## ANNEX B

| ORCP 2015/16                                    |               |               |             |  |
|---|---------------|---------------|-------------|--|
|   | Frimley North | Frimley South | Total       |  |
|   | £             | £             | £           |  |
| FUNDING ALLOCATION                              |               |               |             |  |
| Bracknell & Ascot                               | 224,000       | 507,000       | 731,000     |  |
| Slough  | 824,000       | 2,000         | 826,000     |  |
| Windsor, Ascot and Maidenhead                   | 766,000       | 25,000        | 791,000     |  |
| TOTAL   | 1,814,000     | 534,000       | 2,348,000   |  |
| EXPENDITURE                                     |               |               |             |  |
|   | Frimley North | Frimley South | Total       |  |
|   | £             | £             | £           |  |
|   |               |               |             |  |
| Frimley Health NHSFT - 2nd Tranche (April 2015) |               |               |             |  |
| B&A   | (27,851)      | (33,660)      | (61,511)    |  |
| Slough  | (34,617)      |               | (34,617)    |  |
| WAM   | (34,617)      |               | (34,617)    |  |
| Committed                                       |               |               |             |  |
| Alamac  | (120,000)     |               | (120,000)   |  |
| GP Discharge Liaison at WPH                     | (142,820)     |               | (142,820)   |  |
| Less: Chiltern contribution                     | 36,000        |               | 36,000      |  |
| Schemes Recommended for Approval (Appendix 1)   | (997,530)     |               | (997,530)   |  |
| Schemes Recommended for Approval (Appendix 2)   |               | (508,000)     | (508,000)   |  |
| TOTAL EXPENDITURE                               | (1,321,435)   | (541,660)     | (1,863,095) |  |
| BALANCE REMAINING                               | 492,565       | -7,660        | 484,905     |  |

| ,  | Wexham SRG 2015/16 ORCP schemes  Organisation   Scheme   Details   SRG Decision   Fu |                         |   |  |                    | Score |
|----|--|-------------------------|---|--|--------------------|-------|
| ,  | Organisation   | Scrieme                 | Details   | Skg Decision   | Funding<br>Request | Score |
|    |  |                         |   |  | £                  | total |
|    |  |                         |   |  |                    | score |
| DS | RECOMMEN   |                         |   |  |                    | 100   |
|    | CCGs   |                         | This scheme intends to audit and test the process of transforming key elements of the DoS ahead of the winter   | Funding Recommend by SRG<br>This scheme will enhance flow through the hospital                                       | 20,000             | 80    |
|    |  | and update              | period to ensure that we confident that NHS 111 is able to  |  |                    |       |
|    |  |                         | appropriately direct patients through the winter period.  Chiltern contribution expected to be £2,500   |  |                    |       |
|    |  |                         |   |  |                    |       |
|    |  |                         |   |  |                    |       |
|    | RBWM   | STS&R                   | This funding would support redesign of STS&R enhancing<br>and targeting services that will incorporate a number of  | Funding Recommend by SRG. This scheme will enhance flow through the hospital   | 110,000            | 79    |
|    |  | Developme<br>nt.        | the positive benefits previously piloted during periods of short term winter pressures funding, enabling greater  |  |                    |       |
|    |  |                         | service resilience and capacity to withstand the  |  |                    |       |
|    |  |                         | anticipated additional demand due to seasonal<br>pressures. The service will play a key role in supporting  |  |                    |       |
|    |  |                         | the agenda for change set out the Collaborative Care for<br>Older Citizens (COCC) and work with the enhanced 7 day  |  |                    |       |
|    |  |                         | service delivery model set out in the Prime Ministers   |  |                    |       |
|    | BHFT   |                         | Challenge Fund which will be available to RBWM  The proposal is to fund 1x Band 5 Community Staff Nurse, 5  | Funding Recommended by SRG.  | 21,079             | 75    |
|    |  | Community               | days a week to support Community Matrons in the<br>management of patients with Long Term Conditions. The  |  |                    |       |
|    |  | Matron                  | patients would continue to be "overseen" by the<br>Community Matron but a community staff nurse could   |  |                    |       |
|    |  |                         | provide the more supportive and routine interventions   |  |                    |       |
|    |  |                         | needed, thus releasing capacity for the Community Matrons to develop, implement and monitor the   |  |                    |       |
|    |  |                         | escalation plans of the more complex patients. In addition this role would release capacity for Community   |  |                    |       |
|    | RBWM   | total                   | All schemes as highlighted detailed table include support   |  | 151,000            | 72    |
