



**Healthy London
Partnership**

Urgent and Emergency Care Improvement Collaborative

Care closer to home work

17 Oct 2017

Supported by and delivering for:



Public Health
England



SUPPORTED BY
MAYOR OF LONDON

London's NHS organisations include all of London's CCGs, NHS England and Health Education England

An Improvement Collaborative in London



Londoners deserve better

Despite some successes, key indicators of quality, experience and performance in urgent and emergency care remain static and / or are declining in London. The quality of care is inconsistent with significant variation depending on where you live and what you need.

London needs better urgent and emergency care – now and in the future.



We are investing in improvement across the system

An Improvement Collaborative has been launched by NHS England London, NHS Improvement London and the Association of Directors of Adult Social Services.



We have 18 months to do this together

We will be supporting local systems to make the changes they need to make, working once for London where it makes sense and working in partnership with people who *use* urgent and emergency care services, people who *provide* services and people who *commission* them.

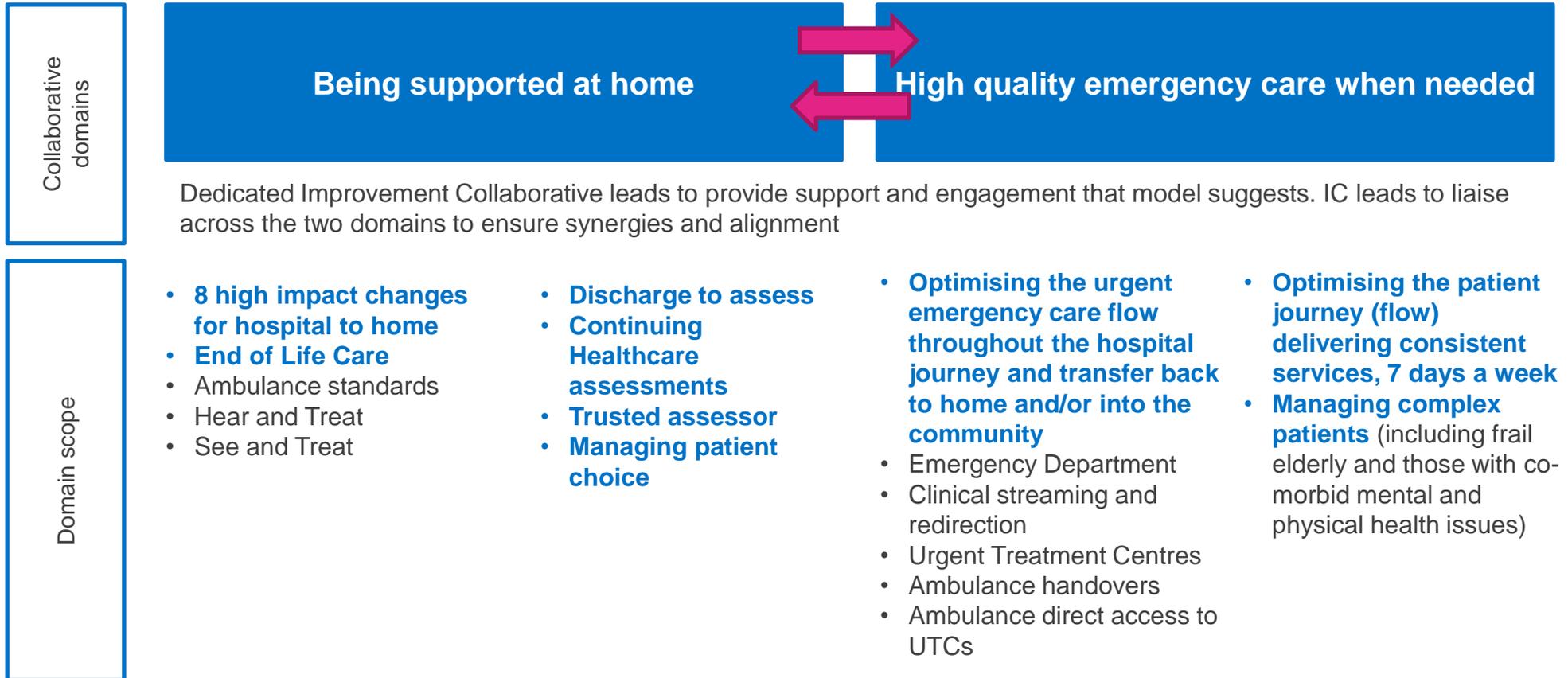
Expectations on the system

Deliverable	Final deadline
95% A&E 4 hr standard	Mar '18
100% of patients arriving to ED by ambulance handed over within 15 minutes of the ambulance's arrival	Mar '18
All co-located GP streaming meeting national guidance in place	Oct '17
100% ambulatory emergency care at least 14-hours a day, 7 days a week	Sept '17
100% of hospitals have a clear frailty pathway in place which includes an early comprehensive geriatric assessment	Sept '17
100% of wards where SAFER bundle is in place	Sept '17
Implementation of the Emergency Care Data Set (ECDS)	Oct '17
25% of acute hospitals that meet the 'core 24' liaison mental health service standard for adults	Mar '18
Delayed transfers of care under 126.4 days	Sept '17
85% of CHC full assessments outside acute setting	Mar '18
8 HICs implemented to 'established' level	Mar '18
100% of CCGs have 7/7 visiting specialist palliative care services in <i>both</i> acute and community settings	Mar '20
Fewer than 49.5% of deaths take place in a hospital setting by March 2020	Mar '20

Scope of the London Improvement Collaborative

Overarching UEC Improvement Collaborative

Focuses on the rigour and fidelity to improvement methodologies, as well as a safe space for discussing challenges and barriers to impact.



