

א. מידע כללי על התוכנית

שם התוכנית:	SRG Delivery Plan
אחראי:	SRG
מנכ"ל:	SRG

Milestones	Key Actions	Original Completion Date	Revised Completion Date	Action Status	Status Update	Action Owner(s)	Delivery Target	Delivery Target Status at Q1
<b>Preventing Admissions - a reduction in attendances and admissions</b>								
Project scope and outline	Scope work programmes currently in place against rational local vision, undertake gap analysis	7.6.16	30.6.16	Complete	Initial programmes scoped. Additional detail required for us in Directory of Services (DOS) App. Gaps in mental health and palliative care only.	TD	Reduction in ED attendances overall. Each scheme has established outcome measures	
	Review demand and capacity mapping, develop proposals to be delivered through MCP and other work streams	31.7.16		In Progress	Identification of priority work streams underway and will be presented at the next work stream group on 9.8.16	TD		
		31.10.17		Not Due Yet	Additional actions will be included once project plan has been developed and signed off	TD	Number of quality and activity measures within contract	
111 reminder process	111 reminder process complete	31.1.18		Not Due Yet	Additional actions will be included once project plan has been developed and signed off	TD	Number of quality and activity measures within contract	
Out of Hours reminder process complete	Out of Hours reminder process complete							
Urgent care centre provision improved	Agree and implement revised Urgent care centre model to improve service utilisation	from 31.7.16		In Progress	Working group established to review options	LD	reduction in minor branches	
Primary and Community Care response in place	Local hub model developed and tested in Gosport, Portsmouth Hub under development outcome based commissioning programme including payment and contracting mechanisms	31.3.17		In Progress	programme established and scoping underway	TC		
		31.3.17		In Progress	programme established and range of schemes in place. Further work to be undertaken to identify priorities	PAG	measure to be developed as part of scoping work	
	Specific schemes IV service, catheter care, acute waiting service, pharmacy support	30.9.16		In Progress	SCAT service development, non-conveyance and paramedic development schemes in place (HSU)	RK	reduction in patients conveyed	
Non conveyance schemes established	Identification of schemes in place. Review of good practice nationally	30.6.16		Complete	initial work programme agreed	SDK		
Care Homes work programme developed and agreed	Agree and implement key schemes through Forward and Blueprint working groups	TBC		Not Due Yet	detailed activities to be signed off by sub group	WG		
<b>PHT Improvement Plan</b>								
Improve Performance in A&E to achieve 4 hour target through improved patient and processes, professional standards and workforce changes	Implement ED ambulatory area	1.6.16		Complete		MM	78% by June 16, 80% by Dec 16, 80% by March 17, 80% of patients assessed in 15 mins (82% - Sept 16, 95% - Dec 16)	4 hour target - 82% June 15 min assessment - 68% in June
	A&E capacity and demand and staffing model developed	31.5.16	30.6.16	Overdue	capacity and demand modelling completed and staff model to be discussed with ECP on 15/6/16. <i>Strategic pilot underway to remove delays in the</i>	SH		
	Review A&E consultant job plans	30.6.16		Complete		SH		
Increase the use of Ambulatory Emergency Care to assess, diagnose and treat patients. Increase the use of rapid access specialty clinics to provide urgent specialist opinion and reduce admissions	Review A&E pathways	31.5.16	31.12.16	Not Due Yet	commencement date early sept works to be completed by end of Dec. 16	LW	33% A&E target by 16.9.16	
	A&E implemented HCT clinics	31.10.16		Not Due Yet	Work in progress	AB		21% in June
	Medical take model commenced	1.6.16		Complete				
Establish the Acute Medical Unit (AMU) with strong clinical leadership and capacity to accept patients from ED within 30 minutes of decision to admit and primary care referrals for up to 24 hours	standard operating procedures developed, agreed and in place	30.6.16		In Progress		HB		
	review ways of working and agree structure for the new unit	30.6.16		In Progress		AB	60% occupancy in AMU by 16.9.16, number of patients with a length of stay (LOS) over 24 hours	patients with LOS over 24 hours - 38% in June
	AMU recruitment of Med tech/assistant roles	30.6.16		In Progress	All posts recruited to with start dates in July	APC		
