OPS Workstreams Post Decision
October 2024

The information below sets out the initial list of post consultation workstreams – this will be developed further over in late 2024 as the programme moves into the operational planning and delivery phase.

These are informed by the drivers for change identified in each impact assessment – see table below.

Estates
Crofton Development work
Improvements on ward 19
Poplars site

Workforce and operational delivery
Staff consultation
Staffing up / recruitment
Transition to new model

Training and Skills
Training programme for dementia staff
Training programme for functional staff

Pathways and new ways of working
Social care and other partners ways of working
SWYPFT Teams alignment with new ward structure and ways of working

Clinical pathways on the wards
Clinical pathways and ways of working on the dementia ward
Clinical pathways and ways of working on the functional ward
Review of pathways / process when people from our wards admitted to general hospital

Travel and Transport
Implementing visitor support pathway
Systems to track usage and impact
Aligning with combined authority over system travel improvements

Outcomes and Benefits
Review and update benefits framework
Tracking delivery of benefits (could form part of each work strand).
Review and update of impact assessments (EIA, QIA, SIA, TIA)

Alignment with Trust Strategy:
Across these workstreams we will evidence alignment with the Trust strategy including the following key drivers:

- Providing the best quality services
- Being the best place to work and learn
- Being the best partner
- Providing the best value

Drivers for change:

Workstream	Strands	Equality Drivers	Quality Impact Assessment Drivers	Other impact drivers
Estates	Crofton Development work	Ensure estate facilities for carers are planned in to any developments – this includes seating areas, access to food and refreshments. Wudu; decor, food. Transgender policy and engagement in design; gender neutral facilities; faith spaces, child baby friendly waiting areas; disability needs	QIA – A model with the best specialist ward environments to support people with design of the environment for appropriate therapies and to support socialisation. e.g., dedicated socialisation for people with similar needs. Separate wards for functional / dementia: functional design principles Single sex accommodation.	SIA: estates strategy is to improve the energy efficiency of buildings and equipment as part of relocation and ensuring that all new buildings and refurbishments meet sustainability standards. Waste management improvements.
	Improvements on ward 19	Lack of e/s at W19 Ensure estate facilities for carers are planned in to any developments – this includes seating areas, access to food and refreshments. Wudu; decor, food. Transgender policy and engagement in design; gender neutral facilities; faith spaces, child baby friendly waiting areas; disability needs	QIA – A model with the best specialist ward environments to support people with design of the environment for appropriate therapies and to support socialisation. e.g., dedicated socialisation for people with similar needs. Lack of e/s on W19 and dementia design principles. Gender flex	
	Poplars site	Staff travel impact across different demographic groups.	Challenges identified with safely managing the isolated site.	SIA bringing the Poplars service into the Fieldhead site would support some streamlined pharmacy processes. There are regular journeys to the site to deliver medicine and pharmacy staff visits. There is also an expanded medicines stock list required and held on site due to the Poplars isolation. Reducing IT infrastructure.
Workforce and	Staff consultation		Staffing to appropriate levels, in line with clinical need to support safety.	

Workstream	Strands	Equality Drivers	Quality Impact Assessment Drivers	Other impact drivers
operational delivery	Staffing up / recruitment	Ensure staff reflect the population – proactive recruitment from the community.	Staffing to appropriate levels, in line with clinical need to support safety.	
	Transition to new model	Sexual orientation: Staff rainbow lanyards, flags, posters.	Staffing to appropriate levels, in line with clinical need to support safety	
Training and Skills	Training programme for dementia staff		Staff skilled and delivering specialist support to each group based on evidence based best practice and tailored therapeutic care. QIA Identifies benefits in separating the services out and having a specialist dementia ward and the staffing of it, you can get the correct staff training/skills in place.	
	Training programme for functional staff		As above.	
Pathways and new ways of working	Social care and other partners ways of working	Identify advocacy support that specialises in the support of trans people.	Accessible services for partner organisations such as acute general hospitals, social care and advocacy. Aim to improve pathways to reduce length of stay.	
	SWYPFT Teams alignment with new ward structure and ways of working		Clinical and non-clinical support staff teams and services, across pathways to work together to deliver safe, effective care.	
Clinical pathways on the wards	Clinical pathways and ways of working on the dementia ward	Think about images in pictures, activities/ music and entertainment that considers diversity. Ensure the Trust transgender policy is considered in the design and development of services.	Will deliver positive outcomes of care and allow for implementation of evidence-based practice. That we have the right capacity in the system to meet the demand required, factoring in projected population increases.	

Workstream	Strands	Equality Drivers	Quality Impact Assessment Drivers	Other impact drivers
			Aim to improve pathways to reduce length of stay.	
	Clinical pathways and ways of working on the functional ward	Identify the offer under this option to respond to requests for patients with functional needs from Calderdale being admitted to a single sex ward. Ensure the Trust transgender policy is considered in the design and development of services.	Will deliver positive outcomes of care and allow for implementation of evidence-based practice. That we have the right capacity in the system to meet the demand required, factoring in projected population increases. Aim to improve pathways to reduce length of stay.	
	General Hospital interface		Accessible services for partner organisations such as acute general hospitals, social care and advocacy.	
Travel and Transport	Implementing visitor support pathway	Review visiting times to meet the need of all age visitors. Ensure the carers passport is rolled out and supported. Promote the use of the 'Chatpad' to support contact for carers using a digital device. Identify a SOP to support travel for carers and monitor feedback so the approach is evaluated.	The service users, family and carers are able to access the service as needed.	SIA: use of chat pads to reduce travel; Active travel plan and green travel. TIA: Implementation of the visitor support pathway including: - Provide guidance on travel by the wards. - Ensure flexible visiting is adopted. - Offer digital solutions. - Factor in needs of carers - Ensure there is a failsafe / contingency in place for essential visitors such as carers / next of kin
	Systems to track usage and impact	Identify a SOP to support travel for carers and monitor feedback so the approach is evaluated.		
	Aligning with combined authority over system travel improvements		The service users, family and carers are able to access the service as needed.	- Ongoing engagement with combined authority to support wider system improvements.

Workstream	Strands	Equality Drivers	Quality Impact Assessment Drivers	Other impact drivers
Outcomes and Benefits	Review and update benefits framework	To consider all equality drivers and impacts identified and reflect in framework	To consider all quality drivers and impacts identified and reflect in framework	To consider all other drivers and impacts identified and reflect in framework
	Tracking delivery of benefits	Continue to ensure benefits are aligned to impact assessments.	Continue to ensure benefits are aligned to impact assessments.	Continue to ensure benefits are aligned to impact assessments.
	Review and update of impact assessments (EIA, QIA, SIA, TIA)	Continue to keep impact assessments relevant to drive change	Continue to keep impact assessments relevant to drive change	Continue to keep impact assessments relevant to drive change