Oxford Health NHS
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OXFORDSHIRE COUNTY COUNCIL

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Rebalancing the Health and Social Care System

Paul Brennan

Director of Clinical Services

Representing 4 System COO's

Growth in Delayed Patients

Quarter	Average Delays YTD at Quarter End	Cumulative Percentage Increase
2014/15 Q1	125	
2014/15 Q2	132	5.6%
2014/15 Q3	136	8.8%
2014/15 Q4	144	15.2%
2015/16 Q1	156	24.8%
2015/16 Q2	159	27.2%
2015/16 Q3 to date	167	33.6%

Nursing Home Beds Status

- Target is 150
- Currently 126 contracted in 17 Nursing Homes
- In discussion with a further 11 Nursing Homes
- Aim is to have medical support provided under contract with GP's but OUH will provide where necessary
- Beds booked for 8 weeks from first use
- 75 beds will continue to be contracted from the 8th February to the 31st March 2016

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Patients Transfer Programme

- 29 patients were transferred by Wednesday 9th December
- Mixture of OUH Acute and Community Hospital
- 21 patients being assessed today
- Main transfer to commence 14th December and complete by 18th December.
- Liaison Hub established 7th December

Liaison Hub – purpose and function

- The Liaison Hub was established on the 7th December
- The hub will act as liaison point supporting patients and ensuring good multidisciplinary team planning and care. It will:
  - Administer arrangements with Nursing Homes and GPs and OUH clinicians
  - Manage the logistics of communication with patients and families and escalate any concerns and issues
  - Maintain a tracking system on all patients who have moved and their onward destination.
  - Make a daily check with the Nursing Home to proactively support patient management

Liaison Hub staff and role

- The liaison hub is staffed by a MDT of qualified nurses and therapists with expertise in discharge planning, discharge planners, administrators and staff from Adult Social Care (in-reaching)
- Each nursing home will have an assigned MDT attached to it, with a names nurse who will make daily contact.
- A communication log is being kept in the hub to ensure responses are systematic and timely.
- There is a dedicated phone line and email address and a separate phone line for GPs to have direct contact with the duty senior interface physician.

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Ward Release Programme

- PAU at the JR vacated Friday 4th December
- E Ward at the Horton on programme to be vacated today (11th December)
- 5A due to be vacated on Friday 18th December and function as EAU extension from Wednesday 23rd December
- C Ward NOC due to be part vacated on Monday 21st December
- Ward 5C/D due to be vacated on Monday 28th December

Staffing

- Social Care covered
- Six additional therapist employed by OH
- OUH Transfers to the Liaison Hub
    - 6.8 Nursing
    - 5.0 Therapists
    - 3.8 Discharge Support
- OUH transfer to rotate to H@H/SHDS/ORS
    - Confirmed 7.8
    - Further potential 11.0

Key Indicators

- Against a projected range, the end destination for patients
- Workforce – staff additions / transfers to support the programme
- Number of beds contracted and number of homes involved.
- Total patients moved in the two phases
- January to March 2016 - Bed days associated with delays compared to Q4 previous year
- Weekly DTOC number starting from 17 December
- Number of patients who stay in an IC bed beyond the 8 week period.

Potential Outcomes

- System performance across 2013/14 combined with outcomes for cohort of patients working back 12 weeks to September 2015

Outcome	Overall Range	Numbers for 150	Actual
Care Home	32% to 38%	48 to 57	
Long Term Home Care	27% to 33%	40 to 49	
Return to Hospital	7%	10	
RIP	13% to 20%	19 to 30	
No Ongoing Need	16% to 20%	24 to 30	