|    |  |                         | for discharge and community schemes to avoid admission  | This scheme will enhance flow through the hospital   |                    |       |
|    |  |                         |   |  |                    |       |
|    | SBC  | social                  | Additional social work cover for the continuity of hospital   | Funding Recommended by SRG   | 150,000            | 72    |
|    |  | worker                  | discharges and throughput out of the RRR service<br>Additional reablement assistants and additional   | This scheme will enhance flow through the hospital   |                    | ĺ     |
|    |  | cover and<br>additional | external domiciliary care capacity to carry out additional reablement activity and domiciliary care placements  |  |                    | ĺ     |
|    |  | reablement              | (admission prevention and discharge facilitation)   |  |                    |       |
|    |  | capacity                |   |  |                    |       |
|    | Thames<br>Valley   | Carer<br>Capacity       | There are often delays in ours and Wexham Park Hospitals ability to discharge people home, due to, lack of care   | Funding Recommended by SRG  This scheme will enhance flow through the hospital                                       | 40,000             | 63    |
|    | Hospice  | Capacity                | availability. Currently, care is commissioned from local authorities for people with a prognosis of less than 6   |  |                    |       |
|    |  |                         | weeks who should be prioritised in order to facilitate  |  |                    |       |
|    |  |                         | discharge. Unfortunately all too often this is not the case.<br>The impact of this is not only an inability to discharge  |  |                    |       |
|    |  |                         | people and therefore utilise much needed capacity for other people who need admission into the Hospice or   |  |                    |       |
|    |  |                         | Hospital, but most importantly an inability to meet   |  |                    |       |
|    |  |                         | people's wishes to die at home. This scheme will provide<br>an additional 136 hours per week of End of Life Care in   |  |                    |       |
|    |  |                         | patients own homes to facilitate discharge from Thames<br>Hospice/Wexham Park Hospital and improve patient and  |  |                    |       |
|    |  |                         | family experience. This will enable the Hospice at Home team to provide comprehensive end of life care at home  |  |                    |       |
|    |  | 0                       | for an average of 3 people per week. These people may be  | Funding Recommended by SRG   | 45.000             |       |
|    | Thames<br>Valley   | Outreach<br>Nurse       |   | This scheme will enhance flow through the hospital   | 45,000             | 58    |
|    | Hospice  |                         |   |  |                    |       |
|    |  |                         |   |  |                    |       |
|    |  |                         | To increase the number of palliative care outreach nurses who will work alongside the palliative care team in   |  |                    |       |
|    |  |                         | Wexham Park Hospital, supporting them in the utilisation of Thames Hospice and the Community Palliative Care  |  |                    |       |
|    |  |                         | Team referral criteria  |  |                    |       |
|    | FHFT/BHFT  | Respiratory             | An additional Band 6 Nurse to work as part of the COPD admission avoidance team, increasing their capacity to be  | Funding Recommended by SRG, with the following requirements:- This bid is agreed for funding with the                | 52,214             | 81    |
|    |  | project                 | able to deliver the admission avoidance service over the winter period when demand is generally higher.   | following caveats:<br>The scheme must work across all CCGs including Bracknell                                       |                    |       |
|    |  |                         | Band 6 Physiothera pist would work as part of the specialist respiratory physiotherapy service providing:   | & Ascot, Slough & WAM. The bid must be signed off by the integrated adult  |                    |       |
|    |  |                         | A prompt service to patients who require sputum   | respiratory services project group, acts as the first phase of   |                    |       |
|    |  | 1                       | clearance especially those exacerbating but also a wide range of patients who require specialist respiratory input  | recruitment and is seen to be a FHFT/BHFT integrated scheme.   |                    | ĺ     |
|    |  | 1                       | for sputum clearance e.g. Motor neuromuscular conditions.  • Help to patients who need assistance with breathing  |  |                    | ĺ     |
|    |  | 1                       | control expanding to provide some anxiety management  |  |                    | ĺ     |
|    |  |                         | with breathing techniques.  • Home exercise programmes to those who are unable to   |  |                    |       |
|    |  |                         | attend pulmonary rehabilitation to introduce them to the importance of exercise.  |  |                    |       |
