

"PLAN ON A PAGE"

Hambleton, Richmondshire & Whitby SRG
Version 3.7 - HRW SRG 2014/15 Resilience Schemes (E940.2k) - Including cost and impact summary

Scheme groups	Number	Lead Manager	Organisation	Scheme/Initiative Proposal	Individual scheme benefit / outcome	Cost £000	Specific group KPI(s)	Planned impact
Community-based demand management schemes	5	Kathryn WS (CCG)	Stokesley CCA	Hambleton Good Neighbours	Support people in their home Loneliness Keeping well at home Independent Living	9.8	Numbers of 999 calls Waiting times for GP appointments	Maintenance or reduction in number of calls made Maintenance of existing standards for routine and urgent appointments within CCG audit
	6	Kathryn WS (CCG)	Bradbury Centre	Independent Living Support - Esk Valley Activities programme for the Over 50s	Independent Living Loneliness Keeping well at home Supporting people in their home	10		
	7	Abi Barron (CCG)	TEWV	Enhanced Community Liaison Service for Children in Whitby particularly those with hidden impairments (6mths Fixed Term Band 6 Nurse)	Independent Living Signposting to appropriate care/services (PC and CVS) Crisis prevention - general health and mental health Reduce A&E attendances & self harm risk	25		
	9	Kathryn WS (CCG)	St Theresa's Hospice	Respiratory Clinic Moved from Darlington to Richmond (Nov - Mar)	Care provided closer to patient's home Independent Living Crisis prevention	20		
	12	John Cartwright (YAS)	YAS	Frequent Caller Service Identify and address top 10 emergency service callers Can be implemented locally by YAS Commence Q3 2014/15	Reduction in use of emergency service by high use patients Improved patient outcomes and experience Assists YAS and A&E improve performance	50		
	21	Alex Trehwitt (CSU)	CSU	Winter Public Awareness Campaign ("Keeping Well") In collaboration with other CCGs across Yorks & Humber	Raise public awareness on the health risks of winter Public advice advice on the steps the public can take this winter to keep well.	5		
Community-based patient management schemes	1	John D (CCG)	HRW GPs / YAS	GP "In Hours" Triage Across All HRW GP Practices	Improved YAS 999 Response times Demand Management Patient Experience Patients treated closer to home Mitigation against increasing hospital A&E demand	5	A&E attendances Fast Response Team Activity 999 8 min response times	Maintenance or reduction in number of A&E attendances of 2013/14 base-line Increase in activity compared to 2013/14 base-line Maintenance or improvement in response times of 2013/14
To improve the community-based response for a request for help and to ensure the appropriateness of that response	4	Mark Inman (YAS)	YAS	Community Paramedic Practitioner - Whitby	Patient Experience Demand Management Improved YAS 999 Response times Treating our patients closer to home	39		
	10	Mark Inman (YAS)	YAS	Northallerton DCA - Paed/Maternity Service Reconfiguration (Nov 2014 implementation date - recurrent E)	Delivery of Emergency/Urgent Maternity Transfers from FHN to JCUH Integration of YAS and Primary Care in Northallerton Improved 999 emergency response times in Northallerton area.	200		
	11	John D (CCG)	365Response	GP Urgent Patients Conveyance (Nov 14 - Mar 15)	Improved response time for GP Urgents Improved YAS 999 Response times Reduced risk of 999 escalation Improve patient experience & service quality	130		
	13	John D (CCG)	Primary Care	To Be Confirmed Increased support to GP Practices this winter to increase resilience	Demand Management A&E/MIU attendance/admission Avoidance Patients receive treatment from their local GP	111		
	19	David Kerr (TEWV)	TEWV	Development of MH Home Care Liaison Service - Whitby 1 x Band 6 nurse and 1 x Band 5 nurse 2 additional Sessions Consultant Psychiatrist Receive referrals from Whitby EMI Homes Provide Training and Support to district nurses to improve referral process Provide support to nursing homes, increase conf and avoid admission Work across Hospital Liaison, Comm MH and Primary Care Work in partnership with Neighbourhood scheme for LT Diseases	Reduce admissions from Nursing Homes to MH Beds at Cross Lane Reduce referrals to acute hospital Reduction of 20% by March 2015 (based on March 2013 baseline) Patient experience Care provided closer to patient's home in the community	60		
Hospital-based management schemes	2	Julie Suckling (STHT)	STHT	A&E Overtime Sat/Sun - Consultant Friarage Hospital, Northallerton	Service resilience A&E 4hr performance target delivery Patient Experience Targeting periods of higher A&E demand Minimising admissions to CDU/Ward through senior clinical leadership	93.8	NEL admissions 4 hour A&E waits A&E response times Zero day stays Ambulance turn-around times Bed closures GP OOH activity	Reduce emergency admissions of 2013/14 base-line in accordance with QIPP plan Ensure 4 hour target is maintained throughout 13/14 Reduction in average waiting time within department Increase in zero day stays of 2013/14 (within context of reduced NEL admissions and LOS) Ensure existing turn-around times are maintained and breaches minimised Fewer closures of 2013/14 of beds / wards due to norovirus or similar illness Increase in activity within OOH service transferred from A&E (at no or reduced tariff)
To improve the acute response so that place and outcome of care is optimised	3	Julie Suckling (STHT) Matt Walker (HDFT)	STHT / HDFT	A&E / OOHs Nurse Practitioner - Friarage (Fri - Mon)	Service resilience A&E 4hr performance target delivery Patient Experience Targeting periods of higher A&E demand	30		
	8	Ruth Holt (STHT)	STHT	Hydrogen Peroxide Vapourisation Machine (FHN) FHN has a PV Machine - CCG share of machine for JCUH site	Infection Control (e.g. cDif, Norovirus) Patient Safety Patient/carer experience in hospital	30		
	15	Gill Collinson (STHT/CCG)	STHT	- Additional Consultant Level Substantive Appointment - FHN - E170k FYE - (Dec-Mar 2014/15)	Patient Safety Effectively manage patients with deteriorating conditions	100		

