

Wiltshire Health and Care "Delivery Plan on a Poster" – 1 Year, 2019-2020

WHC themes	NHS Long Term Plan themes	Cross-cutting themes	Delivery Plan Objectives	Improvements delivered using baseline resources. Proposed service developments, subject to commissioner support and funding.							
A service delivered in partnership Higher intensity care Community-based urgent care (Responsive expert community services)	[1] A new service model for the 21 st Century	Public and Patient Engagement (how we will engage to deliver the plan) A Quality Focus (this will inform our Quality Accounts)	Implementing a new model of care	Objectives				Q 1	Q 2	Q 3	Q 4
				1. Start well, live well, stay well, age well	• Increase the number of staff attending Making Every Contact Counts training.		→	→	→	→	
					• Continue to use our systems and contacts to prompt preventative discussion and lifestyle advice .		→	→	→	→	
					• Continue to maintain good access to treatment with over 92% of people treated within 18 weeks .		→	→	→	→	
					• Define an optimal service model and pathway for First Contact Physiotherapy with primary care colleagues.		→	→	→	→	
				2. Live well with one or more long term conditions	• Increase the number of areas where First Contact Physiotherapy is delivered.		→	→	→	→	
					• Expand the provision of structured education and digital self-management support tools.		→	→	→	→	
					• We will contribute to the development of the ' whole life ' pathway to ensure the needs of patients with Learning Disabilities are recognised and addressed within the developing model of health and social care provision		→	→	→	→	
					• Develop a single unified pathway for diabetes		→	→	→	→	
					• Develop a common model for the provision of specialist advice and support for people with long term conditions		→	→	→	→	
• Reduce wheelchair waiting times so the 18 week RTT target is always achieved		→	→		→	→					
• Reduce waiting times for patients waiting for wheelchair repair .		→	→		→	→					
• We will develop personalised wheelchair budget systems		→	→		→	→					
• We will introduce a stock management system for wheelchairs .		→	→		→	→					
• Develop a proposal for a Wiltshire-wide model for community heart failure , in partnership with the 3 cardiology depts.		→	→		→	→					
3. Support for complex comorbidities /frailty	• Case for change created which defines the benefits of expanding the WHC Oxygen service to south Wilts.		→	→	→	→					
	• Provide commissioners with a costed options appraisal to expand pulmonary rehabilitation .		→	→	→	→					
	• Put in place arrangements to support the use of Diasend for Wiltshire community patients.		→	→	→	→					
	• Work with the CCG to develop a proposal for pain management services across Wiltshire		→	→	→	→					
	• Define the pathway for the management of frail patients outside of hospital, and present the funding requirements to commissioners.		→	→	→	→					
	4. Accessible effective support in crisis	• Robust improvement plan in place to deliver improved resilience in our Minor Injury Units .		→	→	→	→				
		• Trialled physiotherapists in MIUs , evaluated impact of this by the end of Q4.		→	→	→	→				
		• Work with commissioners to clarify the specification for Urgent Treatment Centres in Wiltshire.		→	→	→	→				
		PRIORITY • Work as part of the Wiltshire Delivery Group to develop a proposal for an increase and streaming of rapid response services .		→	→	→	→				
	5. High quality person-centred specialist and acute care	• As part of the design of rapid response services, we would look to deliver the full falls pathway across Wiltshire.		→	→	→	→				
• Proposal for the delivery of IV therapy in the patient's home for south Wiltshire.			→	→	→	→					
6. Good hand over and discharge planning and post support		• Red and Green - By the end of Q2, we will have embedded red and green methodology fully on all inpatient wards.		→	→	→	→				
		• Align the Acute Trust Liaison service to the Wiltshire Patient Flow Hub.		→	→	→	→				
7. Effective rehabilitation and reablement		• We will reduce the number of bed days occupied by patients with an acute length of stay of 21 days or more waiting for discharge to Pathway 1 and Pathway 2.		→	→	→	→				
		• By Q3, we will reduce length of stay in community hospital beds to be in line with national benchmarks for 19/20 to release capacity for winter.		→	→	→	→				
		• Develop the Wiltshire Patient Flow Hub further to increase coordination of Home First+ discharges .		→	→	→	→				
		• Align the Wiltshire Patient Flow Hub with Wiltshire Council patient flow processes .		→	→	→	→				
8. Person centred, dignified, long term care		• Complete the roll out of the Home First + pathway with Wiltshire Council in all localities.		→	→	→	→				
		• Stroke rehabilitation reviewed, and proposal to increase rehabilitation at home.		→	→	→	→				
	• By the start of Q1, we will define the preferred model for clinical input into ICT beds .		→	→	→	→					
