

Medway DToC Plan 2017 - 2019

Focus Areas	Action	Outcome	KPI	Lead	Timeframe
DATA – UNDERSTAND ISSUES	AGREE METRICS FOR PLAN	BETTER UNDERSTANDING OF ISSUES LEADING TO DToC ACROSS SYSTEM		AD COMMISSIONING, BUSINESS & INTELLIGENCE	MONTHLY REPORTING TO UCOG
	AGREE TRAJECTORY				QUARTERLY MONITORING VIA BCF STOCKTAKE
	BENCHMARK PERFORMANCE	UCOG ABLE TO TRACK PERFORMANCE AND HOLD TO SYSTEM TO ACCOUNT			
	REPORT TO UCOG				
GOVERNANCE – WHOLE SYSTEM RESPONSE	WHOLE SYSTEM MDT APPROACH ESTABLISH DToC DATA GROUP TO DELIVER TARGET	REDUCTION IN DToCs • KMPT • MFT (Medway Residents) • WHOLE SYSEM / OTHER STAKEHOLDERS	ACHIEVE AGREED REDUCTION MOVE TOWARDS 3.5% NATIONAL TARGET >4/100,000 POPULATION REDUCTION IN SYSTEM DToC DELAYS DUE TO ASC	AD COMMISSIONING BUSINESS & INTELLIGENCE	AGREEMENT VIA UCOG TBA
BUILD CAPACITY	DEVELOP COMMUNITY ASSESSMENT HUB	REDUCTION IN DUPLICATION – ENSURE RIGHT CARE, RIGHT PLACE, RIGHT TIME	TO BE ESTABLISHED AS PART OF THE CAH BUSINESS PLAN	HEAD OF ADULTS' PARTNERSHIP COMMISSIONING	HUB OPERATIONAL FROM OCT 17
	INCLUDE CHC BROKERAGE PROCESS AND PATHWAYS			PROGRAMME MANAGER - PMO	NOVEMBER 2017
	DEVELOP TRUSTED ASSESSMENT PROCESS	ALL PROCESSES DELIVER A CO-ORDINATED DISCHARGE PLANNING BASED ON JOINT NEEDS ASSESSMENT PROCESSES AND PROTOCOLS, ON SHARED / AGREED RESPONSIBILITIES DELIVERING GOOD OUTCOMES FOR PATIENTS	SET KPIS AROUND LENGTH OF STAY / DISCHARGE DESTINATION	PROGRAMME MANAGER - PMO	SEPTEMBER 2017
	RECONFIGURE BROKERAGE FUNCTION			UCOG	SEPTEMBER 2017
COMMUNITY SERVICES	MOBILISE COMMUNITY ASSESSMENT HUB	PATIENT CARE IS DELIVERED IN COMMUNITY RATHER THAN IN AN ACUTE SETTING	REDUCTION IN COMPLEX DToCs	PROGRAMME LEAD	MOBILISE CAH OCT 2017
	ART INTEGRATION				
	CARE HOMES INTEGRATED INTO WHOLE HEALTH AND SOCIAL CARE COMMUNITY AND PRIMARY CARE SUPPORT	IMPROVE RESPONSES FOR REQUESTS FROM RESIDENTIAL / NURSING HOMES	REDUCTION IN THE NUMBER OF DToC IN COMMUNITY BEDS	HEAD OF ADULTS' COMMISSIONING	NOVEMBER 2017
	REVISE SERVICE SPECIFICATION AND CONTRACT T&Cs TO IMPROVE RESPONSE TIMES	NO UNNECESSARY ADMISSIONS FROM CARE HOMES / CLOSER LIASON WITH COMMUNITY GERIATRICIAN	REDUCTION IN THE NUMBER OF PROVIDERS THAT RECEIVE AN INADEQUATE / REQUIRES IMPROVEMENT CQC RATING	HEAD OF ADULTS' COMMISSIONING	MARCH 2018
	ENSURE SUPPLY IN MARKET MEETS DEMAND	PATIENTS ABLE TO ACCESS RIGHT SERVICE IN RIGHT PLACE		HEAD OF ADULTS' COMMISSIONING	REVIEW OF PROGRESS ON WINTER OUTCOME
WORKFORCE DEVELOPMENT	ASC PROCESSES TO MEDWAY MODEL OF DELIVERY	ASC WORKFORCE UNDERSTANDS PROCESSES THAT SUPPORT EARLY DISCHARGE		HEAD OF SERVICE SOCIAL CARE	JANUARY 18
	REVIEW CAPACITY / SKILL SET IN COMMISSIONED SERVICES TO ENSURE UPDATED PROVISION OF SERVICES	REDUCTION IN DUPLICATIONS / DELAYS / UNNECESSARY ADMISSIONS TO HOSPITAL	IN LINE WITH THE EXPECTATIONS OF MEDWAY MODEL / STP	PROGRAMME LEAD - CCG	REVIEW POST WINTER 2017
	SCOPE POTENTIAL FOR INCREASED POOLED RESOURCES INCLUDING CHC	PATIENTS TO HAVE SINGLE ASSESSMENT		PROGRAMME MANAGER - PMO	TBA

