



Winter Plan 2017-18

Integrated Joint Board
28th August 2017



Recommendations from 2016/17 Winter Plan



- Community-based prevention strategies to reduce admissions
- Expand ambulatory care services to reduce numbers of patients requiring admission
- Achieve and sustain increased morning discharges with a target of 30% by 11am
- Review and expand health and social care services accessible at weekends to ensure maximum effective discharges
- Restrict elective operating to daycases for first two weeks of January
- Present plans for surge beds, if required, for decision by end June 2017

Things that worked well last year

- BECS – delivered against 4 hour standard
- ED medical staffing - time to first assessment fell over winter
- Length of Stay for medical admissions fell
- Waverley Transitional Care Unit opened
- Flu vaccination (NHS) – amongst highest in Scotland
- Duty Team Role in BGH



Areas to work on (1): Emergency admissions 2015/16 – 2nd highest in Scotland



Emergency admissions per 100k population 2015/16

NHS Borders

12,488

NHS Scotland

10,571

Area	Current pressure/last winter	Actions
Respiratory Admissions	Increase by 30% over winter period	Ensure all known COPD patients have self-mgt plans
Nursing Homes	Observed increase in attendance/admission - need data	Ensure all patients have accessible Anticipatory Care Plan
Medical Admissions	Further increase no of patients seen in Acute Assessment Unit (AAU)	Expansion of AAU facility Increased opening hours
Surgical Admissions	No GP assessment or ambulatory care service	Establish Surgical Assessment Unit Establish Ambulatory care



Areas to work on (2): Access to beds



Winter 16/17 – 48% of EAS breaches due to wait for bed (60% in Jan 17)

Area	Current pressure/last winter	Actions
Morning Discharges	Averaged 13% over winter period	Focus on Discharge Lounge
Weekend Discharges	8 discharges less per weekend than equivalent weekday period	-Weekend AHP services -Discharge criteria
Surge beds	273 occupied beddays	MAU staffed to 30 beds BSU plan for 2 extra beds (no extra staff) Open 2 extra beds in CH (no extra staff) Out-of-hospital surge capacity



Areas to work on (3): Elective care Winter 16/17



- elective inpatient operating cancelled for 17 days during January.
- PSAU - inpatient area for 17 days.

Area	Current pressure/last winter	Actions
Inpatient operating	48 procedures cancelled (64 previous year)	Develop model of elective operating that maximises procedures but reduces bed requirement (e.g., single gender, single bay)
Daycase operating	31 procedures cancelled (63 previous year)	-Remodelling of PSAU and Ward 16 -Schedule daycase operating to prepare for contingency planning during January

Areas to work on (4): Delayed Discharges

Winter 16/17 – 9792 beddays lost to delayed discharges



Area	Current pressure/last winter	Actions
Rapid Access Homecare	27% of delayed discharge beddays waiting for homecare	Establish rapid access homecare team (staffed by healthcare support workers) in one locality as pilot
Delays to Assessment	728 beddays (7% of total) waiting for SW assessment	-Review START capacity -Establish 5 assessment beds in Waverley for complex assessment (discharge to assess)
Specialist dementia beds	633 beddays (6% of total) waiting for specialist dementia care	Establish additional dementia care home beds
Interim placement beds	2645 beddays (27% of total) waiting for care home place	Establish interim placement beds



Areas to work on (5): Staffing

Agency nursing spend winter 2016-17 was £544k



Area	Current pressure/last winter	Actions
Proactive recruitment	<p>Average 3.2 nursing vacancies over winter, however, additional staffing required for surge beds</p> <p>Spend on medical locums</p>	<p><u>Nursing</u> Staff MAU fully to 30 beds Active recruitment strategy</p> <p><u>Medical</u> Proactive recruitment of CDF posts to reduce risk of locums Recruitment to ED medical staffing</p>
Social Care	6.75 patients (25% of total) delayed waiting homecare over festive period	-- Commission homecare providers to staff over establishment for festive period and into January



Festive Period



Area	Current pressure/last winter	Actions
Staff according to predicted demand	<p>10% increase in ED attendances in 2016/17</p> <p>9% increase in emergency admissions in 2016/17</p>	<p>Staff ED to expected demand over festive period</p> <p>Ensure staffing for surge capacity</p>
Operate normal business in New Year public holidays	<p>17% increase in ED attendances</p> <p>15.3% increase in admissions compared to previous year</p>	<p>-- Commission homecare providers to staff over establishment for festive period and into January</p> <p>- Appropriate levels of cover from AHPs, SAS, Social Work</p>

Winter Plan Timeline

- 03/8/2017 NHS Board Development Session –Draft Winter Plan
- 28/8/2017 Integrated Joint Board – Draft Winter Plan
- **31/8/17 Submission of Draft Winter Plan to Scottish Government**
- 7/9/2017 NHS Strategy and Performance Committee Formal sign-off



- 23/10/2017 IJB Final Winter Plan
- 26/10/2017 NHSB – Final Winter Plan
- **31/10/17 Submission of Winter Plan to Scottish Government**



Any Questions?