Oxfordshire Integrated Improvement Programme

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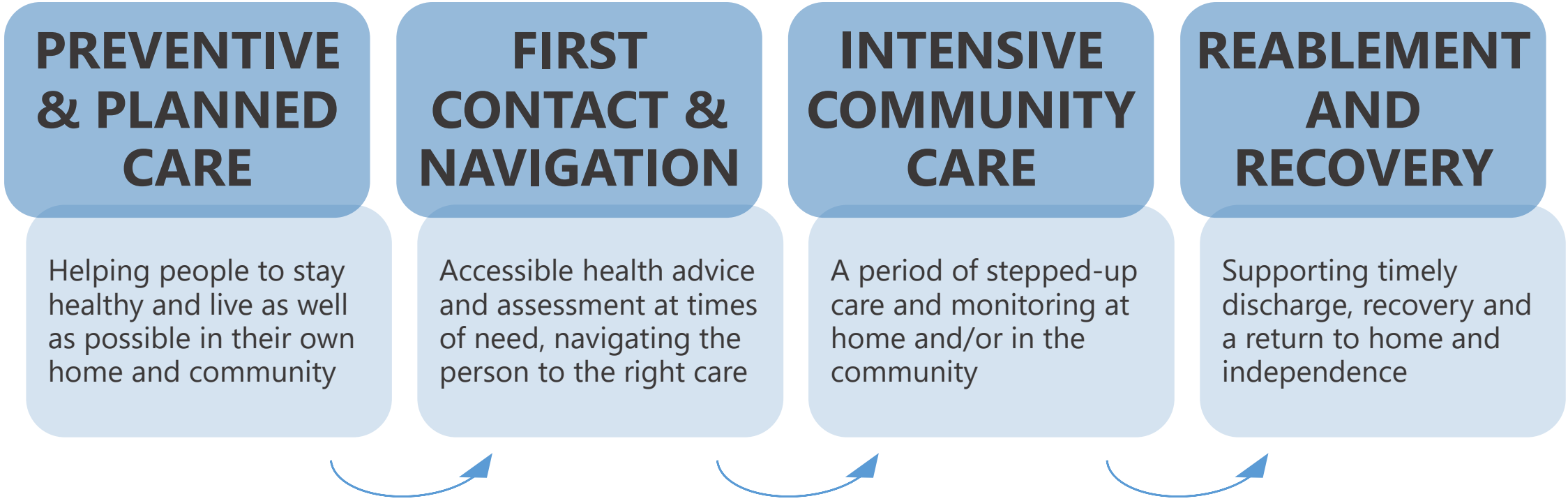
Introductions

Agenda

- What is the scope of our work?
- What is the Integrated Improvement Programme?
- Question and Answer Session

