# HSJ VALUE AWARD OF THE YEAR

# **WINNERS**

# KENT AND MEDWAY NHS AND SOCIAL CARE PARTNERSHIP TRUST

# VOCATIONAL REHABILITATION SERVICE INCLUDING THE JOB TASTER PROGRAMME

Just one in four people suffering from a long-term mental illness are in work. Mental health problems at work cost our economy £34.9bn with a cost to business of £26bn each year. The service offers support to people with complex mental health to achieve their employment goals with hope, optimism and confidence. The Vocational Rehabilitation Service is occupational therapy-led and forms part of core community services. The multidisciplinary service includes a 12 week job taster programme.

## **JUDGES COMMENTS**

The judges said this was an outstanding and engaging presentation that made good use of patient stories. The project is about facilitating an early return to work for patients with long term mental illness. They exceeded their target of supporting 120 people back to work and reported good outcomes in terms of self-esteem and improved mental health. Overall the project has helped nearly 300 people, many of whom have provided testimonials about the impact on their lives and recovery. Information about the project has also been well disseminated, through publication by the Royal College of Occupational Therapists, a presentation to MPs, and numerous other communication channels.

## **HIGHLY COMMENDED**



# **Greater Manchester Urgent Primary Care Alliance (in collaboration with NWAS and the GMHSCP)**

## **Clinical Assessment Service Pilot**

(Early March 201, 90-day pilot)

6,102 low acuity, NWAS 999 cases were electronically sent to an Alliance of Urgent and Primary Care providers (using one integrated Patient System- Adastra) for Clinical triage, signposting, and treatment under a pan GM, 24/7 Clinical Assessment Service.

Any cases not closed at advice, or appropriately escalated within 999 (post triage), were dealt with by the locality specialist Alliance partner member or forwarded via an onward specialist community or secondary care referral. The CAS has positively impacted NWAS conveyance and 'hear and treat' rates, Acute non-elective admission rates and system flow for patients in GM.

## **JUDGES COMMENTS**

The judges saw this as a very good example of working in partnership to achieve good outcomes for the benefit of the patient. It was a detailed presentation with the aims of the project clearly laid out, and a real change in the conveyance rate was demonstrated. They felt that financial savings alone justified the success of the project, but the improvement in quality for patients, reduction in A&E attendance, and release of ambulance time is even more important.



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# **FINALISTS**

#### **Bolton FT**

**Bolton Combined Deflection Scheme** 

The Admission Avoidance Team (AAT) and Home First Team (HFT) work across the community and urgent care footprint of Bolton NHS Foundation Trust to deflect unnecessary admissions to hospital. Both teams are multidisciplinary and work together with stakeholders including Primary Care, North West Ambulance Service (NWAS), Commissioners, Local Authority and the Community and Voluntary Sector. The teams respond to patients over 18; in physical or social crisis in the community or have presented to the Emergency Department (ED) and can be safely managed at home with or without support. The teams main cohort of patients are aged over 65.

### **Bristol, North Somerset and South Gloucestershire CCG**

Reducing unwarranted variation in primary care chronic disease

The aim was to reduce over-testing in primary care for chronic disease monitoring across Bristol, North Somerset and South Gloucestershire (BNSSG). Over-testing increases staff workload, wastes patients' time and causes patient and staff anxiety.

The BNSSG CCG Clinical Effectiveness Team standardised the blood tests by working with local GPs, a practice nurse and biochemists from our three hospitals to redesign this important area of care.

BNSSG serves a population of 1 million people who live in urban and rural areas and has 83 GP practices that have 923 GPs, 488 nurses, 182 HCAs and 41 phlebotomists between them.



## **Croydon CCG Spreading Group Consultations**

**NHS Croydon Clinical Commissioning** Group is supported GP practices to introduce group consultations for a range of long-term conditions. The Brigstock and South Norwood Medical Partnership and Parchmore Medical Practice serve a diverse Black and Minority Ethnic (BME) and Eastern European community in Thornton

Health, and have introduced group consultations to support people with pre-diabetes, diabetes and COPD. Brigstock have followed up 60% of their 1,054 patients with Type Two Diabetes in group clinics, measuring positive outcomes, quality and efficiency gains for the team, patients and the practice. This evidence is now supporting design of a local commissioned service.



East Kent Hospitals University FT, **Ashford CCG and Health Navigator** Performance evaluation of an NHS commissioned service (Health Navigator) in East Kent

East Kent Hospitals University sought to evaluate the health economic

impact of HN Clinical Coaching CARE. Delivered by health-tech company, HN, this Al-guided service identifies high-cost, high-need patients and inducts them onto a nurse-led proactive health coaching programme, to avoid future unplanned admissions. Our East Kent NHS team analysed the impact of this service on the Trust and health economy, including activity impact, cost effectiveness, mortality, QALY, and ICER. The project was open, transparent, and brought together private, acute and commissioner organisations, sharing information and creating a scientific methodology to evaluate a service - a model for future commissioning and evaluation.



Mid Essex CCG and All Saints' Church of England Primary School, Maldon The Maldon Up project intergenerational interaction that builds wellbeing and community

Maldon Up emerged from a series of visits to a local care home by children at a primary school within Mid Essex CCG's footprint. Many of the residents at Longfield Care Home in Maldon have dementia, and All Saints' CofE Primary School pupils began visiting them for an afternoon a week. The CCG became aware through a staff member's connection to the school and recognised the possible benefits to those involved.

The CCG supported a crowdfunding exercise to keep the project running while Anglia Ruskin University conducted a proper evaluation that would facilitate a wider rollout of the scheme.







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### **North Tees and Hartlepool FT**

Quality Improvement through Efficient & Cost Effective use of Medicines

NTH annual expenditure on medicines is over £15 million. Getting best value for medicines is core business of Pharmacy teams, through significant collaboration with multidisciplinary team of senior medical/nursing/finance/commissioning teams.

Effective leadership has led to organisational savings of £2.4 m against an allocated target of £1 m. Savings contributed towards financial sustainability and improving patient care e.g. increased medicines safety practices, purchase of scanners to improve waiting list.

Additional system-wide £11 m efficiency savings have been achieved for the region (North east and North Cumbria) through hosting regional medicines procurement team, and successful collaborative work with the Commercial Medicines Unit.



#### **Royal Free London FT**

Improving Joy at Work - Electronic Self Rostering

Turnover for nurses and midwives was high across the Trust but highest in the intensive care units. A quality improvement project was undertaken

to understand the reasons why.

Staff focus groups identified flexibility and choice regarding shifts would improve work-life balance, promote roster fairness and increase their joy at work.

The implementation of electronic self rostering was key to offering staff shift flexibility and choice. This new way of working improved communication, enhanced staff work life balance, released time to care and improved staff recruitment and retention leading to safer patient care.



Tameside and Glossop Integrated Care FT, Tameside Metropolitan Borough Council and Tameside & Glossop CCG

CARE TOGETHER - an integrated approach to health and care in Tameside & Glossop to improve population health

Our 'Care Together' Programme is an innovative, whole health and care system programme to transform the way in which services, care for, involve and support the 250,000 residents, to improve health and wellbeing, as well as supporting financial sustainability.

The programme has involved behavioural transformation to deliver new ways of working whilst delivering system transformation. With the Local Authority and CCG coming together to become a strategic commissioner of services and the local Acute Trust becoming the first Integrated Care FT in England, responsible for delivery of integrated health and social care services for the Tameside and Glossop population.