Areas bolded are the predominant focus of the collaborative with other areas touched on as part of whole system consideration

Six phases over 18 months

	Jun '17 – Nov '17	Sep '17 – Dec '17	Dec '17 – Mar '18	Mar '18 – Jun '18	July '18 – Sept '18	Oct 18 – Dec 18
	Mobilisation	Early Impact & Diagnostic	System action period 2	System action period 3	System action period 4	System action period 5
Outcome	The programme is ready to go	<ul style="list-style-type: none"> Existing priorities / drivers addressed once for London Local support provided to priority systems Impactful priorities and actions agreed and taken forward 	<p>Improvement in impactful areas</p> <p>Early evidence of sustainability 'must haves'</p>	<p>Increased improvement in impactful areas – scale and spread</p> <p>Growing evidence of sustainability 'must haves'</p>	<p>Increased improvement in impactful areas – scale and spread</p> <p>Strong evidence of sustainability 'must haves'</p>	<p>Increased improvement in impactful areas – scale and spread</p> <p>Strong evidence of sustainability 'must haves'</p>
National requirements	<ul style="list-style-type: none"> Team in place in HLP Local leaders identified Data resource identified Governance established Once for London work in areas of focus already identified (eg the 8 HIC, MH DTOC, EHCH national targets etc) Build baselines Coms and branding work developed Site visits 	<ul style="list-style-type: none"> Robust data for system flow (across the <i>whole</i> system) Locally defined and agreed priorities & actions Support needs and requests clarified Support resources in place Quick wins particularly in areas of focus STP resources in place (including funding) Once for London events Site visits 	<ul style="list-style-type: none"> Progress on locally agreed actions High quality relevant support (QI, data etc) Step change in availability and use of data STP resources fully engaged Once for London activity Site visits 	<ul style="list-style-type: none"> Further progress on locally agreed actions High quality relevant support (QI, data etc) Step change in availability and use of data STP resources fully engaged Once for London activity Site visits 	<ul style="list-style-type: none"> Further progress on locally agreed actions High quality relevant support (QI, data etc) Step change in availability and use of data STP resources fully engaged Once for London activity Site visits 	<ul style="list-style-type: none"> Further progress on locally agreed actions High quality relevant support (QI, data etc) Step change in availability and use of data STP resources fully engaged Once for London activity Site visits

