

Hospital @ Home Pathway Highlight Report

PROGRAMME	Hospital @ Home Project	PROGRAMME MANAGER	Fiona Slevin-Brown, SRO Rhian Warner, PM	OVERALL RAG	Red
REPORT MONTH END	30 th November 2015	REPORT ISSUE DATE	4 th December 2015	REPORT STATUS	

PROJECTS/ SCHEMES STATUS				
Project Status <ul style="list-style-type: none">• The H@H project has formally been paused: due to a lack of activity going onto the agreed pathway. Interim staff work plan proposals were shared with the 3 LA DAs and Senior leads and presented to the Urgent Care Programme Board on 24th September, in order to gain support on the immediate redeployment of staff to support system resilience.• The proposals agreed were:<ul style="list-style-type: none">○ Rapid Response and Treatment to Care Homes and○ Enhanced Medical support to the Older Peoples Mental Health Inpatients at Prospect Park Hospital.• Approval has now been gained from the BW integration board and delivery groups• RRAT has been presented to West Berkshire Integrated Care Steering Group, Wokingham Integration Strategic Partnership (WISP), Wokingham CCG GP Council and Wokingham Care Governance Board meeting• Letters to Healthwatch on 2nd November to inform them of the changes to H@H project and to ask for a patient volunteer.• Paper presented to the Delivery Group on the 18th November for the Health and Well-being Boards.• The retrospective PID was completed and was circulated to the UCPB and the LA Integration Boards on the 16th November• BHFT sent change of contract letter on the 4th November for the in year contractual changes• Operational responsibility was handed over to BHFT on the 13th November 2015• The Project Group monitoring this project was agreed and the first meeting will be held in December 2015.• The potential phasing for Phase 2, 3 and 4 Care Homes has been circulated to the project group and LA Integration Board leads. Appendix 2				Project Status
				Financial status
				Activity Status
				Milestone Status
Current status <ul style="list-style-type: none">• Both projects have been live since the 19th October• RRAT became fully operational from 26th October• RRAT have received 15 referrals up to the 27th November 2015 with a target of 16 referrals in this time period for phase 1. See Appendix 1 for a brief overview.• The community geriatrician is carrying out an average of 6-8 reviews per session for the OPMH Inpatients.				

KEY ACHIEVEMENTS FOR NOVEMBER	
Operational	Working with Project Group, ANPs and Community Geriatrician to develop further information for Care homes to reduce the risk of Care Homes calling RRAT when it should be 999 and vice versa. Liaison with NRS and Trish Guest to resolve the Telehealth equipment ordering issues
Communication	On-going Communications to all stakeholders on arrangements have continued throughout November. Communications to care homes and GPs have been delivered face to face by the ANPs, nurses and

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	community geriatrician. PM has attended some GP Council meetings, LA integration boards and LA Quality Meetings as required updating GPs and LAs about project status and plans.
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NEXT STEPS / PLANNED ACTIVITIES FOR DECEMBER

	<p>Presentations RBC Care Home Quality Board and Reading Integration Board</p> <p>1st Project Group monitoring for the project moving forwards</p> <p>Agree activity modelling for 2016/17 with BHFT in order to inform workforce planning for 2016/17 and investment required from H@H funding</p> <p>Complete information required for Care Homes Project RRAT work stream for PID for QIPP and Finance</p> <p>RRAT Service to be added to 111 DOS, this is an on-going plan as the pathway is complex as it is a small group and geographically restricted.</p>
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NEW ISSUES RAISED

Telehealth equipment is time consuming to order as have to order each individual component. There is a risk that an item could be forgotten

NEW RISKS IDENTIFIED

There is a risk that care homes could call RRAT when they should be calling 999 for a resident which could incorporate a delay to treatment.

PROJECT MILESTONES, DELIVERABLES

<i>Project Milestones (Include all milestones from last month onwards)</i>	<i>Task Owner</i>	<i>Original delivery Date</i>	<i>Planned delivery Date</i>	<i>Conf H/M/L</i>	<i>Explanation for slippage, impact on work stream and actions being taken. Has any re-planning been approved by appropriate Board?</i>
Revised proposal for QIPP and Finance and Health and Well-being Boards	PM	31 st Oct	31 st Oct	High	Interim work plan proposals presented to QIPP and finance 22 nd September. No agreement for 16/17 to date.
Write and Agree addendums to service specifications and pathway model	PM	9 th Oct	9 th Oct	High	Written and completed on 23 rd October
Comms for all partners to be written and disseminated.	PM	13 th Nov	13 th Nov	High	Comms all written by 19 th October and dissemination started on 19 th October
Referrals to rapid response to commence	Care Homes GPs, A&E, SCAS	19 th Oct	19 th Oct	Med	2 referrals received to date
Agree phase 2, 3 and 4 care homes	PM	15 th Nov	15 th Nov	High	Agreed in principle for sign off at December Project Group meeting
Complete PID for presentation at QIPP and Finance Committee	PM	15 th Nov	15 th Nov	High	Retrospective PID completed and sent on 16 th November
Agree Project Monitoring Board	All providers and partners	5 th Nov	5 th Nov	High	Project Board Agreed 5 th November
Complete all information for RRAT work stream for Care	PM and BHFT	15 th Dec	15 th Dec	Med	

