new Hub at PRUH for patients who require primary care type intervention who come to Urgent Care Centre or A&E. Weekdays 6-9pm / Weekends - 11am-3pm	Dec-Mar	£125,294.97	Increase in surges in UCC from patients coming after 4pm who could be seen in primary care setting. More people to be seen in primary care mitigating increase in UTC attendance. Reduce impact of surges on UCC - Reduction in 4 Hour Breaches - Reduction in ED Handover breaches	95% Utilisation of bookable appointments by UCC/ED 95% Utilisation of bookable appointments by GP Practices	
BHC / BGPA	GPOOH over Christmas and New Year GPOOH resilience	Additional capacity for GPOOH over Christmas and New Year period where previous years' there had been an surge in demand.	1st Dec-31st Jan	£13,838	More people to be seen in primary care mitigating increase in UTC attendance	100% rota fill	
Greenbrooks	Floor Co-Ordinator pilot and Additional Healthcare Assistants (HCAs)	1. A floor co-ordinator 6-10pm weekdays and Weekends to ensure flow is managed in PRUH UCC in times of increased attendance 2. Additional HCA cover in both UTC sites to add capacity over winter 3. GP Enhanced rates to ensure hard to fill sessions are filled in Dec-Jan.	Oct-Mar	£68,928	Maintain required performance during increased attendances. Reduction in Emergency Department attendances Reduction in admission Delivery of triage and 4 hour target Increased patient satisfaction over peak periods Ensuring complete rota fill across evenings and weekends to ensure more	98% Type 3 Performance Reduction in Emergency Department attendances	
CCG	Winter Communications / Flu Vaccination Clinics	100,000 Winter Leaflet for Bromley Residents including information on vaccinations, NHS 111 and GP Hub information. Information poster for Care Homes detailing support they can access across the system. Also flu clinics provided for front line social care, firefighters and policemen.	All Winter	£10,150	Ensure patient uptake of flu / pneumococcal / shingles vaccinations is as high or higher than last year. Ensure healthcare staff in the community are aware of the need to get vaccinated and how to get vaccinated.	10% increase in Patient / Staff Flu Vaccinations across providers.	N/A
King's College Hospital	Respiratory rapid access clinics	Patients identified in ED / AMU will have a respiratory assessment by the nurse, this will include the COPD and Asthma discharge bundles, treatment optimisation, completion of national audit database, provide brief smoking cessation advice and onward referral to community respiratory teams/palliative care teams.	Dec-March	£11,000	Similarly to the above we do not currently have rapid access to specialist respiratory advice in the community. By designing this it will not only enhance hospital discharge allowing for strong links to be set up with the PRUH respiratory team but will also allow for rapid access to those with a long term issue in order to prevent an admission.	Completion of acute / community pathway design.	N/A
	Near patient testing for flu	Near Patient flu testing to ensure side room capacity is only utilised when necessary.	Dec-March	£20,000	Increase flow through hospital, freeing up side room capacity.	Reduction in side room utilisation for flu patients. Reduction in unnecessary bed moves	N/A
Immedicare / NHS Airdale Trust	24/7 telemedicine support for Care Homes Pilot	12 month pilot of telemedicine support with 10 residential care and nursing homes who were shown to have high admissions to the PRUH or have a high London Ambulance Service incident and/or non-conveyance rate (or a combination of each). A further 5 homes in this cohort will be identified to test the utilisation of the 111* lines.	Feb 19 (12 month pilot)	£63,360	The clinical hub is staffed 24/7, 365 days per year by a highly experienced multidisciplinary team comprising of clinical call handlers, nurses, therapists and paramedics from a variety of backgrounds. The aim is to provide early intervention which can shorten the time from diagnosis to treatment for care home residents. This will in turn aim to reduce the number of LAS call outs and conveyances and unnecessary admissions to hospital.	Reduction in Ambulance Call outs and conveyances to hospital Reduction in A&E Attendance Reduction in Hospital Admission	N/A
Total Spend				£644,568			

2019/20 Winter Schemes - LBB

A & E Delivery Board:	Bromley
Completed By: Tricia Wennell/Carol Brown	London Borough of Bromley
Total Budget:	£1,047,540

Winter Schemes									
Organsation	Scheme Title	Scheme Description	Cost	Expected Impact	Priority this scheme addresses	Timescale for Implementation	Key Performance Indicator	Staffing RAG Rating	Lead Person and contact details
London Borough of Bromley	Intensive Personal Care Service	Night sits, live in care, temporary & emergency placements, increases to existing packages for a maximum of up to four weeks available for the full year.	£140,000	Facilitate Discharge and avoid admission to hospital and care homes	1 to 6	1st october 19 (full year)	Reduction in Length of stay / delayed discharges		Carol Brown
London Borough of Bromley	Fast Response/Bridging for Reablement	Personal care provided within 2 - 4 hours of request to meet care needs to facilitate discharge prior to ongoing services being available.	£19,840	Facilitate Discharge and avoid admission to hospital and care homes	1 to 6	1st october 19	Reduction in Length of stay / delayed discharges		Carol Brown
London Borough of Bromley	ECH step down schemes	8 dedicated Assessment flats available within 24 hours with an exit strategy	£182,000	Facilitate discharge and avoid re-admission or social admission	1 to 6	1st october 19	Reduction in Length of stay / delayed discharges	N/A	Carol Brown
London Borough of Bromley	Deep Clean/Handyman Service	Providing quick efficient service to clean the home environment and move furniture etc to enable care and equipment to be provided. Available for the full year	£30,000	Facilitate Discharge and avoid admission to hospital and care homes	1 to 6	1st october 19 (full year)	Reduction in Length of stay / delayed discharges		Carol Brown
	Staffing	Providing quick efficient assessment service to vulnerable adults and their carers ensuring timely intervention with skilled staff who are familiar with the local area and Bromley procedures and processes. Available for the full year	£675,700	Facilitate Discharge and avoid admission to hospital and care homes. Mitigate significant risk in recruiting agency staff at short notice	1 to 6	1st october 19 (full year)	Reduction in waiting time for D2A and Complex assessments in community. Reduction in cost of higher priced D2A packages of care.		Carol Brown, Alex Pringle, Jane Campbell, Ruth Wood.
Total Spend			£1,047,540						