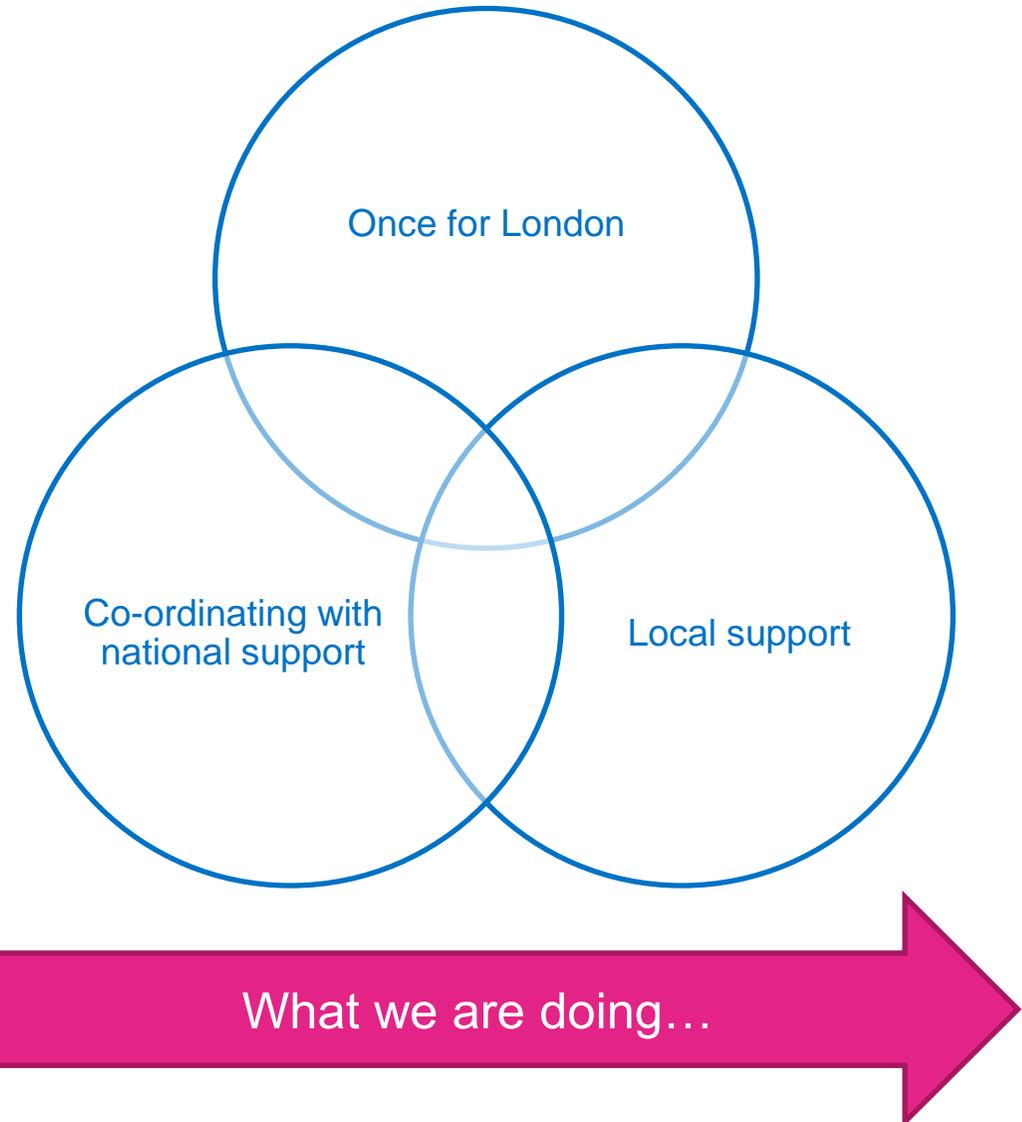
Streams of activity

Once for London: Improvement Collaborative methodology for programmes of work focused on specific areas e.g. improving hospital flow, 8 High Impact Changes for Hospital to Home, and Mental Health DTOCs.

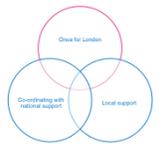
Providing a curriculum that develops and strengthens quality improvement capacity, capability and knowledge, equipping systems with relevant tools and redesign techniques – e.g. PDSA, driver diagrams. Developing discipline and rigour around using data for diagnosis, action planning and measuring improvement e.g. flow baseline, data clinics; day of care surveys.

Local leadership and support: support for local systems based on triangulation of **data** (4 hr wait, UEC trackers, DTOC, LOS), **plans** (Winter Plans, CHC, BCF) and **system intelligence**. Supporting deep understanding of local challenges and opportunities through use of data for improvement. Facilitating local leaders across the system collaborating for change, brokering in support based on specific needs informed by data.

Co-ordinating with national resources: ensuring that the IC offer complements national offers avoiding duplication. This will include, ECIP, national Hospital to Home offers, BCF offers via the LGA and New Care Models Enhanced Health in Care Homes support.



Free flu jabs for care homes!



Care home staff get free flu jabs

Healthy London Partnership **NHS**



Every winter care home residents get seriously ill or die of flu



Help prevent the spread of flu this year



If you work in a care home you can get a free flu jab



Take your staff badge to the local pharmacy

Flu Campaign



- London commitment to provide all care home staff with access to Flu Vaccine
- Now national policy, set out in letter 12 October from PHE, NHS E, and DH
- CC2H have a project manager working with PHE London region to roll out pop up influenza clinics across the top 300 care homes who use London Ambulance Service
- Care Quality Commission supportive of this programme and currently in discussion with PHE & CQC to certify care homes as 'Flu Safe' when 85 % of all residents and staff are vaccinated
- The influenza vaccination poster outlining updated eligibility has been shared to a wide audience by skills for health and skills for care and the Care Quality Commission.
- Check out <http://www.sonarhealth.org/london-vacc/> for real time influenza vaccination uptake