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Homes PID including activity, capacity, and Workforce models for RRAT					
Review of Enhanced Support for OPMH and update business case for internal BHFT resubmission	PM and BHFT	15 th Jan 2016	15 th Jan 2016	Med	
Complete review of Phase 1	PM	18 th Jan	18 th Jan 2016	High	
Launch Phase 2	BHFT	1 st Feb 2016	1 st Feb 2016	Med	

Appendix 1

Action Date Time	Care Home Name	Patients reported condition	Locality
19/10/2015 09:53	Hungerford	Ref CareHome Concerns with pt having difficulties in breathing, having Ventolin inhaler not helping, Bloods taken a week ago, CRP raised, has chest infection has been on antibiotics. 02 sats around 90-92.	Newbury
26/10/2015 08:30	Riverview	RRAT Care Home River View Nursing Home Pt has history of falls.	Reading
27/10/2015 09:23	Woodbury House	Rapid Response and Treatment for Care Homes Wok - Lady EOL with dark coloured foot and midcalf - poor circulation	Wokingam
30/10/2015 09:33	Donnington	Ref for RRAT To avoid admission, Suspected UTI not eating or drinking and not able to swallow meds, Pt also had large seizure this morning as not able to take meds. Needs IV fluids and Antibiotics. Paramedic still on scene .	Newbury
03/11/2015 11:04	St Lukes	Ref RRAT RDG Was seen by Dr yesterday, Pt severely dehydrated with possible UTI	Reading
04/11/2015 15:53	Lakeside	Ref RRAT READING	Reading
06/11/2015 10:20	Suffolk Lodge	Rapid Response and Treatment for Care Homes (Wok) Patient may have a chest infection as patient has been coughing a lot. Suffolk Lodge rang the GP but they asked them to call the Hub. Pt has been out of hospital for 2 days now. Pt seems frail and mobilises with a Zimmer Frame plus one.	Wokingam
09/11/2015 09:20	St Lukes	Rapid Response and Treatment for Care Homes Rdg. patient is suffering with SOB and has some tingling in his fingers, have contacted the GP, but the GP is due a home visit. The RRAT Team has requested that the referral to be made to them. Pt does not look his normal self and suffers with dementia. Pt is normally independent with his mobility and walks with a walking frame. Pt needs prompting with all his ADLS.	Reading
19/11/2015 10:52	Suffolk Lodge	RRAT new referral	Wokingam
20/11/2015 09:56	Lakeside	RAPID RESPONSE AND TREATMENT FOR CARE HOMES (RDG) Pt came in with a fall and UTI and had a blocked catheter. The catheter has been taken out but not re inserted. Has been sent home with 5 days of Trimethoprim.	Reading
20/11/2015 10:23	Lord Harris	RRAT WOK REF GP summary requested	Wokingam
23/11/2015 14:12	Suffolk Lodge	RRAT REF WOK Received by the HUB Pt has dementia-unable to consent. Nursing home has with best interest.	Wokingam
25/11/2015 11:33	Alexandra Grange	Referral for RRAT Came in with diarrhoea and vomiting and needs to return home iv fluids and monitoring - Keep hydrated and avoid further admittance. - the referrer stated that they have spoken to the team and the Pt has been accepted. Pt summary has been requested from the surgery.	Wokingam
25/11/2015 12:01	Abbeyfield	Ref for RATT RDG Pt back to care home - needs IV AB - RATT team are present and need this referral opened up their team.	Reading
27/11/2015 07:59	Lord Harris	HUB Services RRAT Care Homes- Wokingham	Wokingam

Appendix 2

Phase 1 - 15 Care Homes

Rank	Reading	West Berks	Wokingham
1	Abbeyfield House	Walnut Close	Lord Harris Court
2	River View Care Centre	Birchwood Care Home	Suffolk Lodge
3	St Luke`s & The Oaks Residential Home	Hungerford Care Centre	Sunrise (assisted living)
4	Jasmine House	Bayford House Nursing Centre	Warren Lodge
5	Lakeside Residential Home	Willows Edge	Woodbury House Care Home

Phase 2 - 15 Care Homes

Rank	Reading	West Berks	Wokingham
6	Parkside House Nursing Home	Hollies Care Home	The Berkshire Nursing Home
7	The Willows Specialist Dementia	Holly Grange	Glebelands Care Home
8	The Boltons	Donnington Nursing Home	Westminster West Oak
9	Life Care Home	Argyles Nursing Home	The Liberty Of Earley House
10	Navara Lodge	Thatcham Nursing Home	Alexandra Grange Care Home

Phase 3 - 14 Care Homes

Rank	Reading	West Berks	Wokingham
11	Beacher Hall Nursing Home	Notrees	Down Lodge
12	Bath Lodge	Chestnut Walk EP Home	Austen House
13	Summerfield Rest Home		Wild Acres Care Home
14	Northcourt Lodge Nursing Home		The Mount
15	Mulberry House		Murdoch House
16	Moorlands Rest Home		Belamie Gables

Phase 4 - 8 Care Homes

Rank	Reading	West Berks	Wokingham
17	Pembroke Lodge		Bridge House Nursing Home
18			Valerie's Rest Home
19			Lynden Hill Clinic
20			Ravenswood Village
21			Lovat House
22			Beechbrook Residential Home
23			Hilltop House