NHS Southern Health NHS Foundation Trust

Rapid Process Improvement Intermediate Care (IC)

QI Conference

26/06/2019

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In the beginning ……

Hampshire County Council and Enhanced Recovery and Support at Home

What is the problem we are trying to solve?

- **Differences in the approach to the; triage, assessment and review of people who require support to leave an acute care setting**

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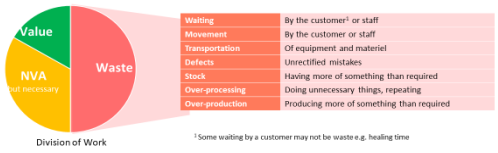
Value and Waste



Waiting	By the customer[1] or staff
Movement	By the customer or staff
Transportation	Of equipment and materiel
Defects	Unrectified mistakes
Stock	Having more of something than required
Over-processing	Doing unnecessary things, repeating
Over-production	Producing more of something than required

[1] Some waiting by a customer may not be waste e.g. healing time

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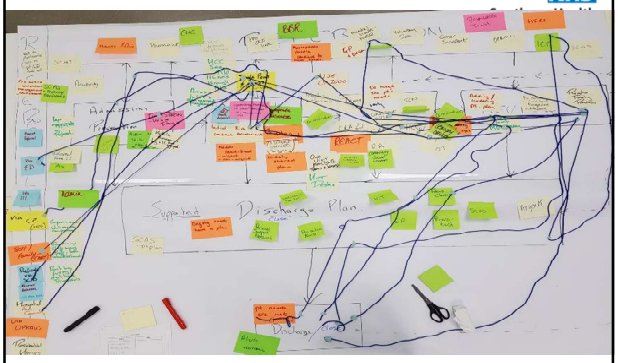

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Schedule 4: Service Specification - Single Point of Access and Triage

7 December 2018

1. Introduction

1.1. The Integrated Intermediate Care (IIC) Single Point of Access and Triage (SPoAT) function is a single multi-disciplinary point of referral that facilitates effective case management. This is taken to mean a range of integrated health and care services designed to promote faster recovery from illness, prevent unnecessary acute hospital admission and premature admission to long-term residential care, support timely discharge from hospital and maximise independent living.

1.2. The process outlined in this specification document, is one component of the overall Integrated Intermediate Care pathway, designed to support the operational delivery of the Integrated Intermediate Care bed and home based services; that provide a continuum of care through assessment, treatment, rehabilitation reablement and/or recovery.

1.3. The Single Point of Access and Triage (SpoAT) function receives referrals and determines the most appropriate service required to meet the identified and agreed need of service users / patients based on the information provided. The service will be available seven days per week and will deliver service within 6 hours of receipt of the referral but no later than within 24 hours. The maximum response time to accepting a referral is 2 hours.

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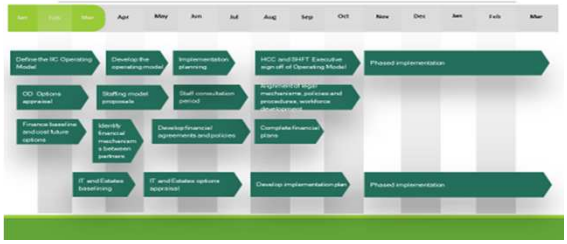
IIC Timelines



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No.	Key Project Tasks – from 01/05/2019	Who?	Target Date (latest date)	RAG
	Actions – 6 weeks by 07/06/2019			
1.01	Ensure all health referrals via ERS@H nhs.net service are routinely uploaded to Hampshire County Council AIS system	Nicola Coppen	01/05/2019	
1.02	Arrange for IIC Team Meetings • 1st and 3rd Friday of every calendar month	Mike Richardson	10/05/2019	
1.03	Mid-Hants IIC - Project Group • Meeting to be arranged twice a month on 1st and 3rd Friday of every calendar month • All meetings to be SKYPE enabled • Agenda agreed	Nicola Coppen/ Jenny Nops/ Mid Hants IIC Group	17/05/2019	
1.04	Mid Hants LAP - complete 1st draft operational model to support IIC delivery that includes coordinating a x2 hr response to referrers and triages patients for same day/routine response – as required	Jenny Nops/ Nicola Coppen	30/06/2019	
	Actions – Within 14 weeks by 21 Aug 2019			

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Success :

- Closer working relationships with HCC
- We are recognised as one system for Hospital Discharge by HHFT – The HUB and all referrals are directed through it
- More efficient use of resources (no accurate data available)
- Well Being Assessment is used by HHFT/ SHFT/ HCC
- SHFT are present in the HUB for triage
- SHFT in reach refers to the Hub and provides a valuable link from HHFT
- Competency frameworks are shared – closer understanding
- Wider work includes the North iFIT, OT and Primary Care Network forerunner projects

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Ongoing :

- IT and Estates issues
- Medicines management support
- First contact visits
- Changing landscape : Commissioned service specification
- None / limited admission avoidance

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Reflections :

- QI process has many strengths when approaching internal processes with ownership
- Changing responsibilities and personnel
- This QI programme has been overtaken by the emerging Hampshire Together Programme for Intermediate Care (IC)
- As a forerunner project for the IC it will be evaluated and the SHFT element is likely to be adapted to support front door admission avoidance to be more in line with the North Model

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