

## **Out of Hospital Teams**

### **Suggested approach from Maureen Orr, Democratic Support and Scrutiny Team Manager**

A report on the progress of Out-of-Hospital services in Great Yarmouth and Waveney.

#### **1. Background**

- 1.1 On 15 July 2016, Great Yarmouth and Waveney Joint Health Scrutiny Committee received a 'Shape of the System' six-month progress update from the CCG. This included information about the progress of the Out-of-Hospital teams, which were an important part of the new service model.
- 1.2 The North Out-of-Hospital Team was considered to have had a positive impact on the number of emergency admissions to the James Paget Hospital, particularly in the 75 plus age group.
- 1.3 The South Waveney Out-of-Hospital teams were in the process of development with a local model of out of hospital care being commissioned from the Sole Bay Health Centre and work underway with East Coast Community Healthcare to expand the resource and resilience of the Lowestoft Out of Hospital team to support patients in the Beccles, Bungay and Kessingland areas.
- 1.4 Following the 'Shape of the System' consultation the CCG had committed not to close Patrick Stead Hospital, Halesworth, until suitable alternative provision was available. The CCG was continuing to plan for the implementation of an out of hospital team and beds with care.
- 1.5 In September it was reported in the press that the Patrick Stead Hospital was soon to close ward to admission of new patients due to staff shortages.

#### **2. Purpose of today's meeting**

- 2.1 The CCG has been asked to provide the Joint Committee with an overview of the Out-of-Hospital services including:-
  - (a) Description of the services, including:-
    - staff numbers
    - the numbers of vacant posts
    - locations in which staff are based
    - the geographic areas served

- details of the care provided.

(b) Progress in development and implementation of the Out-of-Hospital services across the CCG area.

(c) Assessment of the success of the services implemented so far in terms of:-

- i. Patient feedback
- ii. The effect on emergency admissions to hospital
- iii. Performance against any key performance indicators set for the services
- iv. The effect in terms of financial savings.

2.2 The CCG's report is attached at Appendix A and representatives have been invited to answer Members' questions.

### **3. Suggested approach**

3.1 After the CCG representatives have presented their report, Members may wish to discuss the performance of the Out of Hospital services to date and the plans for implementation across the whole Great Yarmouth and Waveney area.



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# Great Yarmouth and Waveney Clinical Commissioning Group

HealthEast

## Briefing for Great Yarmouth and Waveney Health Scrutiny Committee:

### Update on the out of hospital teams

#### 1. Description of the Services

The Out of Hospital Team (OHT) is an inter-disciplinary team of health and social care professionals. The objective of the service is to provide care at home whenever it is safe, sensible and affordable to do so. The care the team provides is organised around the patient, focusing on individual need and empowering independence. The team, in the main, provides intensive, short term care, which reduces as the patient regains health and independence. Care is holistic, co-ordinated and responsive and goal focused, using a case management approach.

The shared values and aims underpinning care delivered by the team include:

- Patient centred care; staff involve patients and their family and, or carers in the care planning approach
- Staff are sensitive to the needs of family and carers
- Care is provided in patients' usual places of residence or Beds with Care
- The team is easily accessible to patients and their families and, or carers
- The team focuses on proactive delivery of care and where a patient is in crisis reacts rapidly to keep that patient safe in their usual place of residence if it is safe and sensible to do so.

There is currently a Lowestoft OHT and North OHT provided by East Coast Community Healthcare, and a Community Integrated Care Team (CICT) in Southwold and Reydon provided by Sole Bay Health. The model in Southwold and Reydon is a locally designed model to support the needs of this population. This is in line with the CCG commitment, through the Shape of the System Public Consultation, to develop locally appropriate models of care with local stakeholders. The CICT is in the early stages and will continue to develop over the coming months.