	• Propose new approach for fracture clinics .		→	→	→	→					
	9. Support, control, and choice at the End of Life	• By Q3, we will develop a proposal for increased support to care homes to prevent escalation.		→	→	→	→				
		• Processes formalised to provide care support to patients who have a diagnosis of a terminal illness but who are not yet entering the final phase of life.		→	→	→	→				
	10. Integrated services to provide person-centred care	PRIORITY • Review and reorganise management of caseloads in community teams and working with GP practices.		→	→	→	→				
	Broadening skills	[4] NHS Staff will get the backing they need	Developing our People	Objectives				Q 1	Q 2	Q 3	Q 4
				• We will undertake an agency diagnostic , using an NHSI tool, to support on-going development.		→	→	→	→		
• By Q2 we will review and renew appropriate agency staff framework agreements .					→	→	→	→			
• By Q2 we will improve our board reporting so that it includes additional information (including agency spends).					→	→	→	→			
• By Q4 we will implement E-roster across all services at team level.					→	→	→	→			
• By the end of Q4, we will have increased the number of people recruited to our bank by 25% .					→	→	→	→			
• By the end of Q4 we will increase our voluntary workforce by 10-15% .					→	→	→	→			
• Commence recruitment of physiotherapy rotational posts in three areas.					→	→	→	→			
• Develop and deliver training from a new education and training hub at Savernake Hospital.					→	→	→	→			
• Develop and deliver an Acuity and Dependency tool across all community wards - aligned to e-rostering.					→	→	→	→			
Developing our People	• By Q2, we will develop and deliver Clinical Leadership pathways .		→	→	→	→					
	• From Q1 we will implement a new value based appraisal process .		→	→	→	→					
	• By Q2, we will review the current Advanced Nurse Practitioner/ Advanced Care Practitioner role and competency framework in community in-patient settings, and set out a revised proposal to maximise the potential of the role and the community hospital delivery model.		→	→	→	→					
	• By Q2, we will recruit and embed medical doctors to support clinical leadership and delivery of the clinical governance agenda .		→	→	→	→					
	• By Q2, we will review, and implement the Health and Wellbeing charter , through health and wellbeing forums . We will evaluate its impact through staff survey results.		→	→	→	→					

				<ul style="list-style-type: none"> Implement a performance review system with Health and Wellbeing an integral part of the process. From Q4, we will align our SAFER staffing project to our health and wellbeing charter. Up-skill key staff within the Human Resources and Learning & Development team to support and deliver organisational development. Scope the development and delivery of non-medical consultant roles in community settings, and produce a paper for consideration by our commissioners by the end of Q1. 	🚩	✓					
Leading the way	[5] Digitally-enabled care will go mainstream across the NHS	Supporting our services and patients with good IT	Objectives		🚩	✓					
			Strengthening foundations	<ul style="list-style-type: none"> By the end of Q1, we will have completed the migration of all N3 links on to more cost-effective and fit for purpose infrastructure (HSCN). We will have established and begun a rolling replacement programme for our desktop estate. By the end of Q4, all Wiltshire Health and Care computers will have migrated to Windows 10. An Asset management system for Wiltshire Health and Care's digital ICT will be in place by the end of Q3. 	🚩	✓					
			Supporting our teams to work efficiently	<ul style="list-style-type: none"> We will have an agreed 'to be' network design and migration plan, and work will have begun to deliver it. We will have gone live with a dedicated Wiltshire Health and Care intranet. We will be in a position to run a competitive tender for a new telephone system provider. We will have established a project to procure and implement the new telephone system. By the end of Q4, Wiltshire Health and Care will be "fax free". 	🚩	✓					
			Supporting digitally enabled health care	<ul style="list-style-type: none"> Ongoing participation and engagement in the BSW STP interoperability programme We will generate a specification outlining Wiltshire Health and Care's future business intelligence requirements If the commissioners confirm that they are supportive of a move to SystmOne for our wards by the end of Q1, we will initiate the project to implement this by the beginning of Q3. Support care homes delivering intermediate care to use SystmOne as clinical system (ensuring our system is shared appropriately) We will develop a project to provide a text-based advice and guidance service for patients (e.g. Diabetes patients) to help support appropriate condition management. We will explore increased use of wearable technology and remote monitoring with partners. 	🚩	✓					
