100 Day Challenge

Supporting Plymouth LCP to deliver improvements in navigation through Urgent and Emergency Care

Plymouth Health and Adult Social Care OSC Meeting

Katy Kerley & Chris Morley

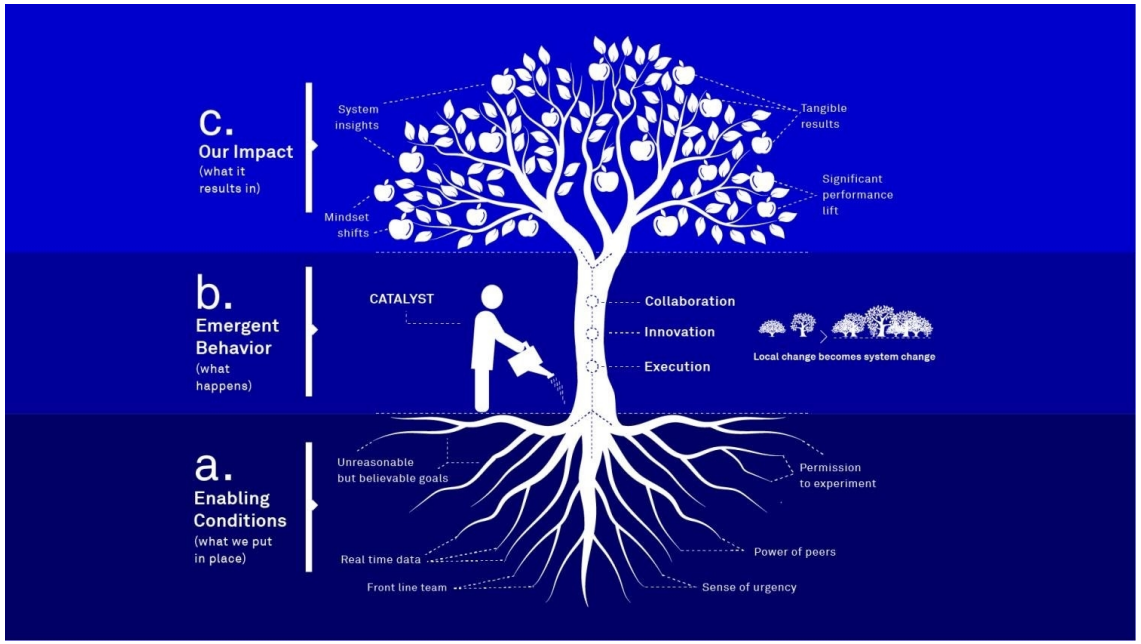
Executive Summary

- The purpose of this programme is to support improved experience and outcomes for the people of Plymouth in accessing Urgent and Emergency Care (UEC)
- In May 22, senior leaders endorsed the UEC programme as a testbed for co-designing a transformative approach, embedding OD and integrated working to support improvements in UEC
- At a 'UEC Refresh' event in September 2022, system partners identified 'Effective Navigation' as central to improving UEC services
- The approach will support existing improvement work outlined in the System Recovery plan, along with other improvement work planned in the Plymouth system
- In November 22, the programme of work was endorsed by the Urgent Care Programme Board
- It adopts the 5 opportunity areas for improved integrated working, identified through the system diagnostic and ICS Maturity Assessment Framework to create the conditions for success
- And draws upon the Outward Mindset and 100-day Challenge methodologies, underpinned by the Philosophy of a Value Based Approach (VBA)
- The programme has attracted funding from NHS England in support of improvements in UEC and details of the programme have been shared with, and endorsed by Sarah-Jane Marsh – National UEC Lead
- The programme is now ready for delivery following engagement with Plymouth LCP Executive Group

Key messages from UEC leaders

"Agreement that this *(UEC)* needs a radically new approach, not just incremental improvement and that it requires collective, brave leadership at every level and that devolving as much as possible to the level that staff and patients can relate to will help make this real and actionable."

"Building relationships and beginning an exploration of the issues to help us share and learn together."