#### 2. Staffing

The OHTs are made up of key health and social care professionals supported by workers able to perform many types of basic nursing, therapeutic and personal care tasks. Teams incorporate the follow staff groups -

### Senior Professionals

- Independent Nurse Prescribers
- Community Nurses
- Physiotherapists
- Occupational Therapists
- Social Workers
- Social Care Assessors

### Support Staff

- Assistant Practitioners
- Reablement Practitioners
- Generic Workers
- Home Care Workers
- Community Phlebotomists

In addition to the above the team has a combined triage team made up of both health and social care professionals including:

- Day Co-ordinators (Health)
- Duty Workers (Social)
- Allocation Co-ordinators
- Administrators

This team are responsible for:

- Receiving referrals
- Contacting various others for further information
- Triage referrals
- Allocating assessments
- Imparting necessary information to the assessor
- Daily contact with acute and community bed providers to ascertain details of patients who will require supported discharge
- Daily contact with acute and community bed providers for updates on patients' expected dates of discharge and any changes to patients circumstances and, or care needs

The CICT consists of two part time nurses, one healthcare assistant, seven carers, a physio assistant, support worker, GPs and the Community Matron work in partnership with the multi-disciplinary out of hospital team to ensure that where at all possible, frail and/or unstable patients are supported to stay well and independent at home.

### 3. Staffing Structures

The OHTs/CICT comprise of the following staff groups and whole time equivalents (WTE):

#### Lowestoft OHT

Lowestoft OHT - structure of team		
Staff Group	WTE	Band
Manager	1	7
Nurse	7	6
Physiotherapist	2	6
Occupational Therapist	2.6	6
Technical Instructor	1	5
Triage Co-ordinator	1.8	4
Assistant Practitioner	12.4	4
Rehab Support Worker	16	2
Administrator	1	2
<b>Total</b>	<b>44.8</b>	

It should be noted that the above includes the Admission Prevention Service (APS) which provides support on an 8am to 8pm basis across the rest of Waveney currently. This team cannot be separated out in terms of staff as the Out of Hospital team works in a very integrated way to support both OHT and APS activity.

#### North OHT

North OHT - structure of team		
Staff Group	WTE	Band
Out of Hospital Manager	1	7
Nurse	8.6	6
Physiotherapist	1	6
Occupational Therapist	0.8	7
Occupational Therapist	2	6
Clinical Pharmacy Technician	0.37	5
Triage Co-ordinator	3.8	4
Assistant Practitioner	6	4
Healthcare Support Worker	21.08	2
<b>Total</b>	<b>44.65</b>	

#### Sole Bay Health CICT

As described above the Sole Bay Health CICT two part time nurses, one healthcare assistant, seven carers, a physio assistant and a support worker. The carers, physio assistant and support worker are self-employed and work on an as and when basis to ensure resource can be flexed to meet demand. All members of the team are fully supervised and managed by Sole Bay Health and the appropriate screening is undertaken.

#### 4. Vacancies

Below by team are the current vacancies (as of 16/09/2016) within each team:

##### Lowestoft OHT

Lowestoft OHT - vacancies		
Staff Group	WTE	Band
Nurse	2	6
Physiotherapist	1	6
Assistant Practitioner	0.6	4
Rehab Support Worker	1.8	2
Total	5.4	

##### North OHT

North OHT - vacancies		
Staff Group	WTE	Band
Nurse	1	6
Physiotherapist	1	6
Healthcare Support Worker	2.4	2
Total	4.4	

All the above vacancies are in active recruitment and are vacant due to general turnover of staff. The exceptions are the physiotherapy posts, which have continued to be challenging in terms of recruitment of suitable candidates.

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##### Sole Bay Health CICT

There are no vacancies within the team.

#### 5. Locations where services are based

The OHT in Lowestoft is based within Kirkley Mill Health Centre. The OHT North team are based within the Herbert Matthes Block on the Northgate Hospital site in Great Yarmouth.

The CICT is based at Sole Bay Health Centre.

#### 6. Geographic areas served

The Lowestoft OHT will accept referrals for patients registered with a General Practitioner in Lowestoft.

The North OHT will accept referrals for patients registered with a General Practitioner within the Northern locality of NHS Great Yarmouth and Waveney CCG.