|    | BHFT   | Registered              |   | Funding Recommended by SROG following further  | 63,237             | 63    |
|    |  | Nursing                 | demand through the employment of three registered<br>nurses who are coming to the end of fixed term contracts,  |  | 03,237             |       |
|    |  | Capacity                | covering substantive local staff secondments. This is a   |  |                    | ĺ     |
|    |  | uplift                  | stretched service because of local demography and this recruitment will help secure service levels for next six   |  |                    | ĺ     |
|    |  |                         | months, during the winter period, when demand is anticipated to increase further, thus securing capacity to   |  |                    |       |
|    |  |                         | support prevention of avoidable hospital admissions and   |  |                    |       |
|    | BHFT   | Enhanced                | delays to discharge.  A Saturday Advanced Nurse Practitioner (ANP) Clinic 10:00 –   | Funding Recommended by SROG following further  | 245,000            | 77    |
|    |  | RACC                    | 16:00 with GP cover.<br>Increase in Monday-Friday Advanced Nurse Practitioner   | discussions on 22/9/15 and no developments presented at<br>meeting in respect of MUDAS model. Also further           |                    | ĺ     |
|    |  | 1                       | Clinics and domiciliary visits  | information have been provided that indicates that if this additional funding is not agreed it would jepodise the    |                    | ĺ     |
|    |  | 1                       |   | B&A RACC scheme. Both B&A and WAM Urgent Care leads  |                    | ĺ     |
|    |  | 1                       |   | support this additional funding. Further work required by<br>Care of Elderly workstream reqarding future RACC model, |                    | ĺ     |
|    |  |                         |   | also further discussions required with Slough regarding their requirements and linkage with any model proposed       |                    |       |
|    |  |                         |   | by acute Trust   |                    | L     |
|    |  | GP in                   | The scheme builds on Slough Prime Ministers Challenge<br>Fund initiative last winter which piloted the inclusion of   | Frimley health currently looking at model and not available for consideration at SROG. Agreed to hold £100k          | 100,000            | 76    |
|    | ey Health  | EDDU/Now<br>MUDAS       | experienced GP support at the front end of the Emergency  | for possible scheme development with Slough CCG  |                    | ĺ     |
|    |  | Model                   | Department, to support senior decision making and review. The pilot suggests that admission avoidance,  |  |                    | ĺ     |
|    |  |                         |   |  | I                  | l     |
|    |  |                         | earlier discharge and supported alignment of some   |  |                    |       |
|    |  |                         | pathways can be achieved with support from experienced GPs. Chiltern contribution expected to be £25,000.   |  |                    |       |
|    |  |                         | pathways can be achieved with support from experienced  |  |                    |       |
|    |  |                         | pathways can be achieved with support from experienced GPs. Chiltern contribution expected to be £25,000. Following discussions at SRG Frimley Health reported that |  |                    |       |

| Frimley South SRG        |   |                                     |
|--------------------------|---|-------------------------------------|
| Lead Provider            | Scheme  | Planned B&A<br>spend for<br>2015/16 |
|                          |   | £                                   |
| B&A CCG                  | Communications mailshot and GP as Providers   | 30,000                              |
| B&A CCG                  | Medicines   | 0                                   |
| B&A CCG                  | Processes to minimise delayed discharge and good practice on discharge - voluntary sector   | 36,000                              |
| BFC                      | Reach further to prevent flu and pneumonia in the population with particular attention to residential homes and carers              | 20,000                              |
| Berkshire Healthcare FT  | Seven day working arrangements- BACCG   | 36,000                              |
| Bracknell Forest Council | Improve services to provide more responsive and patient-centred delivery seven days a week  | 70,000                              |
| Bracknell Forest Council | Seven day working arrangements  | 150,000                             |
| Bracknell Forest Council | Social isolation is a major problem for older people and can adversly affect their health and well being                            | 10,000                              |
| Bracknell Forest Council | To reduce the need for urgent hospital admissions for people with dementia who have an infection/short term physical health problem | 50,000                              |
| SCAS                     | Ambulance contribution  | 21,000                              |
| Southern health          | Psych liaison   | 40,000                              |
| TBC                      | Top slice for SRG management  | 45,000                              |
|                          |   | 508,000                             |