Reinstitute: how we work

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Adopting a learn by doing approach

Recovery plan

Our recovery goals require us to combine our own system knowledge with evidence from other systems, enabling us to deliver new and innovative models of care at pace, recover core services, and improve our productivity. We are committed to developing innovative service models that can support the delivery of high-quality care while also driving efficiencies.

example

The community pharmacy consultation service (CPCS)
Referrals from GP practices, NHS 111 and NHS 111 online for minor illness or if a patient needs an urgent supply of medicine. EDs and UTCs will also be able to refer to the service, The service is funded nationally as part of the community pharmacy contractual framework

example

ED front door triage
Kiosks at the front door to triage low acuity patients to more appropriate services, alongside care navigators to support implementation

example

Mental Health Triage and Assessment within the Ambulance Control Room
Supports the diversion of Ambulances and improves patient experience for people on the 999 pathway

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Setting the Change Agenda

The way we do things together in Devon

A narrative which sets out what Devon currently does well and identifies what changes need to be made in order to deliver improved health and care services to the people of Devon. **Developing new ways of working, and adapting the culture in Devon, was identified as a significant enabler to the improvement needed.**

Guiding principles:

- **Provide a personalised approach to health and care:** 'joined-up' packages based on individual need
- **Support our workforce:** to ensure people are able to do their best work
- **Ensure shared Decision-making:** consistently applied across all services
- **Use high value interventions:** consistently and earlier in pathways and stop providing health and care that does not add value and may be causing harm
- **Reduce our environmental impact**
- **Tackle unwarranted variation in practices, outcomes and inequality**
- **Manage risk across the system:** ensuring that decisions made in one place do not increase the risk in another and addressing challenges from a whole population perspective
- **Spread improvement and innovation**
- **Develop a 'Culture of Stewardship'**

The narrative was co-developed with Clinical and Professional Leadership groups across health and care and agreed by senior leadership teams and Boards across One Devon.

As a result of this collaborative work, system partners have broadly agreed a set of guiding principles which will inform the Devon change agenda and **guide the future system development needed in order that system partners work together** to deliver improved care and services for the people of Devon.

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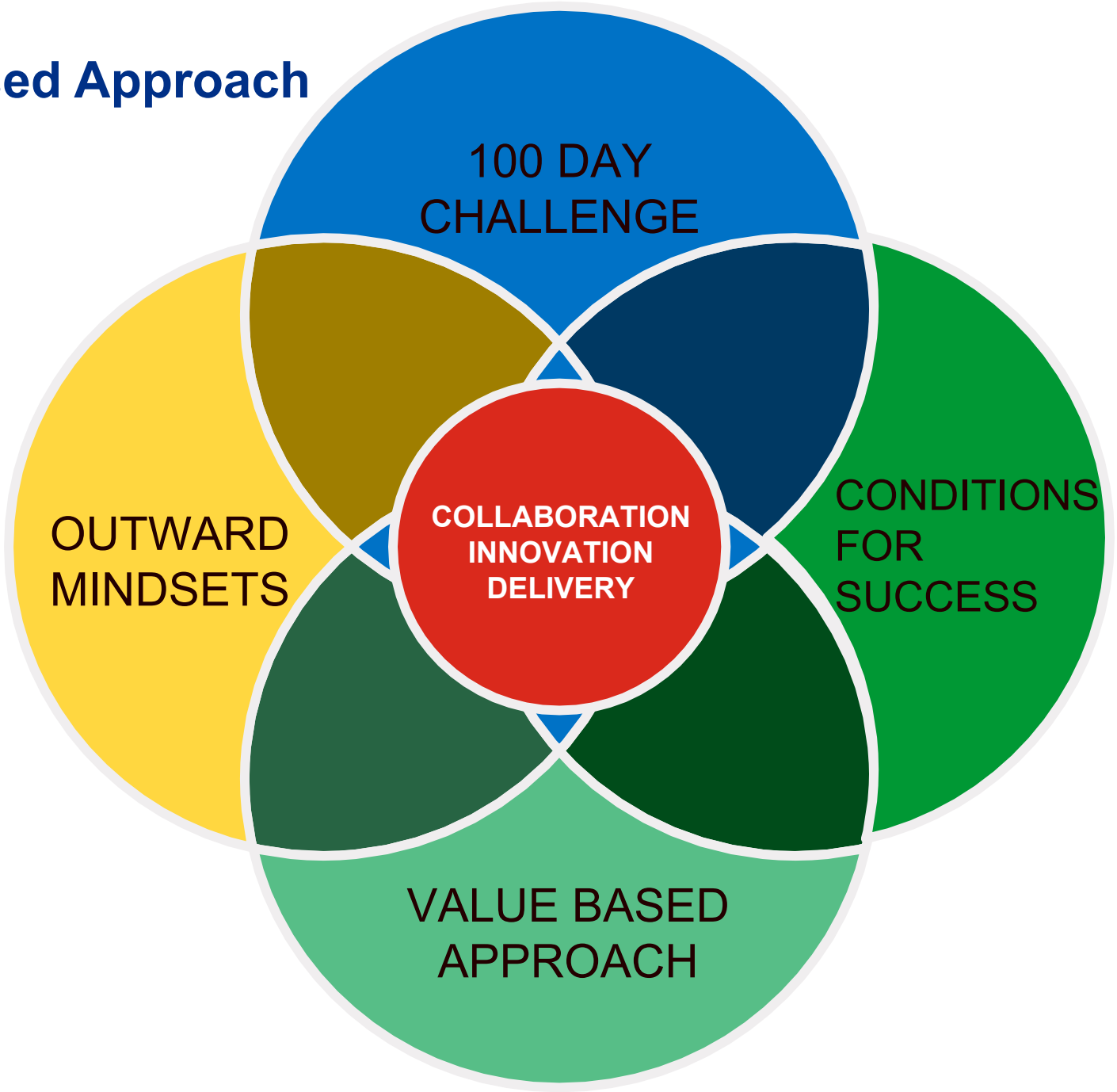
Proposed Approach