Scope

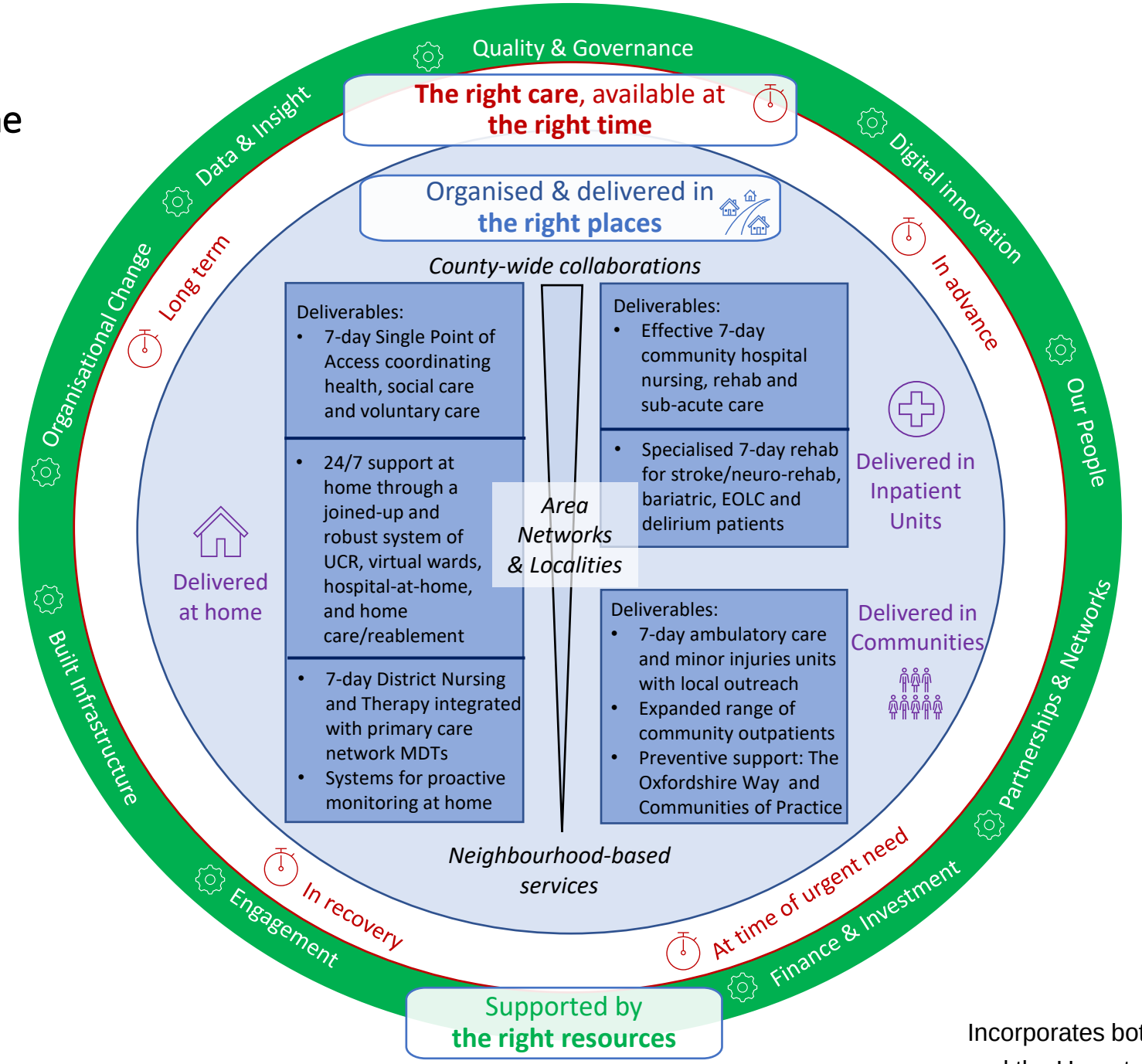
- Community Services Strategy
- Urgent and Emergency Care priorities
- HWB Age Well (prevent, reduce, delay) priorities
- Health, social care, voluntary and community sectors



An interconnected system of care

To provide reliable, high quality experiences of care, the services must function effectively together, in a reliable and joined-up way

Oxfordshire Integrated Improvement Programme



Incorporates both the Community Services strategy and the Urgent and Emergency Care priorities

