Community Collaboration....

...Connecting Care
Aims and Objectives

Improving physical and mental health outcomes through collaboration

**Improved relationships**
- Building on existing relationships and developing new connections between primary care, community services and third sector

**Care at home**
- Delivery of more care within people's homes and community. Improved access to appropriate professionals and wider community partnerships

**Proactive approach**
- Empower and support people to self manage long-term conditions. Collaborative and proactive approach to prevent avoidable admissions and facilitate hospital discharge

**Technology**
- Embrace agile technology to support integrated care, inclusive of those who use the services, align working practices and objectives, supported by population health tools and AI

**Workforce plans**
- Extend skills and increase the capacity of integrated teams to better meet local population needs and improve outcomes

Utilise and manage local geographic population health tools
Target the workforce and reduce emergency admissions and unplanned attendances
Community Collaboration – the journey to date

- January 2020 - BCA/BDCFT Community Collaborative Proposition approved by Bradford Health and Care Partnership Board

- Secured RIC funding to develop proactive care model

- 27th February – Improvement workshop representation from 3 PCN’s (WACA/WISSH/Affinity), BDCT and VCS. Current and future state identified and project plans starting to develop

- May 2020 – reconnection with PCN’s, delay due to COVID. Confirmed project plans and steps required for progression

- Attendance at the PCN Clinical Advisory Board
  - Enhanced Health in Care Home actions to be implemented across the district, work required to begin to align District Nursing teams. Alignment of GP’s to care homes

- Currently 3 distinct projects with WISSH/WACA and Affinity Working group established within south 7 CP9 (BD4) recruited to care coordinator role and looking to develop the MDT huddle function

- Development of a mental health role to link into each PCN providing advice and consultation
The journey to date - Pilot updates

**WISHH**
Established a weekly MDT huddle building on the proactive care pilot. This is a system discussion at PCN level regarding concerns relating to care homes and complex/housebound patients. A focus on responding to escalating needs. A dashboard currently in development to support tracking.

**AFFINITY**
Starting to implement MDT huddles, primarily with community matrons and primary care, to incorporate Mental health. Focus around complex patients. Expected benefits include a reduction in home visits, reduction in duplication and a sharing of caseload responsibility.

**WACA**
WACA established a working group to develop MDT huddle and understand gaps in service to fulfil EHICH requirements. Other areas of work identified including: care planning, file sharing and engagement with the care homes. Initial MDT scheduled 24.09.20.

**South 7**
Improvement session to generate ideas on how to proceed with the MDT huddle, particular focus around care homes. Developing the weekly ward round within care homes. To scope the roles of each professional with regards to the acute and elective care elements.
Operational Plan

Development of the operational plan that will support the BDCT staff alignment to the PCN'S. Support more systematic involvement and integration of the third sector

Governance and measures

Mechanisms for programme oversight with appropriate membership
High level metrics to measure success and demonstrate impact

Communication

Meaningful engagement with staff
Robust communication plan to include engagement sessions

I.T Infrastructure

Appropriate platform to connect virtually, consideration of MS Team
System1 – the need for all staff to be on a single system

To be considered
Next Steps

Objectives
To agree the system aims, scope and objectives, with key milestones identified.
Finalise and agree business objectives

Agreement – October 2020
Finalise and agree scope and content of the partnership agreement across BDCFT, primary care and the third sector.

Communication - November 2020
Develop and initiate joint communications plan setting out the operational plan

Business Plan – December 2020
Develop a comprehensive joint business plan to support ambitions