To support improved experience and outcomes for the people of Plymouth accessing Urgent and Emergency care, we aim to create the conditions for success by embedding new ways of working which are supported by the Value Based Approach (VBA) philosophy and the alignment of two methodologies, Outward Mindsets and the 100 day challenge.

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Creating the Conditions for success

- Embedding the 5 opportunity areas for improvement, identified through the system diagnostic
- An agile programme plan that provides rigour and achievement of aims, but is adaptable to support the engagement of key people and operations
- Premortem exercise drawing on partners knowledge and experience to identify risks and mitigations
- Stakeholder engagement work to identify key individuals and groups to involve and/or inform about the work
- Clear governance and escalation routes to progress and achieve the aims
- Communication, education and engagement plan
- BI support to identify and analyse data sources relevant to the 100 day challenge goals

Opportunity Area	Description
	Real change will come from undertaking real work together and acting upon the learning we generate. One Devon will be able to continually develop if we embed a culture of learning and improvement.
	Implementing a small number of priority projects and programmes will create the conditions for us to deliver real change together on the journey towards achieving One Devon's vision.
	Defining and articulating (continuously) why we are doing what we are doing, and what we hope to achieve from it, will support One Devon to collectively realise a common purpose.
	Increasing levels of trust and collaboration between us will be vital to creating the conditions for progress towards One Devon's vision.
	Movement towards One Devon's vision will be enabled by the extent to which we seek to understand, listen to, and take into consideration each other's needs and constraints.

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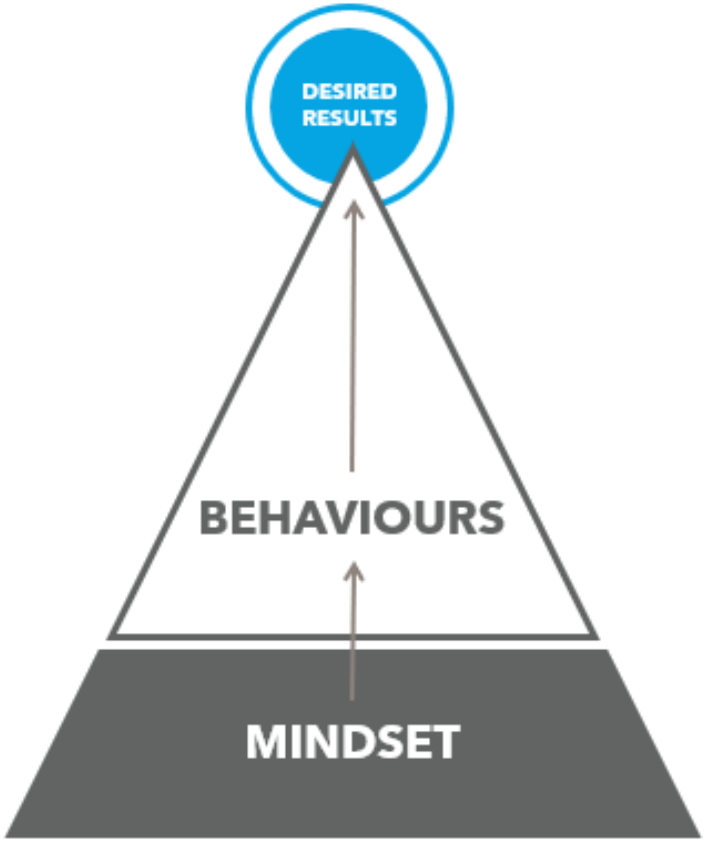
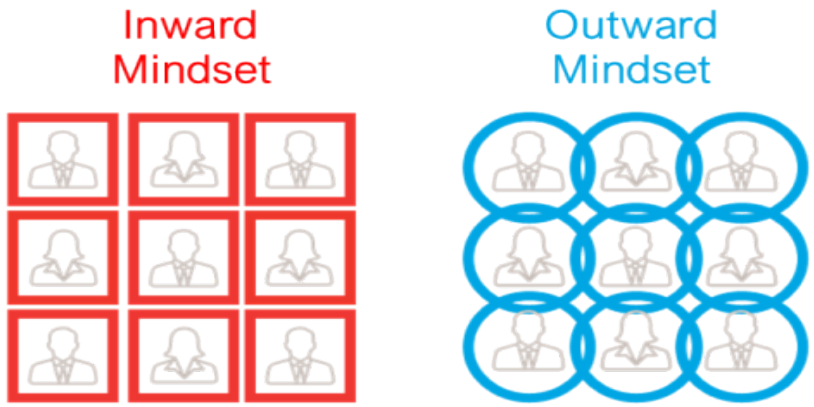
Outward Mindset as a catalyst