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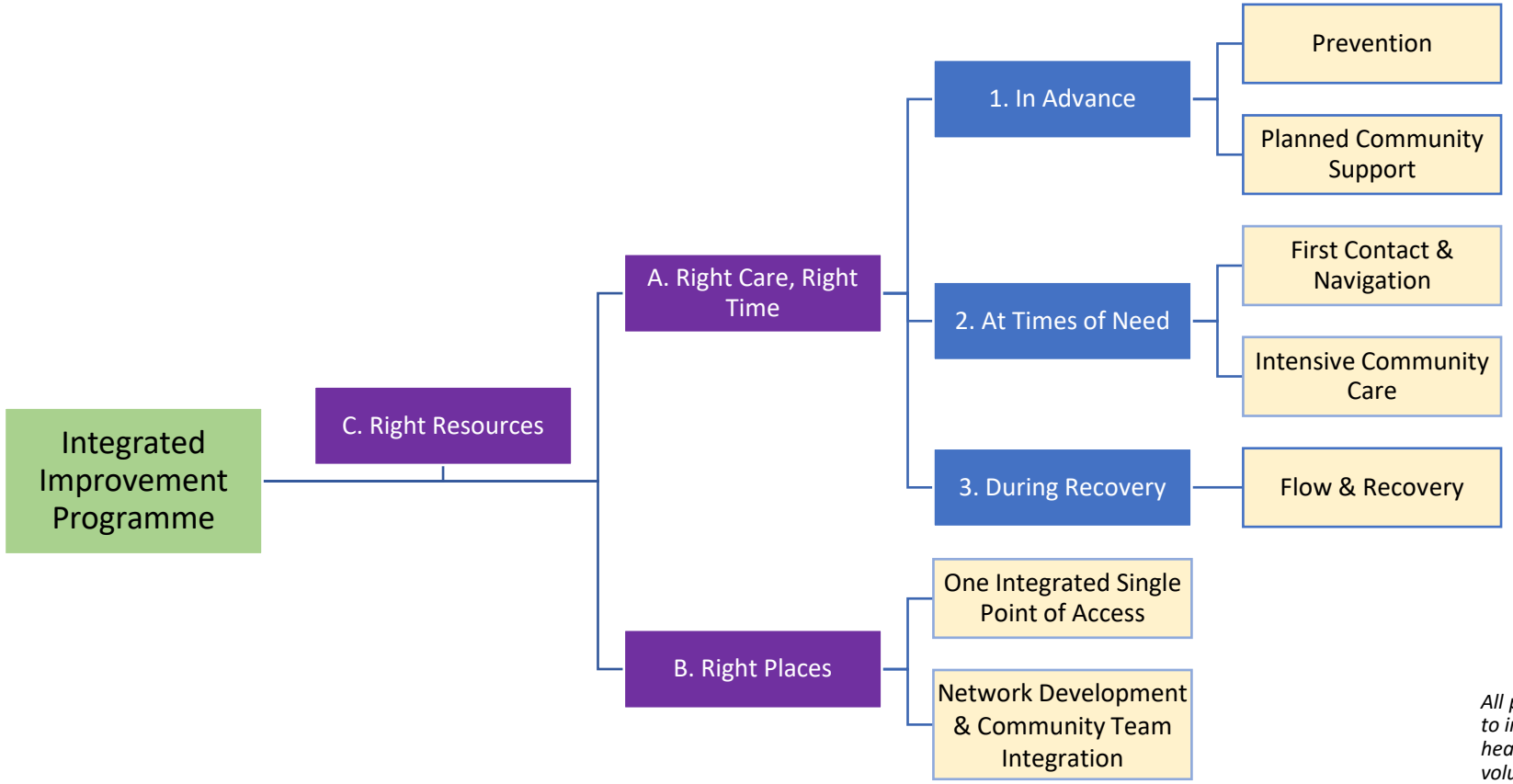

All projects and teams will be designed to incorporate the full spectrum of health, social, community and voluntary sector inputs and outputs

Priority Projects – Right Care, Right Time – In Advance

A. Prevention	A targeted population health programme to enable people and families to stay healthy and live as well as possible in their own homes. We will achieve this by strengthening preventative services and activities to ensure we are providing earlier support to people, carers and families closer to where they live, through stronger community networks	A1. Extending the LiveWell online resources	To develop, promote and maintain a centralised, easily accessible online resource to support self-help and signposting to relevant community services across Oxfordshire.
		A2. Activating our communities to improve health (including the Oxfordshire Way)	To promote wellbeing and independence for the people of Oxfordshire by improving co-production, establishing local communities of practice and healthy, active communities. Will enable identification, assessment and delivery of support and other interventions for higher risk people and families
		A3. Integrated population health and vaccination service	To integrate multiple existing community child/adult vaccination and health promotion services into a single, integrated vaccination and population health service that will deliver at-scale programmes for population immunisation, reduction of health inequalities and improving the health of cohorts with outlying clinical outcomes
B. Planned Community Care & Support	A programme to support patients, carers and families to live more independently at home for longer. We will do this by delivering planned care and support to individuals in a more integrated and personalised way, mobilising the full range of formal and community networks to prevent health crises and reduce demand on formal healthcare services	B1. Extending Enhanced Healthcare in Care Homes	To build on existing care home support to deliver a comprehensive care and support package for care home residents, including 24/7 urgent and emergency care, intensive community care, preventive, planned and End of Life care.
		B2. Delivering sustainable 7-day planned community care	To design and implement the new process and costed plans for commissioning and delivery of sustainable planned community care, including the wraparound enablers for effective 7-day working and resilient staffing
		B3. Expanding community outpatients	To develop and pilot and expanded range of outpatient service provision at community sites, to benefit local residents and improve health and wellbeing outcomes

