

Appendix 1

BCF

Prevention and early intervention	Delivering integrated and improved outcomes through Out of Hospital Services	Integrated Health and Care Hubs	Enhanced Care in Care Homes	High Impact Change Model
Expansion of telehealth/telecare services	Embed Multidisciplinary approach	Commission scoping and Strategic Outline Case documents	Trusted Assessor model	Early discharge planning
Implementation of Social Prescribing	Primary Care Home	Commission Outline Business Cases (OBCs)	Red bag scheme	Systems to monitor patient flow
OOMP physical activity programme	Discharge Planning, Single Trusted Assessor approach, Single Point of Co-ordination approach	Procurement and construction of Hubs.	Medication reviews to reduce inappropriate polypharmacy	Multi-disciplinary/multi agency discharge teams
Falls Prevention training for Extra Care Homes	Integration rehabilitation & reablement	Development of interim "Hub" virtual/estates solutions	Complex care support	Home First/Discharge to Assess
Implementation of a falls pathway	Develop integrated care pathways	Review plans with CBC Local Development Plan	Care home staff training	Seven Day service
			Care home digitisation, Airdale model scoped	Trusted Assessor
			Enhancing health in care homes	
			Focus on Choice	

Central Bedfordshire Place Based Transformation Programme

OOH Strategy (indicative schemes)

Strengthening and Transforming the General Practice Model	Expanding the range of OOH Services	Strengthening multidisciplinary working to support frail and complex patients	Enablers
Extended access to primary care	Enhanced services delivered by clusters	Rapid Intervention Team	Record sharing/shared health and social care record
Home visiting model	MDT development	A&E Streaming	IM&T inc. remote monitoring and risk stratification
Same day access	Bringing planned care OOH	Enhanced care home model	Hub scoping and development
GP Resilience	Community diagnostics	Discharge to assess, discharge planning	Workforce development
High Impact Actions	CHS mobilisation	111/out of hours integration with OOH services	Leadership and OD
Delegated Commissioning	Single Point of Access	Complex care	

CISP

Transitions of Care	Complexity of Care	Primary Care Home	Paediatric non-elective
Standardised Discharge Process	Digitalisation Strategy	core support "offer" to practices	Bronchiolitis Action Plan
5Q Care Test	Medication Reviews	Implementation Plan	
BLMK Discharge Framework	Care Planning	Engagement with localities and clusters on benefits of the model	
	Training Needs Assessment	Support to apply for NAPC Programme	
	In and out of Hours assessment	Production of process controls and impact measures	

Work streams:

Primary Care Transformation ●

Supporting frail and complex patients ●

Developing IM&T ●

Embedding multidisciplinary working ●

Developing workforce and new roles ●

Hub development ●