The proposed approach will use the Outward Mindset to develop the way in which partners collaborate, support and align with one another. The frameworks and tools naturally harmonise and amplify the impact of the process and outcomes of the 100 day challenge methodology





Organisations that identify and address pervasive mindsets at the outset are **four times more likely to succeed** in organisational-change efforts than are organisations that overlook this stage.

Optimus

Arbinger Institute

RE!NSTITUTE's 100-Day Challenge

South West Academic Health Science Network

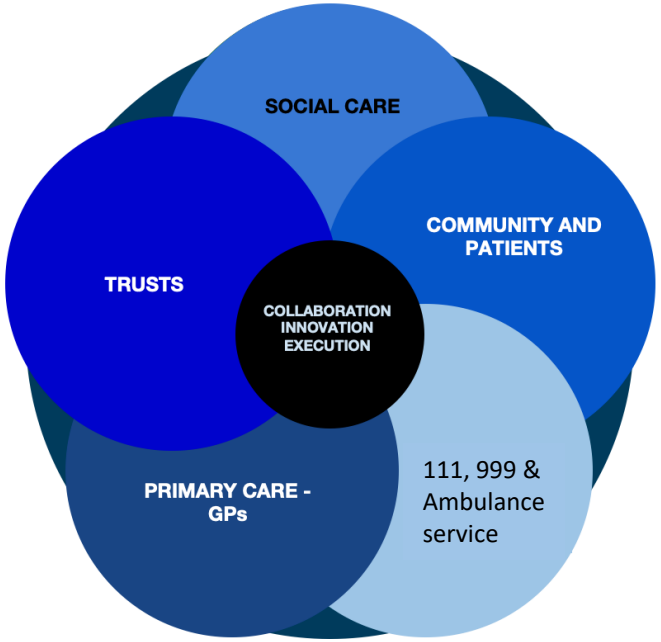
This is a results-focused systems change methodology built on proven principles and practices of quality improvement and design thinking. It creates the enabling conditions for collaboration, innovation, rapid experimentation, and execution.

100-Day Challenges have been applied in 28 countries in sectors as varied as criminal justice, housing and homelessness, health, worker safety, and more. In the UK, 100-Day Challenges have been implemented in health and social care since 2015 and supported local NHS systems to achieve tangible results such as **a 40% reduction in unplanned admissions (which stabilised afterward at 10-12% reduction)** and a **reduction of average Length of Stay in hospital by 4.5 days.**

The methodology supports local systems to achieve:

- dramatic increases in performance which are inspired by an unreasonably ambitious 100-Day Goal
- insights about patterns in the systems that enable or limit performance. These insights begin to result in shifts in the systems
- transformative experiences for the team members and leaders involved, which include deeper connections with each other, a stronger sense of agency and confidence in leading change, and appreciation for the power of working in a purposeful, autonomous, and agile team