The CICT supports patients registered at Sole Bay Health Centre.

The OHTs/CICT supports patients aged 18 years and over.

## **7. Patient Feedback**

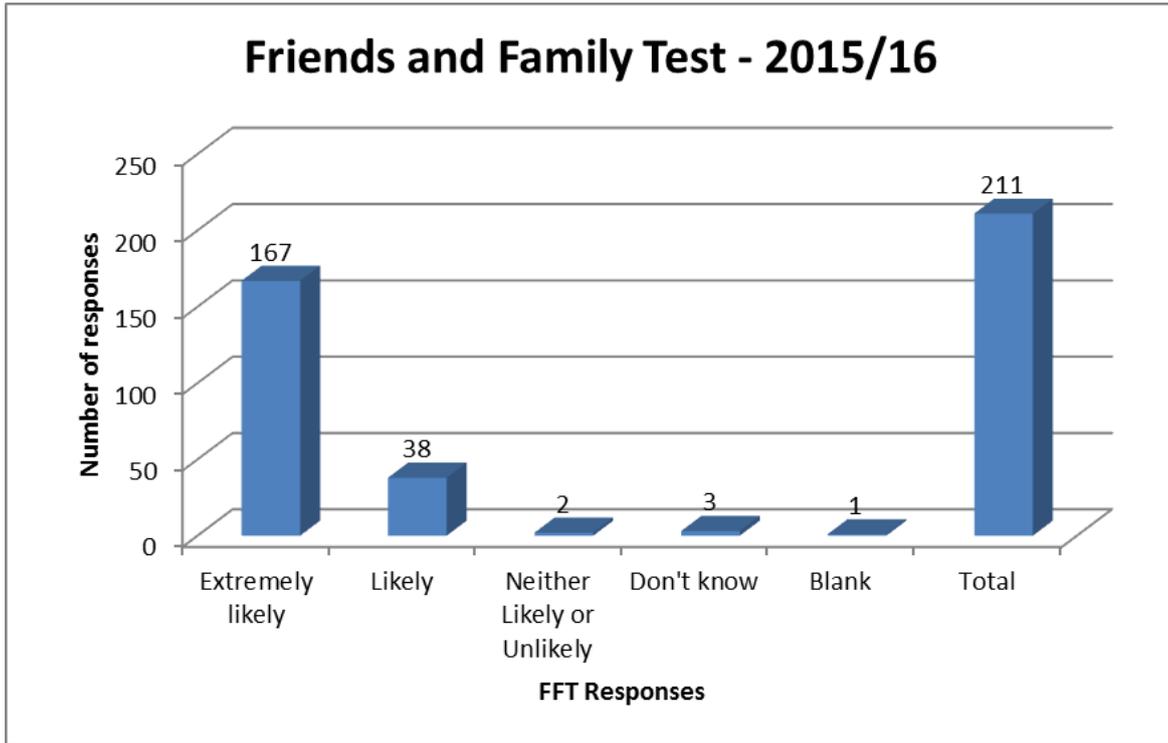
The OHTs in both Lowestoft and the North have received extremely positive patient feedback.

The Friends and Family Test has been used since April 2015 and asks patients 'How likely are you to recommend our services to your friends and family if they needed similar care or treatment?'.