Increased focus on effective and timely turnaround of short stay patients to facilitate discharge within 24 hours in AMU and 72 hours on the Short Stay Unit	AMU capacity and escalation process in place	1.6.16		In Progress		LF		
	Short stay pathway commenced	26.4.16		Complete		MR	60% patients on short stay pathway by 8.7.16	64% June
	Short stay ward open	1.6.16		Complete		MR		
Establish early comprehensive interdisciplinary assessment based supporting for patients over 75 years to support the reduction in avoidable admissions. Set up an acute frailty unit with up to 18 beds with a <72 hour length of day	Acute frailty pathway additional consultant hours	30.4.16		Complete		AB		
	Pathway design and plan	30.4.16		Complete		MP	MOH's 95% bed capacity by 31.7.16. Additional 3 A&E patients over 75 years per day are not admitted	Discharges in <72 hours 42% June
	Short stay escalation beds	30.9.16		Overdue	closure on track for completion midday July 16	SE		
Establish specialty based frailty care To improve discharge processes and delivery across the hospital	Implement sharer phone function	1.6.16	31.10.16	Overdue	scoping completed, model being developed	AB		
	competency framework and training completed	31.5.16		In Progress	completed for staff in post and commenced for newly appointed staff	AB		
	implement 'vul' model for complex discharges complex of frail older people	31.8.16		Not Due Yet		AB		
Fit for purpose Operations function and team structure including bed overview, effective on call/ escalation and flow management	open frailty unit	30.9.16		Not Due Yet		AB		
	implement frailty outreach team	7.10.16		Not Due Yet		SE		
	develop in reach model business case for surgical and medical specialty outpatients	31.3.17		Not Due Yet		AB		
Reallocate discharge lounge	SAFER roll out to wards	31.3.17		Not Due Yet	commenced, roll out programme agreed at LCP Board C/SR and D2/Fus in June, E7/8 and AMU - July	MR	33% of discharges before 12pm by 9.9.16, 100% of ward patients with an estimated date of discharge (EAD)	discharges by midday - 21% in June. Ward patients with an EDO - 87% in June
		30.4.16		Complete		MR		
	centralisation of Ops flow team, new roles, transfer team in place	31.7.16		Not Due Yet	Medicine flow completed, surgery and Medicine for Older people - end of July, rest of the hospital - end of August	GM	No 12 hour trolley branches. No non-clinical bed moves between midnight and 6am. Number of escalation beds.	
<b>Integrated Discharge Planning</b>								
Development of integrated discharge service. Discharge to assess and frailty intervention team proposals with resource requirements and return on investment case for change	Review of winter pilot and scoping completed. business case developed and approved	31.3.16		Completed	Awaiting final financial risk share assessment by all partners, additional review by Transformation lead with recommendation. Subsequent finance meeting held in June - still unresolved issue around financials and DRCP monies. To be discussed at SRG Ops on 7th July. Review at SRG 16th July, sign off by 31.7.16	LD	Work stream leads	
	Review and reinvestment of winter monies	30.3.16	31.7.16	Overdue		Finance Director		
	performance standards and reporting, governance processes in place	30.6.16	30.7.16	In Progress	Review of action plans being undertaken to utilise expertise of Transformation lead. Community bed referral pilot delayed to explore OS and model alongside some bed functionality alignment, creating a more Freeflow D&A Pathway 2 bed pool.	DA		
Robust programme management in place	Delivery lead appointed	31.7.16		Complete				
	Review risk and frailty groups established	31.7.16		Complete				
	Agree pilot area, methodology and operationalise pilot	31.7.16		In Progress				
Robust integrated discharge service processes and systems developed and adopted by multi-disciplinary teams	community bed direct referral pathway in place	30.6.16	31.8.16	In Progress	This has been paused whilst review of model has been undertaken	MC		
	OS assessment processes and professional standards in place	30.6.16	31.8.16	In Progress	To include electronic single referral form and assessment fit guidance. Latter signed.	DA		
	OS Hub model agreed - referral management, capacity oversight, training, advice and guidance	31.8.16		In Progress	model developed and to be signed off post visioning event prior to testing and implementation	Provider leads		