			More for your money	[6] Tax payers investment will be used to maximum effect	Supporting our patients and staff with physical infrastructure that better meets need	Objectives		🚩	✓		
Improve quality and efficiency of existing accommodation	<ul style="list-style-type: none"> Specialist community services (including lymphedema) co-located on the Chippenham Community Hospital site. The first phase of backlog maintenance and service consolidation works. The first phase backlog maintenance will have been completed and space planned to support efficient effective patient care in Warminster Community Hospital. Scoped options for the provision of compliant, safe, ward accommodation in the Warminster Hospital building will be available. We will facilitate a long-term sustainable solution for the provision of soft FM services across Wiltshire community sites. 	🚩				✓					
Transformed estate to support new models of care	<ul style="list-style-type: none"> New lease negotiation for the community team within Ludgershall Health Centre. New lease negotiation for additional space for the community team in the new Wiltshire Council Community Hub in Tisbury. Sufficient space available to deliver community physiotherapy activity in the south of Wiltshire, including Hydrotherapy, and the associated leases negotiated. Sufficient space available to deliver community diabetes and dietetic care in the south of Wiltshire, associated leases negotiated. We will work with Wiltshire CCG and their consultants to work up the detail for the business cases to deliver the new integrated care centres in Devizes and Trowbridge. 	🚩				✓					
Financial sustainability and productivity	<ul style="list-style-type: none"> 2.5% of our resources will be released from planned expenditure for reinvestment to support services. 	🚩									
Environmental sustainability	<ul style="list-style-type: none"> We will establish a sustainability group within our governance structure. We will produce a Sustainable Development Action Plan for 19/20 for agreement by the Board. We will develop a sustainable Travel Plan using The Health Outcomes of Travel Tool, and refresh our related policies. We will communicate our travel strategy and related policies to all of our stakeholders, with particular attention being given to raising awareness of the low carbon travel alternatives available to staff, patients and visitors travelling to site We will develop a 'Paperless programme' including a reduction in paper usage, printing, postage costs We will develop an engagement plan for our sustainability efforts (to engage and encourage support for carbon reduction from staff, patients, visitors, suppliers and the local community). We will have reviewed and drafted a plan to improve our data collection to support sustainability monitoring and reporting within Wiltshire Health and Care. 	🚩				✓					
Quality focus	<ul style="list-style-type: none"> Throughout 19/20, Wiltshire Health and Care will collaborate with West of England Academic Health Science Network to develop and implement an Early Warning Score for people with Learning Disabilities. Wiltshire Health and Care will increase the Public and Patient voice within the organisation by the development and delivery of a forum. In Q1 we will implement new clinical risk software to improve incident reporting and risk management. 	🚩				✓					
Equality and Diversity (E&D)	<ul style="list-style-type: none"> We will carry out a survey of how staff members feel about the E&D culture at Wiltshire Health and Care We will produce an Equality and Diversity Action Plan for 19/20 for agreement by the Board. We will identify and build an E&D dataset to support the delivery of our E&D Strategy and Action Plan. We will develop a communication and engagement plan to support the delivery of the E&D Action Plan. 	🚩				✓					
Patient and Public Involvement	<ul style="list-style-type: none"> We will establish a patient and public involvement group for Wiltshire Health and Care (either by reaching agreement to extend the scope of an existing group or by developing one of our own). We will hold patient and public involvement group listening events We will draft a proposal for how we can involve patients and the local public in the following areas: staff recruitment and induction; when carrying out service specific workshops. We will create and maintain a database of people who wish to actively participate in service development discussions and regularly communicate with them. We will define our approach for how we will listen to the voice of children who use our services. We will define our approach for how we involve our patients and the public in our Clinical Reference Group. 	🚩				✓					

We would like to say a big thank you to all our staff and stakeholders who contributed ideas, thoughts, and feedback on the development of this plan.