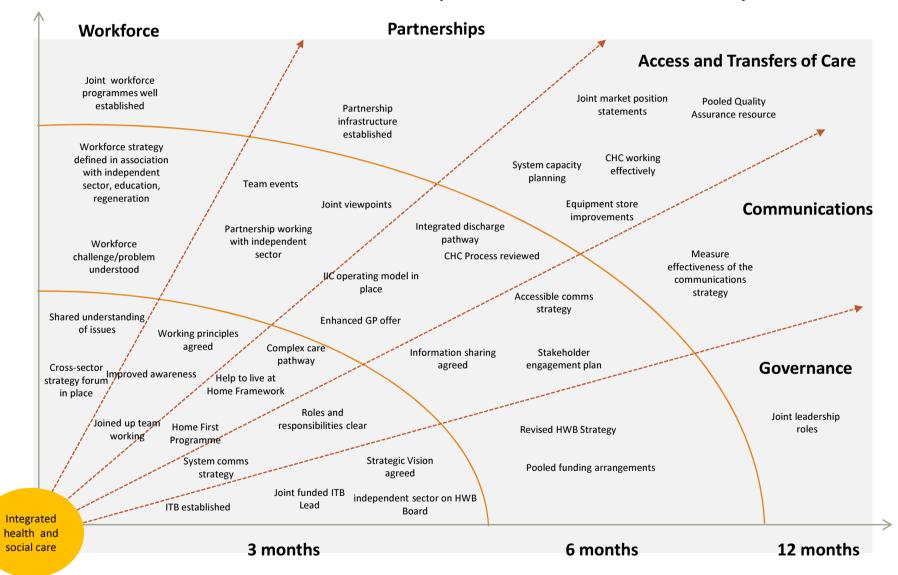
Hampshire CQC Local System Review

UPDATE 3 MONTHS ON

CQC 12 month action plan in summary



Strategic Vision, Leadership and Governance

- HWB new Strategy development underway
- New governance arrangements
 - Integrated Commissioning Board
 - Improvement and Transformation Board
- Financial management: exploring further pooling of resources under iBCF

Communication and engagement

- Carers Strategy implementation underway
- Connect to Support Hampshire developments
 - Recently launched app
 - Other multimedia and technology being explored, including Artificial Intelligence
 - Awareness raising with professionals

Workforce planning

- Workforce Strategy paper presented to Improvement and Transformation Board
 - Focuses on development of a strategic system wide relationship with independent sector
 - Work programme emerging to deliver key outcomes in CQC action plan

Patient flow and onward care update

SUMMARY OF PROGRESS

South & West Hampshire

Resilience – key challenges for Winter

- Maintaining flow through the Emergency Department
- Reducing delays in acute beds
 - Reducing DToC lost bed-days by system planning
 - Achieving +21 day 'Super-stranded' target by Dec 2018 and increasing focus on +7 day delays
 - Increasing flow to/flexible use of community beds
 - CHC End of Life delay reductions
- Maximising admission avoidance approaches: Ambulatory Emergency Care, front door frailty model, direct to service pathways

Portsmouth & South East Hampshire

Resilience – key challenges for Winter

- Maintaining flow through the Emergency Department
- Reducing Medically Fit for Discharge numbers and decreasing acute bed occupancy to 92%
- Improving 7 day acute flow
 - Increased discharges by 1pm
 - Optimising front door frailty model
 - Increased complex discharges at weekends
 - 'Why not home, why not today' rigour at every board round
- Improved admission avoidance for EOL and Care Home pathways

North & Mid Hampshire

Resilience – key challenges for Winter

- Reducing Emergency Department pressures and improving flow
- Reducing delays in acute beds improving flow through wards and early discharge planning
- Balancing demand with capacity Intermediate Care /Reablement/domiciliary care
- Reducing CHC delays: Discharge to Assess and End of Life
- Maximising admission avoidance approaches front door and community frailty, rapid care response and direct access pathways
- Enhancing support to care homes

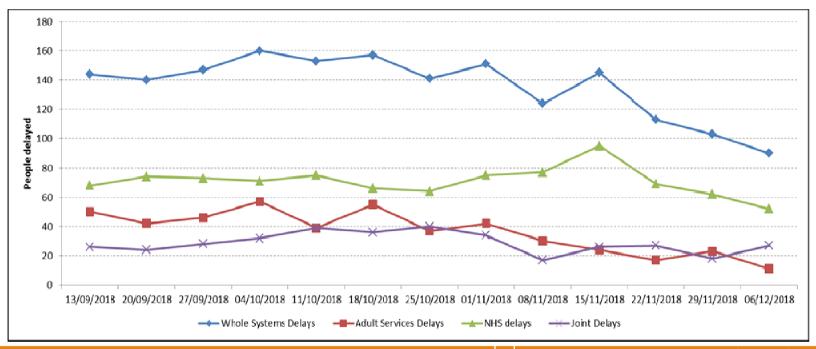
Developing the Newton themes

Programme deliverables: more people managed in the right setting of care

Local system target delivery in line with Newton recommendations:

- % reduction in waits for bedded care (from 37%)
- % reduction in waits for a decision on where the patients will go next (from 35%)
- % reduction in patient waiting to get home with some support (from 21%)

Latest position: Acute delays – People delayed per week (HCC weekly snapshot data, 6 Dec 2018)



Reported DToC People Delays for week 0	6-Dec-18				DToC People Adult Services Delays (reasons) for week 06-Dec-18					
Hospital	Whole System Delays	Adult Services Delays	NHS Delays	Joint Delays	Residenti al Care	Nursing Care	Assessme nt	Dom Care	Patient / Family Choice	Other
Frimley Hospital	7	0	5	2	0	0	0	0	0	0
North Hants Hospital	10	0	9	1	0	0	0	0	0	0
Queen Alexandra Hospital	22	0	14	8	0	0	0	0	0	0
Royal Hampshire County Hospital	22	2	10	10	0	0	0	2	0	0
Southampton General Hospital	29	9	14	6	0	1	0	8	0	0
TOTAL	90	11	52	27	0	1	0	10	0	0

Alignment with national target delivery

- DToCs to 3.5% of acute bed base
- Long length of stay (+21 days) sustainably reduced by 25%

	Portsmouth & SE Hants	Southampton & SW Hants	North and Mid Hants	TARGET
Total DToC as % of bed base (as at 6 Dec 2018)	3.46%	4.6%	6.63%	3.5% national target
Hants DToC as % of bed base (as at 6 Dec 2018)	2.27%	2.34%	6.63%	3.5% national target
LLoS (+21 day) bed reduction remaining	23 (8%)	26 (10%)	4 (2%)	Latest published report against national reduction target (~ 25%)

85% CHC assessments out of hospital - 84% for Hants (Nov 2018)