Accommodation	OS accommodation identified and in place	30.6.16	31.8.16	In Progress	Estates changes in Lancaster building cost prohibitive therefore alternative option under discussion with PHT and awaiting decision.	DA		
Workforce implications understood and plans for both interim and longer term solutions in place	interim rostering in place	31.7.16		In Progress	Draft rotas have been completed	Provider leads		
	outstanding recruitment completed to support OS and D&A delivery	31.6.16	31.10.16	Not Due Yet	Dependent on Business Case decision	CCOs		
	D&A/OS Assessment fit training programme delivered (event staff)	30.6.16	30.10.16	In Progress	OS visioning event planned for 20/7 and training workshops in August for Board, trusts and medical			
OS pathways developed approved and established	OS ward links in place to support all adult inpatient wards at PHT	30.9.16		Not Due Yet	Currently being scoped. Partners to complete matrix by 11.7.		50% in place by 30.6.16, 100% by 30.9.16	
	troubled assessor model in place with clear permissions and responsibilities	30.9.16	31.10.16	Not Due Yet	Development of trusted assessment framework following 20.7.16 event.	DA	90% trained by 30.6.16, 100% by 30.9.16	
	additional capacity mobilised for Portsmouth pathway 1&2	30.9.16		Not Due Yet	Dependent on Business Case decision	SH		
Monitoring and Report Progress	review and remodel of OT pathway	30.9.16		Not Due Yet				
	Hampshire pathway 3 review including inpatient areas	30.9.16		In Progress	planning meeting set up. Will need to be fast-tracked to ensure adequate D&A Pathway 3 capacity before end October 2016	PT/Net		
	Revised DRG pathway in Portsmouth	31.12.16		Not Due Yet		SH/DA		
Escalation	performance targets delivered - discharges per week	31.3.17		Not Due Yet	draft D&A KPIs being revised	Work stream leads	186 by Q1, 218 by Q2, 233 by Q3	
	performance targets delivered - MFTD patients waiting longer than 24hrs from decision	31.3.17		Not Due Yet		work stream leads	360 Q1 - Q3, 40 by Q4	As at 18.7.16 - 170 patients
	performance targets delivered - 5% reduction in 1st bed patients	31.3.17		Not Due Yet				
<b>Escalation</b>								
Escalation	Review of escalation process	31.8.16		In Progress	Commenced - by partners for each organisation and collectively for the system	SN/ SRG Ops group		
	insurance process agreed by partner and system	30.9.16		Not Due Yet		SR		
Emergency Planning	insurance that in place for all areas partners and system as plan for full review in two years	TBC		Not Due Yet		SR	TBC	
Business Continuity	to re-establish a resilience group for partners and CCOs which sits under the SRG operational group and provides assurance on seasonal plans	TBC		In Progress	Stocktake under way will be completed by 18th July and reviewed at Operational Group	SR		
<b>Seasonal Resilience Planning</b>								
<b>SRG Information Support</b>								
Establish working group	set up group to provide system wide intelligence for SRG	31.3.16		Complete	Group established and meetings held fortnightly	SDK		
	Performance dashboard development	31.5.16	30.6.16	Complete	Draft metrics agreed and developed. These will be tested with SRG and refined over the coming months.	IG/OG		
	monthly performance report with narrative and analysis agreed and commenced	30.6.16	Review monthly for the next 3	In Progress	Process in place and first draft with real data to be presented to SRG on 16th July	IG	TBC	
Business Intelligence programme	develop a wider programme of system intelligence, planning information and targeted deliver initial work programme	31.7.16		In Progress	proposal to be presented at SRG on 16.6.16	SB/M/IRM		
		31.3.17		Not Due Yet	projects identified for detailed info support are Nursing homes, DTQC and escalation	IG		
<b>SRG Development Programme</b>								
Review of SRG function and delivery	Understand initial diagnostic and agree development programme	30.4.16		Complete		AU/SDK		
	Session 1 Establish core purpose of the group	2.6.16		Complete		AU/SDK		
	Session 2 Review Practices	14.7.16		Complete	Action plan developed and underway	AU/SDK		
Leadership	Session 3 Improving process to affect better quality of outcomes	TBC		Not Due Yet		AU/SDK	TBC	
	Session 4 Power - maximising shared leadership	TBC		Not Due Yet		AU/SDK		
	Individual support sessions to improve awareness and assurance of SRG	TBC		Not Due Yet		AS		
Best practice	Review good practice from other SRGs and report/Implement Bestways	30.9.16		Not Due Yet		SDK		