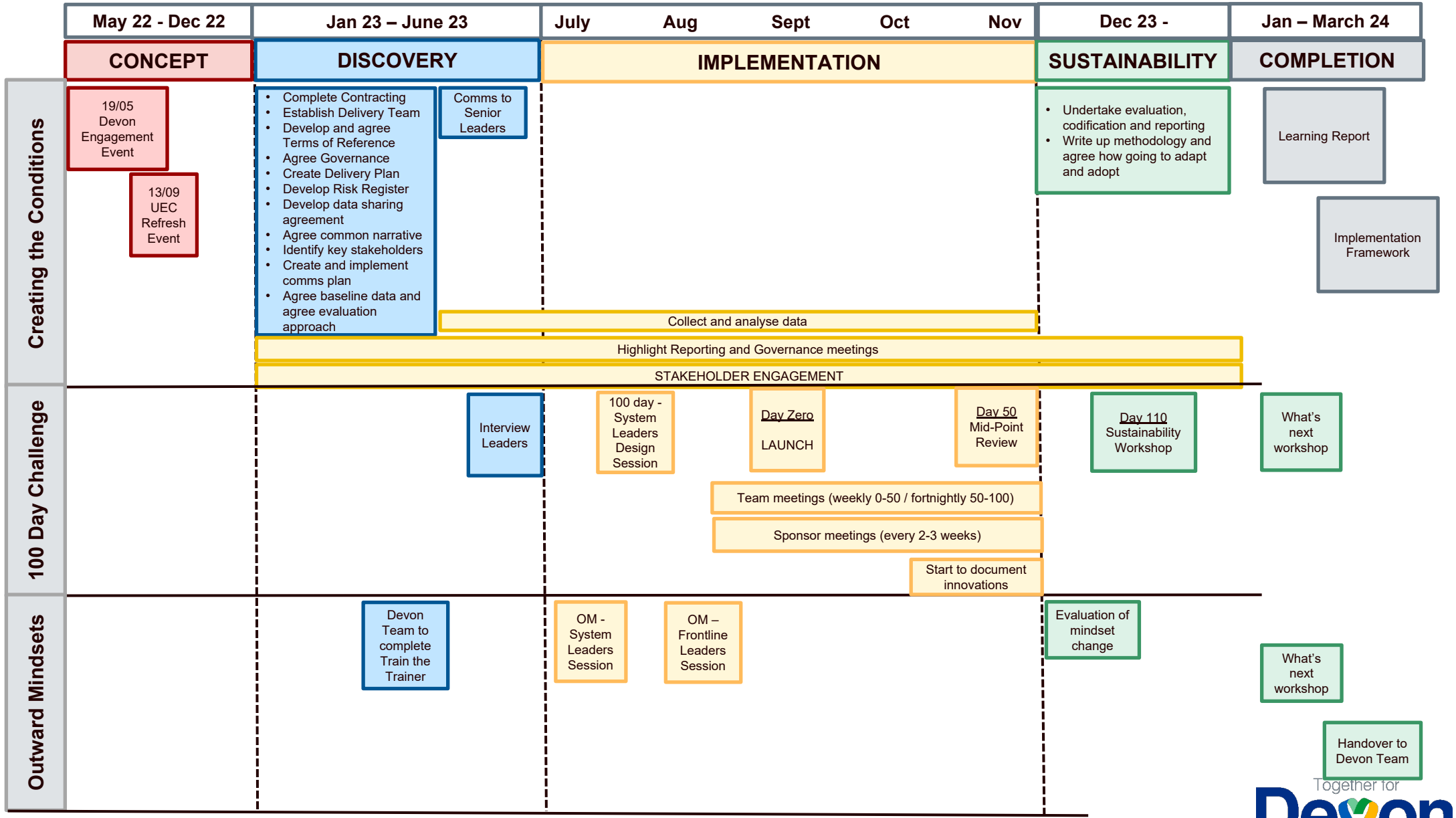
Building on the Outward Mindset work, 100-Day Challenges will be deployed in Devon to support the health and social care systems to achieve positive tangible results in **managing patient navigation and its impact on Urgent and Emergency Care (UEC) in 2023.** More information about the structure of 100-Day challenges can be found here. In Devon, two initial teams following a 100-Day Challenge will be delivered by **RE!NSTITUTE** working in partnership with the **South West Academic Health Science Network**.