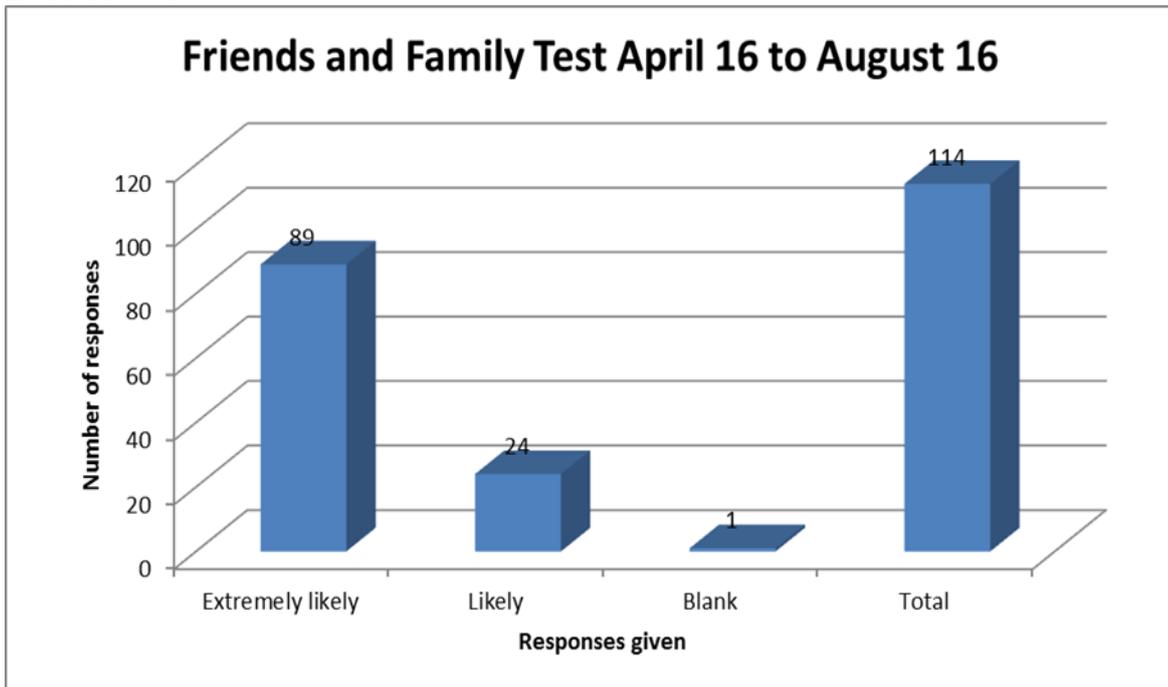
The percentage of positive responses for April 2015 to March 2016 was 97%

The percentage of positive responses for April 2016 to August 2016 was 99%. Below are the results to the end of August this year:

## 2015/16 Results



## 2016 Results

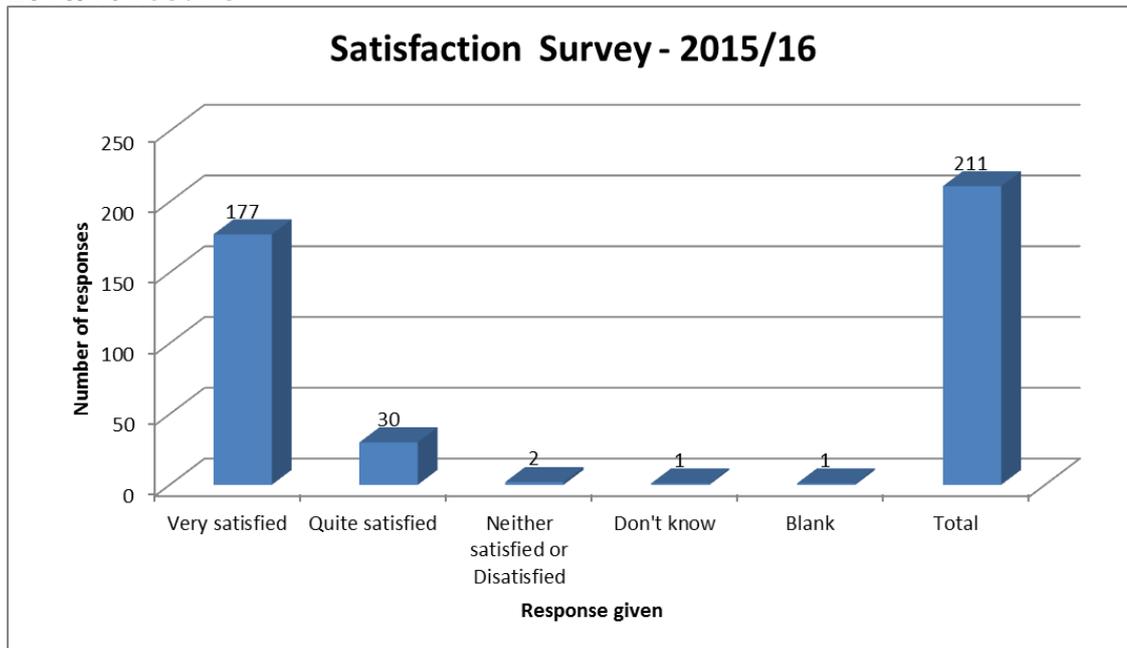


'How satisfied are you with the service you have received?' has also been routinely asked of patients seen by the service since April 2015.

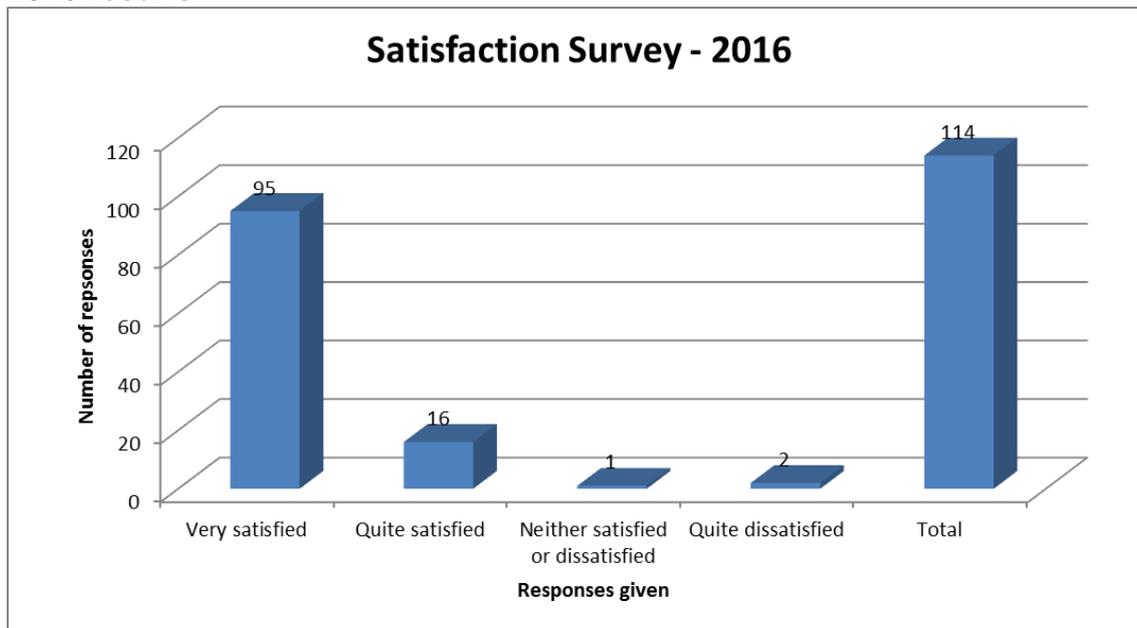
The percentage of positive responses for April 2015 to March 2016 was 98%  
The percentage of positive responses for April 2016 to August 2016 was 97%

Below are the results to the end of August this year:

**2015/16 results**



**2016 results**



**Examples of Patient Feedback**

These are comments that have been transcribed exactly as stated by the patients/families. Therefore these contain typo and grammatical errors.

“My wife was suddenly taken to hospital. I was very glad of the help”.

“I found the care given to be excellent”.

“The staff were caring informative and went out of their way to help both me and my husband  
“.

“This was a excellent service”.

“The scheme and the staff are wonderful”.

“It helped us out in a crisis”.

“Because I was treated like a person with feelings and not like a number that had to be seen too. My dignity was upheld and my embarrassment about the help I needed was treated and expelled with great care. I am so grateful”.

