SOUTH TEES INTEGRATION

Middlesbrough Health Scrutiny
Tuesday 28 November 2017

Redcar & Cleveland Borough Council

NHS South Tees Hospitals NHS Foundation Trust

NHS Tees, Esk and Wear Valleys NHS Foundation Trust

NHS South Tees Clinical Commissioning Group

Middlesbrough moving forward

Our Vision

"South Tees working together to promote health and wellbeing, reducing dependency and minimising the need for ongoing care. Ensuring our citizens are well informed and can access the right services at the right time, in the right place.

This will be achieved through maximising integration opportunities, great partnership working and a real focus on prevention and sustainable outcomes."

We need to …

- meet the demands and challenges being placed on the system
- recognise that the people and places in our Boroughs are assets and offer skills, resilience and opportunities which will be at the heart of our delivery of improvement
- work together across health and social care to develop the common purpose, trust and level of shared accountability
- plan to implement at a local level the development of community networks providing a range of health and care services that will support improved access, increased continuity of care, better coordination between and across service providers

Integration Objectives

We aim by 2020 to create a health and social care support system where:

- services and pathways are designed around people's needs;
- traditional boundaries between primary, acute, community and social care are broken down and better coordinated care is provided;
- barriers around accountability, information, incentives and time are removed;
- care is brought closer to home;
- information technology is used to its best effect to integrate systems, records and information;
- capacity is increased by extending access, eliminating waste by reducing hand offs, duplication and making the best use of all health and social care resources - i.e. the best use of the South Tees Pound (£);
- there is cohesive, whole system planning and commissioning through aligned teams and pooled budget arrangements;
- a there is a more holistic, lifelong and seamless people centric approach to health and well-being, rather than illness.

Integration In Action- Scope

Ensuring the capacity, capability and commitment to move at pace and scale

4 projects we can work together on NOW which will alleviate the financial and demand pressures this winter and help organisations move closer together

1. Keeping People Healthy
2. Admission Avoidance
3. Discharge Home
4. Out of Hospital Care

Not new projects – simply looking at issues through a much more focussed lens - why are we doing what we are doing – how effective is this?

KEEPING PEOPLE HEALTHY	•**PROJECT LEAD – Edward Kunonga** •How does the system work together to avoid future demand and plan for the longer term
ADMISSION AVOIDANCE	•**PROJECT LEAD – Erik Scollay** •What are the actions the whole system can take, once people are ill, to prevent a hospital admission
DISCHARGE HOME	•**PROJECT LEAD – Patrick Rice** •How can the whole system work together to ensure that once a patient is admitted to hospital that they are discharged home without delay?
OUT OF HOSPITAL CARE	• **PROJECT LEAD – Craig Blair** • How does the system work in partnership with people, pre and post chronic conditions, so we can support them to manage their condition at home?

Business intelligence | Workforce | Finance & Commissioning | Digital | Engagement

Integration in Action

'Enabler' Workstreams

- Business Intelligence
- Workforce
- Finance & Commissioning
- Digital
- Communications

Keeping People Healthy – Reduction in people with long tem conditions

Primary Prevention;

- Building resilient communities
- Best Start in life

Secondary Prevention;

- Active case finding
- Social Interventions (social prescribing)

Admission Avoidance – Reduction in non elective admissions

- Step up care
- Risk Stratification
- Care Homes
- Frailty Unit

Discharge Home - Increase the number of people discharged home

- Seven Day Services
- Early discharge planning
- Multi Disciplinary Discharge Teams
- Trusted assessors
- Enhancing Health in Care Homes

Out of Hospital Care – Reduced dependency on hospital services

- Integrated Rapid Response Services
- Increased Access to Primary Care
- Outpatient Programme (IMPROVE)
- Develop and Implement Discharge to Assess
- **Community Matron and District Nursing**

Integration In Action

Key Projects

Redcar & Cleveland Borough Council

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KEEPING PEOPLE HEALTHY

- Reduction in people developing long term conditions

The following projects have been identified – primary prevention

1. Building resilient communities – Aging Better, Priority places, Transformation challenge

2. Health promoting settings – NHS and high foot-fall/population coverage organisations

3. Systematic roll out of Making Every Contact Count

4. Best Start in Life

5. Integrated wellness approaches - Live Well Centre Middlesbrough

6. Campaigns, awareness and behaviour change

7 . Health in all policies – social determinants of health

KEEPING PEOPLE HEALTHY

- Reduction in people developing long term conditions

The following projects have been identified – secondary prevention

1. National Diabetes Prevention programme – wave 3

2. Active case finding – cancer screening, NHS Healthy Heart Check, Lung Health checks, Hypertension strategy

3. Effective prehab and rehab programmes

4. Effective Chronic disease management in primary care - to include self care and self management

5. Systematic delivery of social interventions – social prescribing principles

6. Risk stratification and assertive outreach – including other agencies (Safe and well visits)

7 . Preventing step up and managing step down of care for priority groups – mental health, carers, dementia, falls, learning disabilities,

ADMISSION AVOIDANCE

- REDUCTION NON ELECTIVE ADMISSIONS

The following projects have been identified as those most likely to influence NEL admission reduction

1. Step Up

2. Care Homes

3. 24/7 ED Consultants

4. Risk Stratification/Community Matrons

5. Rapid Response

3. Implementation of Single Point of Access

7 . GP feedback and incentives

DISCHARGE HOME

- Reduction in delayed transfers of care

The following projects have been identified as those most likely to influence reducing delays in discharge