"A rapid access clinic for IBD patients has been set up in week three. We've been trying to do that for three years!"
Chief Operating Officer & Deputy Chief Executive, Stockport NHS Foundation Trust

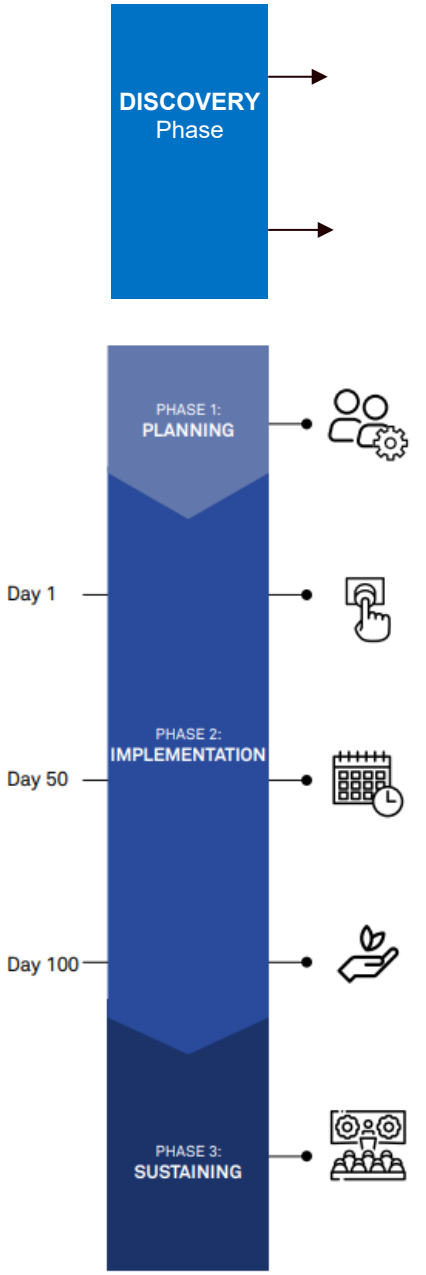
"All of a sudden in the space of 100 days I felt like in real time we'd moved what we would have done in probably a year and a half… It was one of the best pieces of transformational change work I've been involved in."
Gemma Clifford, IPC programme manager

