

– Maximising Independence through supportive technology (MIST)

<p>Background</p>	<ul style="list-style-type: none"> • BCCG, CBC and BBC are in the process of jointly developing a new model of community care. 2016/17 is a transformation year and the MIST service will be the foundation stage of the new integrated community care support service across Bedfordshire targeted at prevention and proactive interventions. • The 2016/17 financial year will deliver the planning and commencement of procurement for the service to go live in April 2017 for a telephonic Centre staffed by clinical staff linked to outreach resources housed within MDTs • Model delivers proactive healthcare coaching and access to interventions through telephone and outreach services. • The model is based around the very high and high risk of admission to hospital patient population (22,500) and would seek to reduce unnecessary admissions into hospital by managing conditions closer to home. 		
<p>Objectives</p>	<p>To develop, agree and mobilise the plan to meet the following objectives in 2017/18</p> <ul style="list-style-type: none"> • Reduce fragmentation across services for patients • Improved patient experience/satisfaction and independence • Reduce hospital admissions and pressure on primary care • An increase in confidence of patients who become more independent through proactive interventions through coordinated health and social care • A single point of access 24/7 service for the patient cohort 		
<p>Scope</p>	<p>Within Scope</p>	<ul style="list-style-type: none"> • Patients at the very high and high risk of admission to hospital in Bedfordshire • Awaiting agreement as to whether the BBC assistive technology service will be in scope • Awaiting agreement as to whether the BBC lifestyle hub will be in scope 	
	<p>Outside Scope</p>	<ul style="list-style-type: none"> • Patients not in the very high and high risk of admission to hospital. 	
<p>Constraints</p>	<ul style="list-style-type: none"> • Patients not in the very high and high risk of admission to hospital. 		
<p>Assumptions</p>	<ul style="list-style-type: none"> • Investment for the project will be agreed. • Patients will engage with the programme • Information governance will not be a barrier to sharing information 		
<p>Risks</p>	<ul style="list-style-type: none"> • Delay in sign off for the procurement process • Shortage of resources to deliver the objectives for the project • Recruiting a workforce with the right skills • Sign off and funding for the project is yet to be confirmed 	<p>Mitigation</p>	<ul style="list-style-type: none"> • Process monitored and supported by CHS Steering Group • MIST closely aligned to MDTs • Priority within workforce development plan • Project will be part of transformation of CHS
<p>Deliverables</p>	<p>A developed model of care for the MIST – May 2016 To set up and deliver a successful procurement process for the MIST – Complete by Nov 2016 To have in place a mobilized plan to deliver the following in 2017/18</p> <ul style="list-style-type: none"> • Reduced unscheduled admissions to hospital – March 2017 • To have a 24/7 service in place – April 2017 		
<p>National Conditions</p>	<ul style="list-style-type: none"> • Investment in Out of Hospital NHS Services • IT & better data sharing between NHS and Social Care • 7 day working – reducing unplanned admissions 		<p>National Metrics</p> <ul style="list-style-type: none"> • Reduction in unplanned admissions for those receiving MIST support.