APPENDIX 2

Focus Areas	Action	Outcome	KPI	Lead	Timeframe
VOLUNTARY AND COMMUNITY SECTOR	REVIEW AND BUILD CAPACITY OF VOLUNTARY SECTOR ORGANISATIONS TO ENGAGE IN DISCHARGE TEAMS TO SUPPORT PEOPLE HOME FROM HOSPITAL	REDUCTION IN SOCIAL ISOLATION AND COMMUNITY RESILIENCE	REVIEW TARGETS FOR 2017/18 PR	PROGRAMME LEAD ADULTS' COMMISSIONING / PUBLIC HEALTH	MARCH 18
	SUPPORT COMMUNITY INITIATIVES (SUCH AS DERIC / MEGAN) TO BECOME INTEGRATED WITHIN THE DEVELOPMENT OF A NEW HEALTH AND SOCIAL CARE MODEL	VOLUNTARY SECTOR FULLY INTEGRATED AS PART OF THE HEALTH AND SOCIAL CARE TEAM BOTH WITHIN THE ACUTE TRUST AND IN THE COMMUNITY			
CHOICE	IMPLEMENT THE NEW NATIONAL GUIDANCE ON PATIENT AND FAMILY CHOICE	REDUCTION IN DTOC DAYS RELATING TO CHOICE IN LINE WITH ACTION PLAN	REDUCTION IN NUMBER OF PEOPLE / BED DAY DELAYS ON CHOICE	PROGRAMME LEAD ADULTS' COMMISSIONING	MARCH 2018
	IMPLEMENT A TRIAL TO PROVIDE TAILORED INFORMATION, ADVICE AND GUIDANCE FOR THOSE IDENTIFIED AS REQUIRING SUPPORT	INCREASED SUPPORT FOR PEOPLE ON CHOICE	ACHIEVE 3.5% REDUCTION AND LESS THAN 8 BED DAYS LOST DUE TO SOCIAL CARE	PROGRAMME LEAD ADULTS' COMMISSIONING / HEAD OF SERVICE SOCIAL CARE	
	CHOICE PROTOCOL USED PROACTIVELY TO CHALLENGE PEOPLE				
DIGITAL ROAD MAP	DEVELOPMENT OF STRATA WITH SYSTEM PARTNERS	INCREASED INTEROPERABILITY	INCREASED USAGE OF TECHNOLOGY ENABLED CARE SERVICES (TECS)	PROGRAMME LEAD ADULTS' COMMISSIONING	MARCH 2017
		BETTER UTILISATION OF TECS AS BOTH A PREVENTATIVE MEASURE AND DISCHARGE FACILITATION		PROGRAMME LEAD ADULTS' COMMISSIONING	MARCH 2017