UEC Effective Navigation Innovation work - Timeline



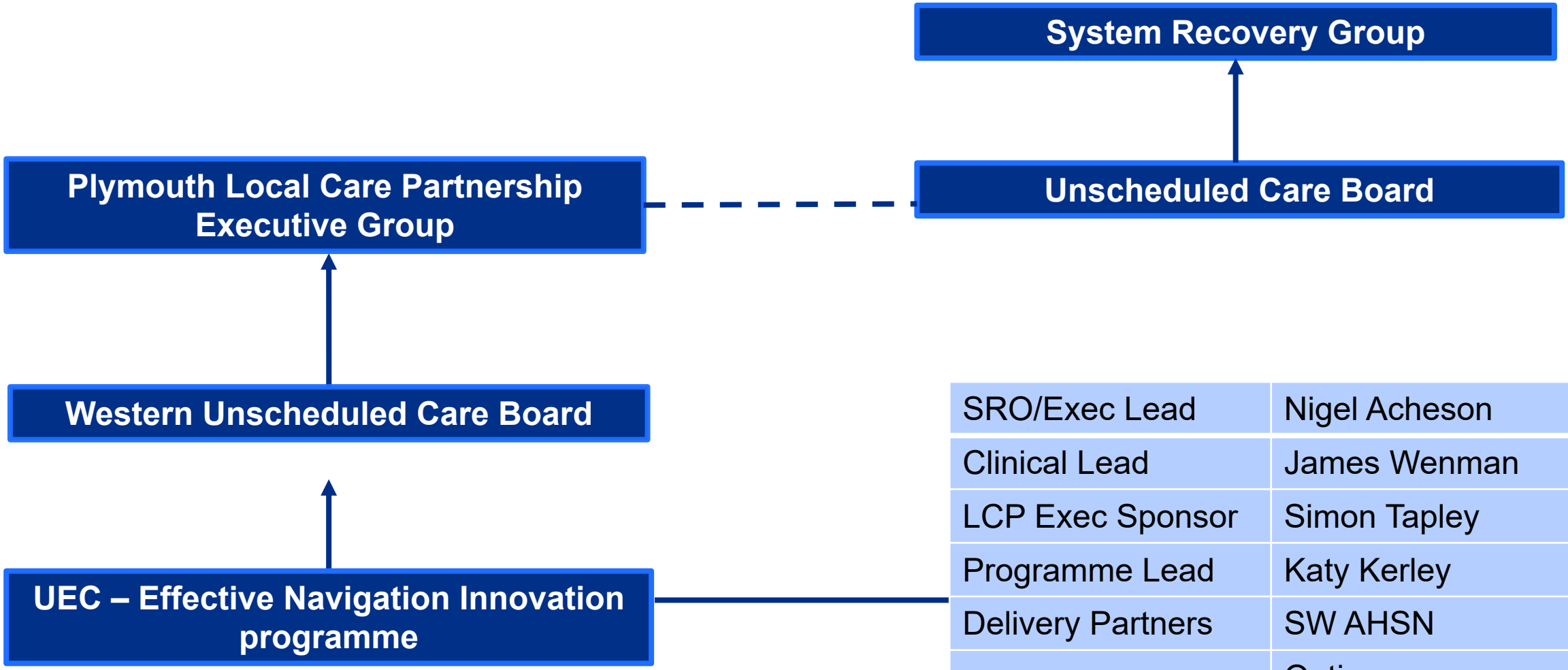
Together for Devon

Anticipated Involvement 2023



	Senior Leaders	Frontline Leaders	When
1:1 conversations with Reinstitute – to understand the key challenges, to co-design and scope the focus for the work to take place during the 100 day challenge.	1 hour	N/A	May/June
Outward Mindsets session. Building capability to deploy tools and an approach to operationalise system leadership and strengthening resilience of individual leaders and teams to better cope with complexity	Half day	1 day	Late July/Mid-August
System Leader Design Session Convening with relevant leaders from the Local System to agree on a Challenge, identify members for the 100-Day Team, and elect two or three "Sponsors" from the system leaders to work more closely with the team	Half day	N/A	July
Launch Workshop Two-day workshop where teams set ambitious 100-Day Goals, build action oriented work plans, and elect Team Leaders. Day 1 of the Challenge begins immediately afterward.	1.5 hours	2 days	Early September
Mid-Point review workshop Half-day workshop held locally to reflect on what has happened in the first 50 days and adjust plans for what needs to happen in the next 50 days to ensure success	1.5 hours	1 day	Early November
Sustainability Workshop Two-day workshop after Day 100 for teams to celebrate accomplishments, consider how to sustain and scale results, and discuss next steps. In a cohort, all teams will travel to one location.	1.5 hours	1 day	Mid December
What's next workshop Half-day workshop held locally where system leaders hear from the 100-Day Team and determine what is next to ensure the sustainability and scaling of results	1 day	1 day	Late January

Governance and Escalation



SRO/Exec Lead	Nigel Acheson
Clinical Lead	James Wenman
LCP Exec Sponsor	Simon Tapley
Programme Lead	Katy Kerley
Delivery Partners	SW AHSN
	Optimus
	Reinstitute

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Building on our learning to create further transformation processes

Devon will learn from the UEC Programme experience and codify the learning into an approach which can be replicated to other programmes

Evaluation Approach

- The existing evaluation methods used as part of the 100-Day Challenge and Outward Mindsets will provide the data for learning
- 100-Day Challenge MEL approach provides data illustrating outcomes relating to performance specific to the 100-Day Challenge Goal, as well as evidence on transformational shifts within the system
- Those shifts focus on change in policies, practice, resource flows, relationships and connections, power dynamic and mental models
- The Outward Mindset evaluation will provide data outlining the influence of the approach
- The findings from both will be fed into a Learning and Scale report, synthesised by the SW AHSN
- The purpose of the Learning and Scale report is to set out how a similar programme could be delivered in the future and what ingredients and shifts might be required
- The report will not be an academic evaluation of the but will rather record outcomes and observations from both 100-Day Challenge and Outward Mindsets, noting instances of how these may influence the wider transformation programmes
- Consideration of scaling of the approach and emerging innovations will also be addressed in the report
- The learning and scaling report will "codify" the data collected against the Devon ICB “5 Opportunity Areas”, thus aligning the learning to core elements of the ethos of the transformation programme

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100 Day Challenge – Areas of Focus

- Following 40 1:1 'Discovery calls' with Senior Leaders working in or supporting improvements in Urgent Care in Plymouth, a number of key challenges were identified which could be supported through 100- day challenge methodology
- During a design session with Senior Leaders the numerous challenges were discussed and the following 3 were identified to reflect priority programme areas that would be supported by the 100-day challenge approach:

    1. Tackling avoidable admissions from falls
    2. Tackling avoidable admissions at End of Life
    3. Improving care for people with long-term health conditions