Early impact work in place



Workstream	Aim / objective	Deliverables	Activity during mobilisation	Next activity
Acute Discharge	<p>Improve patient flow from hospital to home;</p> <p>Support delivery of DTOC metrics across London Acute sites</p>	<p>Contribution to national DTOC targets</p> <p>Support to meet 8 HIC implementation requirements</p>	<p>Work with existing networks (eg the BCF Leads network) to embrace the IC methodology around the 8 High Impact Changes</p> <p>Develop close links with ADASS particularly around DTOC</p> <p>Working with AHPs and other key staff to facilitate change</p>	<p>22 Nov BCF leads meeting</p> <p>23 Nov BCF targeted data session <i>may merge these</i></p> <p>20 Nov 2nd AHP event</p>
MH DTOC	<p>Improve patient flow from mental health hospitals to home;</p> <p>Support delivery of DTOC metrics across London MH sites</p>	<p>Contribution to national DTOC targets</p> <p>Support to deliver Mental Health Compact</p>	<p>Draft 'top tips' with the system in the model of the 8 High Impact Changes</p> <p>Build stronger understanding of data</p> <p>Develop network across the capital</p>	<p>20 Oct MH DTOC system event with actions</p> <p>Jan event reviewing actions</p> <p>MH DTOC bespoke support in place in Nov to support actions</p>
Enhanced health in care homes (EHCH)	<p>Support the London system with implementing the National Enhanced Health in Care Homes framework.</p>	<p>Reduction in admissions from care homes</p> <p>Reduction in delayed transfers of care due to care awaiting placement a care home or nursing home</p>	<p>Build on existing network to develop specific actions around Care Homes</p> <p>Leverage national Baseline to identify key areas of work</p>	<p>Flu campaign now – delivered by Dec</p> <p>Implementation of Significant 7 begins this winter</p> <p>Network meetings monthly (next one is 14 Nov)</p>
Continuing Healthcare Assessments	<p>Improve patient experience of the CHC assessment process and access to appropriate care and</p> <p>Support delivery of CHC metrics across London</p>	<p>Delivery of CHC targets</p> <p>Implementation of Trusted Assessor models</p>	<p>Begin to bring improvement collaborative methodology to existing work</p>	<p>On going support to systems</p> <p>Next network meeting</p>
Data and diagnosis	<p>To develop the data and data capabilities to deliver improvement</p>	<p>Strong data capabilities and increased use</p>	<p>Day of Care survey</p> <p>Data sessions</p>	<p>DoC survey taking place now</p> <p>DoC survey workshops Nov</p> <p>Data sessions 23 Nov and on-going</p>

Scoping local support



Universal support to all systems

- Support through System Action Periods
- Support focuses on practical delivery *and* capability and capacity building in local areas to transition from central IC support to local leadership and change

Additional support

- Additional support brokered in based on evidence of emerging challenges from:
 - data feeds (eg monthly DTOC data, Flu Data, A&E performance)
 - system intelligence (eg input from BCF colleagues, from DTs etc)
 - direct approach from systems

Types of support

Data and analytics

- Bespoke analysis to pinpoint drivers of outlier performance
- Bespoke analysis to suggest areas for improvement
- Tailored face to face conversation around how to use this data – and take it forward
- Bespoke analysis of impact of existing interventions – and gaps
- Day of care audit

Leadership development

- Bespoke support to system leaders
- Facilitated away days and leadership change sessions
- Broker and introduction to experts in this area

QI support

- Facilitate workshops or meetings
- Support development and implementation of PDSA / Improvement process
- Scope and support delivery of '100 day challenge' process
- Scope and support implementation of agile processes
- Introduce improvement methods (including service design methods) into existing projects
- Bespoke support on D2A & MH DTOC

Best practice

- Share best practice
- Broker introductions
- Facilitate visits
- *Top 10 questions to ask* tool [tbd]



Improvements and drive and sustained by local buy-in, ownership and commitment

Key attributes :

- Permission ambition and pace set by local senior leads at both **clinical** and **managerial** level
- Dedicated QI and data analytics support
- Permission common across local providers
- Local leaders are a small group of people around a relatively contained system
- Local leaders own and catalyse the change in their area
- Local leads have the right resources to deliver
- Funds or resources to catalyse improvement
- A clear and reasonable lever to ensure engagement

In London local leaders will:

- Work with their local colleagues to identify priorities and actions for system action periods – and then take these forward. This will be done with active support from the regional Collaborative team.
- Enthuse the right people in their system to engage in Once for London events including quarterly collaborative events.
- Lead improvement action planning and implementation including the mobilisation of support from wider teams within organisation and cross-system.
- Broker in support resources from central Collaborative team to deliver actions and benefits.
- Engage with the regional Improvement Managers to facilitate the sharing of what works and lessons learnt.
- Act as the link between the Collaborative and the local system

How to get involved

1

Become a local leader in your patch

Engage with the AEDB and others to drive and sustain change

2

Engage in once for London work already underway

3

Join data sessions with your local systems

4

Engage directly with the Collaborative team

5

Actively promote Flu and Star line work