“The staff were very caring, kind and did all they could to make life easier”.

“Very helpful, greatly appreciated and all staff that visited were very kind”.

“We really couldn't of asked for a better service. Everyone we met was pleasant, professional, caring, helpful and were invaluable to the care of my mum. Thank you so much”.

“We are amazed at the fantastic way of speed your staff dealt with our needs. So helpful, cheerful and polite. Angels on wheels, thank you”.

Patients supported by the Sole Bay Health CICT are asked to complete a patient questionnaire, based on Friends and Family Test, after each episode of care. For quarter 1 this KPI was 100% achieved.

## **8. Key Performance Indicators (KPIs)**

A number of KPIs are in place with providers to monitor effectiveness and compliance of out of hospital teams.

Below is the list of KPIs for the OHTs provided by ECCH.

1. Improve Service User and/or Carer Satisfaction with the Services – Threshold for compliance = 80%

This KPI is measured through a patient survey given at point of discharge. ECCH has generally achieved 100% compliance month on month over the last 18 months with two exceptions where compliance dropped no lower than 97%.

2. % of Service Users issued with a service user questionnaire - Threshold for compliance = 95%

This KPI is a measure of the % of patients / carers that receive a questionnaire on discharge from the service. ECCH has consistently achieved 100% compliance over the last 18 months.

3. Provider to develop and report on an action plan to address the issues raised in response to the service user questionnaires – Threshold for compliance is evidence of an action plan in place.

This KPI evidences that where comments received from the patient questionnaire require the service to make a change / carry out an action that these are recorded in a plan and can be evidenced as completed. ECCH has consistently achieved 100% compliance over the last 18 months.

4. % of Service Users referred urgently to the Out of Hospital Team assessed within 2 hours of referral – Threshold for compliance is 98%.

This KPI is a measure of the speed of response to a request for ‘urgent’ support. ECCH has generally achieved 100% compliance month on month over the last 18 months with one exception where compliance dropped to 96% which related to a delay in care for one individual.

5. % of Service Users referred non-urgently to the Out of Hospital Team assessed within 1 working day of referral - Threshold for compliance is 98%.

This KPI is a measure of the speed of response to a request for 'non-urgent' support. ECCH has generally achieved 100% compliance month on month over the last 18 months with one exception where compliance dropped to 96% which related to a delay in care for one individual.

6. % of all Service Users receiving a care package within 12 hours of assessment (including placement in a bed with care when applicable) - Threshold for compliance is 95%.

This KPI is a measure of the speed a package of care is provided to an individual following assessment. ECCH has generally achieved 100% compliance month on month over the last 18 months with two exceptions where compliance dropped to no lower than 97% and well within target.

Sole Bay Health CICT has the same referral and care package KPIs as the OHTs. The CICT is also required to carry out the Friends and Family Test (as per section 7).

## **9. Effect on Emergency Admissions**

The CCG has seen a reduction in patients over 85 years attending A&E by 6.38% for Great Yarmouth and Waveney patients from 2014/15 to 2015/16 when there was an increase of 13.01% from 2013/14 to 2014/15.

For the period 2014/15 to 2015/16 there was a reduction in emergency admissions by 9.39% in the 85+ years. In comparison emergency admissions for GYW patients was 9.74% and 6.19% in the age groups 50-64 years and 65-84 years respectively.

The system has therefore seen a reduction A&E activity and emergency admissions for the patient population mostly support by the out of hospital teams. This will therefore reduce the acute costs for this group of patients through being supported at home.

## **10. Developing Out of Hospital Teams across the CCG Area**

As described in the CCGs Shape of the System consultation, the CCG wants a community model provided across Great Yarmouth and Waveney which helps our more older people and people with long term health conditions to remain independent in their own homes and avoid going into hospital or ending up in long term care.

Discussions are therefore continuing regarding the development and implementation of out of hospital services across the remaining areas of GYW including Beccles, Bungay, Kessingland and Halesworth to ensure models are provide the appropriate support to the population it will service.