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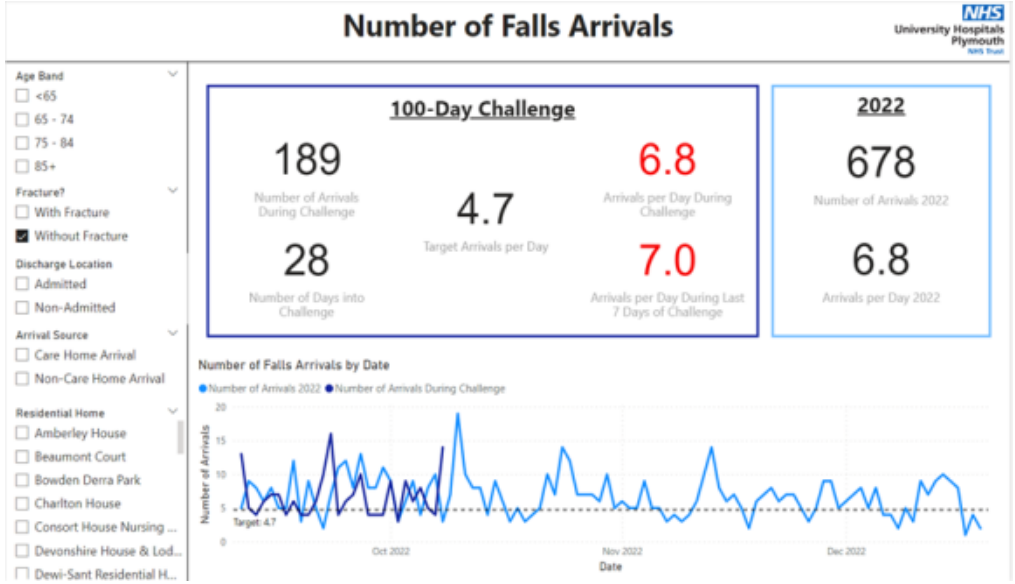
100 Day Challenge - Falls

Goal: to increase the number of people aged 65+ who remain in the community after a fall without injury by 30%

Highlights:

- Enthusiasm and commitment of the team
- High level of trust, inclusion and support
- Preventative information updated and processes strengthened to share with patients at an earlier stage.
- Acute Response Practitioners links with Acute GPs to progress onboarding to the Virtual Ward (progressed for falls but added value for other conditions)
- Agreement in principle to streamline therapy section of the SAP



Learning:

- The outward mindset and 100-day approach promoted engagement
- Depended on team members going the extra mile and impacted on capacity
- Challenges finding headspace to innovate
- Managing competing priorities at different levels, from different initiatives, directives and organisational perspectives.
- Availability of data and challenges around co-ordinating data from different organisations and sources to evidence impact and outcomes

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100 Day Challenge – End of Life

Goal: To support more people to have a good death in their care home and reduce number of patients at EoL by 10% coming to ED from top 10 conveying care homes

Highlights:

- 11 Homes in audit (9 home visits completed). 3 visiting teams.
- Questions asked and information collected
- Information given, advice and education provided, as part of visit:
  - Use and function of Immedicare
  - Support network availability
  - Education offers across patch
  - Highlighting need to update TEP

Learning:

- Opportunity to access services via a specialist Care Home based service would support to avoid long admissions
- Further work to improve engagement with digital platforms (many homes primarily paper based). Poor awareness of systems such as DCCR, poor access to hardware
- TEP quality varies and are completed by a range of practitioners, and this may dictate the overall quality (closer to home TEPs higher quality)
- PCN support is not uniform in its approach to care home resident support; care homes value highly PCN input. Some homes receive an ‘on demand’ service with others receiving a proactive service
- Vast majority of homes have excellent working relationship with DNs
- Low evidence to suggest systemic EoL training being offered/supplied to all staff, but an appetite to engage with education programmes

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100 Day Challenge – Long Term Conditions

Goal: to improve care for over 50 people with long-term health conditions, enabled by using integrated information systems in Plymouth.

Highlights:

- Recognition that original idea to use System One as an integrated digital platform was not going to be achieved in 100 days and adapting our approach
- Speed and engagement at which professionals have taken to using the 'Joy app' - The Joy app allows communications between primary and secondary care with VCSE services. It is a quick referral system and allows a feedback loop, electronic communication between all sectors.to support referral processes between providers and Voluntary sector partners.
- New connections with team from Joy app, Pathfields, Livewell, Improving Lives. Better relationships between Improving Lives and Long-term conditions/ Complex Lives teams at Livewell
- Mindset Shift: Thinking of community provision as an option to support people to improve their health & wellbeing in another way.
- The work has felt collaborative and proactive and looking when exploring different options/approaches
- Benefits to patients by providing a more holistic approach in supporting a long-term condition because it looks at all aspects of a patient's life and not only health

Learning:

- Opportunity to Increase the scope of JOY App system – broadening licences to include case management system across partners to improve digital interoperability
- Information Governance challenges identified through working across system partners, these take significant time and energy to resolve

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