			- Increase and enhance decision making capacity in the acute medical care pathway				
	16	Sandra Donoghue (STHT)	STHT	General Surgery & Urology Senior Decision Maker Front of House at FHN Targeted hours, 7 days per week based in CDU at FHN	Reduced admissions to Gen Surg and Urology from CDU and A&E. (Oct - Mar) Patient experience	70	
Schemes to promote discharge	14	Kathryn WS (CCG) Alex Bird (Aee UK)	Age UK	"Home From Hospital" Transport - Evenings	Patient and carer experience Support to YAS PTS out of hours	40	Delayed discharges Lengths of stay / bed days Problems with discharge medication Reduction in delayed discharges cf. 2013/14 base-line Maintenance or reduction in bed days cf. 2013/14 base-line Soft intelligence / straw poll from GP practices to confirm improvements
To improve capability and capacity to facilitate speedier return back to community services	17	Chris Woodgate (STHT)	STHT	Community Therapy Rehab Capacity (Hambleton & Richmondshire) Capacity / demand analysis showed need for 3 addition WTE staff	To meet current service demand and allow 7 day working (Oct - Mar) Care provided closer to patient's home based in the community Patient experience	75	
	18	Chris Woodgate (STHT)	STHT	Pharmacy - medicines management and reconciliation (FHN) Review by pharmacist at admission, then daily until discharge. £88k STHT x 26% HRW Share = £23k	Medicine optimisation (Oct - Mar) Patient experience of a more effective/efficient discharge	23	
	20	Gill Collinson (STHT/CCG)	NYCC	Social Worker support and in reach to the Friarage Hot Clinic for geriatric assessment for patients >65yrs (Oct 14 - Mar 15)	Facilitate timely and supported assessment discharge	12	
Note: RTT Funding to support the delivery of 18 weeks is currently being agreed with STHT.				Proposed HRW SRG Schemes Grand Total		£1,138.6	
				2014/15 HRW Allocated Resilience Funding		£940.2	
				2014/15 HRW CCG Additional Funding Support		£198.4	
				2014/15 HRW SRG Total Non-Recurrent Funding		£1,138.6	