Priority Projects – Right Care, Right Time – At Times of Need

C. First Contact & Navigation	To deliver more streamlined access to health advice, assessment and services when they are needed, 24 / 7	C1. A 24/7 integrated first contact and navigation pathway for Oxfordshire	To deliver a 24-hour, 7-day first contact care and navigation pathway for the Oxfordshire population (all ages) that is able to provide effective triage, assessment and initial treatment/support and consistently. This will safely navigate people with further needs to the right care, at the right time, in the right places.
D. Intensive Community Care	To manage acute deterioration by providing a period of stepped-up care and monitoring at home and / or in the community, providing treatments that would traditionally take place in hospital where it is in the patient's best interest to do so.	D1. Implementing a 24/7 integrated intensive community care and support pathway for Oxfordshire (including Acute Virtual and Virtual Care Wards)	To deliver an integrated system of inter-connected services that provide the care that enables a person experiencing an urgent health or care need to remain at home (with a more intensive level of support for a period of time), when they are at risk of being admitted to a hospital bed unnecessarily.
		D2. Implementing an integrated, multi-provider End of Life Care pathway that dovetails with First contact, ICC and planned care pathways	To deliver an integrated approach to the planning, provision and management of EOLC in Oxfordshire

Priority Projects – Right Care, Right Time – In Recovery

E. Flow & Recovery	To build on existing system work to deliver a more effective patient discharge pathway that reduces unnecessary hospital stays, promotes recovery at home and increases the long-term independence and wellbeing of Oxfordshire residents.	E1. Developing a new Discharge to Assess (D2A) pathway, bed base and MDT	To redevelop the Hub beds into a D2A service with a larger MDT inputting into them to keep LOS at a minimum, leading to reduced time in secondary care and supporting the person to be assessed in a more appropriate setting, dovetailing with the CH rehab pathways
		E2. Optimising Community Hospital In-patient rehabilitation and nursing care	To develop costed plans and options for Community Hospital inpatient pathways that address changing population needs, best practice, workforce and financial sustainability challenges and sets out a development plan for Oxfordshire's Community Hospitals* *including the future of Wantage CH inpatient unit
		E3. Developing a system-wide Transfer of Care Hub	To create a single integrated Transfer of Care Hub/Team across the partner organisations / different inpatient settings to streamline flow, discharges and provide a joined-up view on the best use of available beds and resources
		E4. Implementing a Reablement Task Force	To reduce the duration of the reablement journey (in both P1 and P2), by creating a task force to increase capacity in the pathways and focus on reducing time in and dependency on reablement services.

Priority Projects – Right Places

F. One Integrated Single Point of Access (iSPA)	To develop a unified, integrated Single Point of Access for Oxfordshire, providing residents and professions with 7-day access to and coordination of the full range of health, social and voluntary sector services, whenever they need them, and serving as a virtual and physical hub for an integrated, multi-disciplinary workforce	F1. Development of a phased and costed programme plan for the development of a unified, integrated Single Point of Access for Oxfordshire	To work with partners to identify the access priorities for each organisation and residents - and the opportunities to consolidate resources and deliver services more effectively through a new SPA, to develop a PID/delivery plan .
G. Network Development and Community Team Integration	To establish the networks, structures and resources required for partner organisations, residents and other stakeholders to engage, plan and work together successfully at appropriate levels of scale and deliver their objectives to improve the health and wellbeing of the population	G1. Area Network Development (North / Central / South)	To develop Network Areas as an organised grouping of local health and care services, voluntary and community groups, Primary Care Networks, Community Hubs, secondary care and Local Authority teams, who work closely together to improve the health and wellbeing of their population.
		G2. Developing the integrated Neighbourhood Team	To develop the local multi-professional and multi-agency community team with responsibility for planning and delivering the care of older, frail or LTC patients within a defined population or geography (e.g. the residents of one or more PCNs).

Priority Projects – Right Resources

H. Cultural and Organisational Change	To deliver a comprehensive organisational change programme across organisations and teams to facilitate and embed place level transformation	H1. System Level Change Management	To provide joined-up, practical support tailored to teams across all levels of organisations to break down barriers and transition to new, shared ways of working
		H2. Extended Programme Teams	To change ways of working to integrate wider support teams into the programme to deliver specialist practical support and prioritisation and ensure the enablers to delivery are proactively planned for and in place

Thank you and Q&A