1. Early Discharge Planning
2. Systems to monitor patient flow
3. Multi Disciplinary Discharge Teams
4. Discharge to Assess
5. Seven day Service
6. Trusted Assessors
7 . Focus on Choice
8 . Enhancing Health in Care Home

OUT OF HOSPITAL CARE

- Reduced dependency on hospital based services

The following projects have been identified as those most likely to support increased out of hospital care

1. Case management and advanced care planning (CDM)

2. Development of Community Networks

3. Integrated Falls Service

4. Integrated Rapid Response services

5. Develop and implement discharge to assess model

6. Community Matrons and District Nursing

7 . Increased Access to Primary Care (7 day access over extended day)

8 . Outpatient Programme (IMPROVE)

Are we making a difference?

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Delayed Transfer for Care

	Baseline			July 2017			August 2017			September 2017(target in Red/Outturn in Black)		
	LA (Feb 17)	NHS (Q4)	Total (Feb-17)	LA	NHS	Total	LA	NHS	Total	LA	NHS	Total
Middlesbrough Council	4		12.6	1.7	9.4	11.1	3.0	8.1	11.1	**2.8** **0.8**	**6.6** **7.7**	**9.3** **8.5**
Redcar & Cleveland Council	7		17.5	3.7	14.7	18.4	3.0	11.0	14.0	**2.8** **1.8**	**5.9** **12.4**	**8.7** **14.2**
South Tees	11	18.7	30.1	4.4	24	29.5	6.0	19.1	25.1	**5.6** **2.6**	**12.36** **20.1**	**18** **22.7**

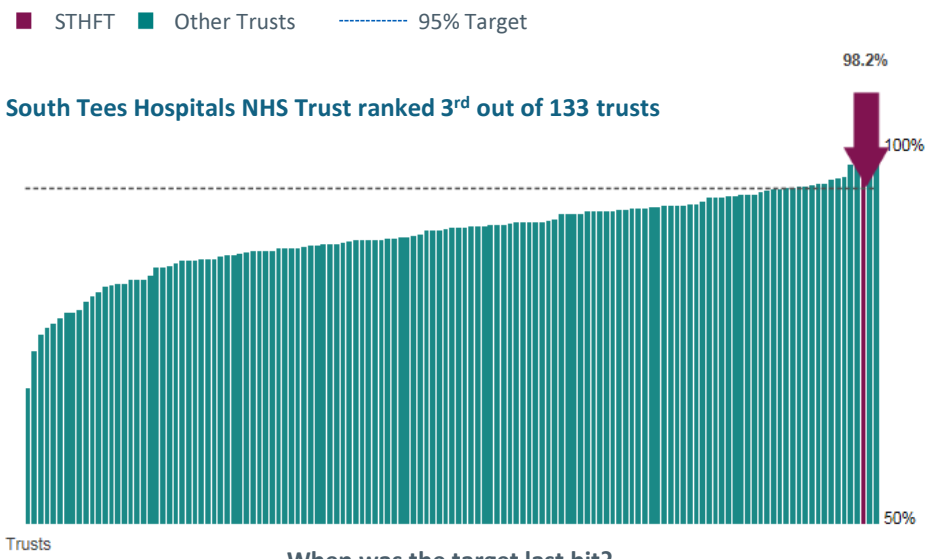
Non Elective Admissions

- **Middlesbrough and Redcar & Cleveland LAs**, there was a decrease of 3.2% in overall NEL admissions in the period April 2017-September 2017, as compared to this period in the previous year.
    - For **Middlesbrough LA**, there was a decrease of 1.8%
    - For **Redcar & Cleveland LA**, there was a decrease of 4.9%
- Notable change was seen in the following areas:
    - Nervous System (18% **decrease**);
    - Endocrine and Metabolic System (28%) **increase**);
    - Infectious Diseases, Immune System Disorders and other Healthcare contacts (14% **decrease**).

A&E Performance

South Tees Hospitals NHS Foundation Trust	England	
98.2%	90.1%	October 2017

Target: 95% treated or admitted in 4 hours

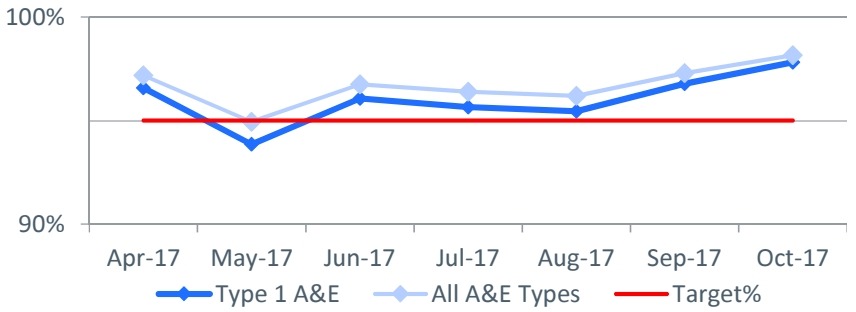


South Tees Hospitals NHS Trust ranked 3rd out of 133 trusts

When was the target last hit?

October 2017	July 2015
South Tees Hospitals NHS Foundation Trust	England

Time Series Analysis of A&E Performance At South Tees Hospitals NHS Trust



Time Series Analysis of Total A&E Performance Over Last 3 Years