

# Joint Winter Plan 2018/2019

**IJB August 2018**

**Gareth Clinkscale, General Manager Unscheduled Care**

A word cloud on a black background featuring various negative terms. The largest words are 'Stressful' (white) and 'Frustrating' (yellow-green). Other prominent words include 'Exhausting' (light blue), 'Pressured' (white), 'Challenging' (white), 'Demoralising' (light blue), 'Horrible' (white), 'Overworked' (yellow-green), 'Unsupported' (white), 'Disorganised' (yellow-green), and 'Dreadful' (light blue). Smaller words include 'Nightmare', 'Dangerous', 'Unappreciated', 'Tough', 'Depressing', 'Confusing', 'Tiresome', 'Lack', 'Tiring', 'United', 'Sole', 'Disillusioned', 'Annoying', 'Stress', 'Unsafe', 'Unmanageable', 'Understaffed', 'Uncertainties', 'Awful', 'Staff', 'Shortstaffed', 'Terrible', 'Uncares', 'Team-spirit', and 'Difficult'.

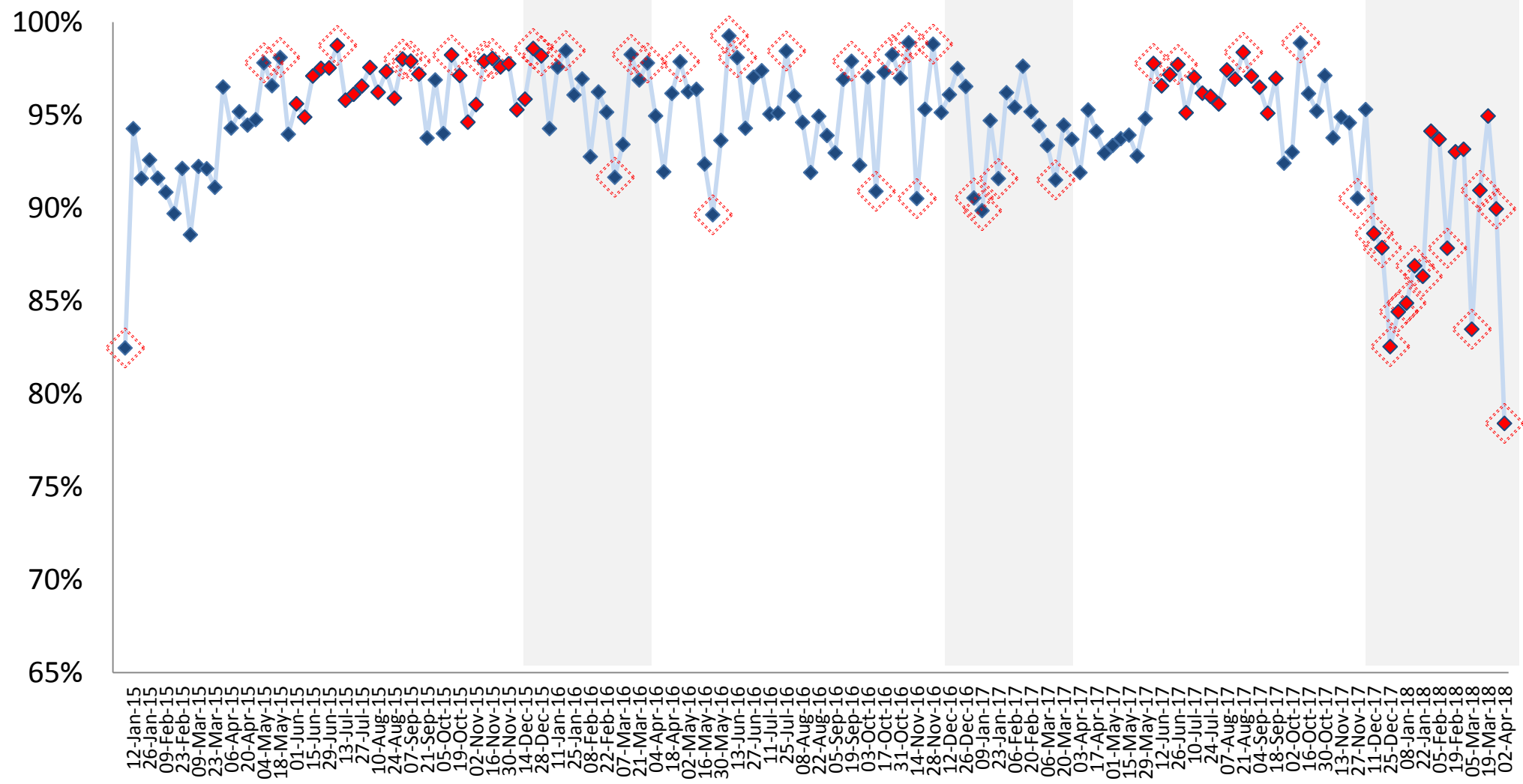
Pressured  
Exhausting  
Nightmare  
Dangerous  
Unappreciated  
Tough  
Depressing  
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Tiresome  
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Tiring  
United  
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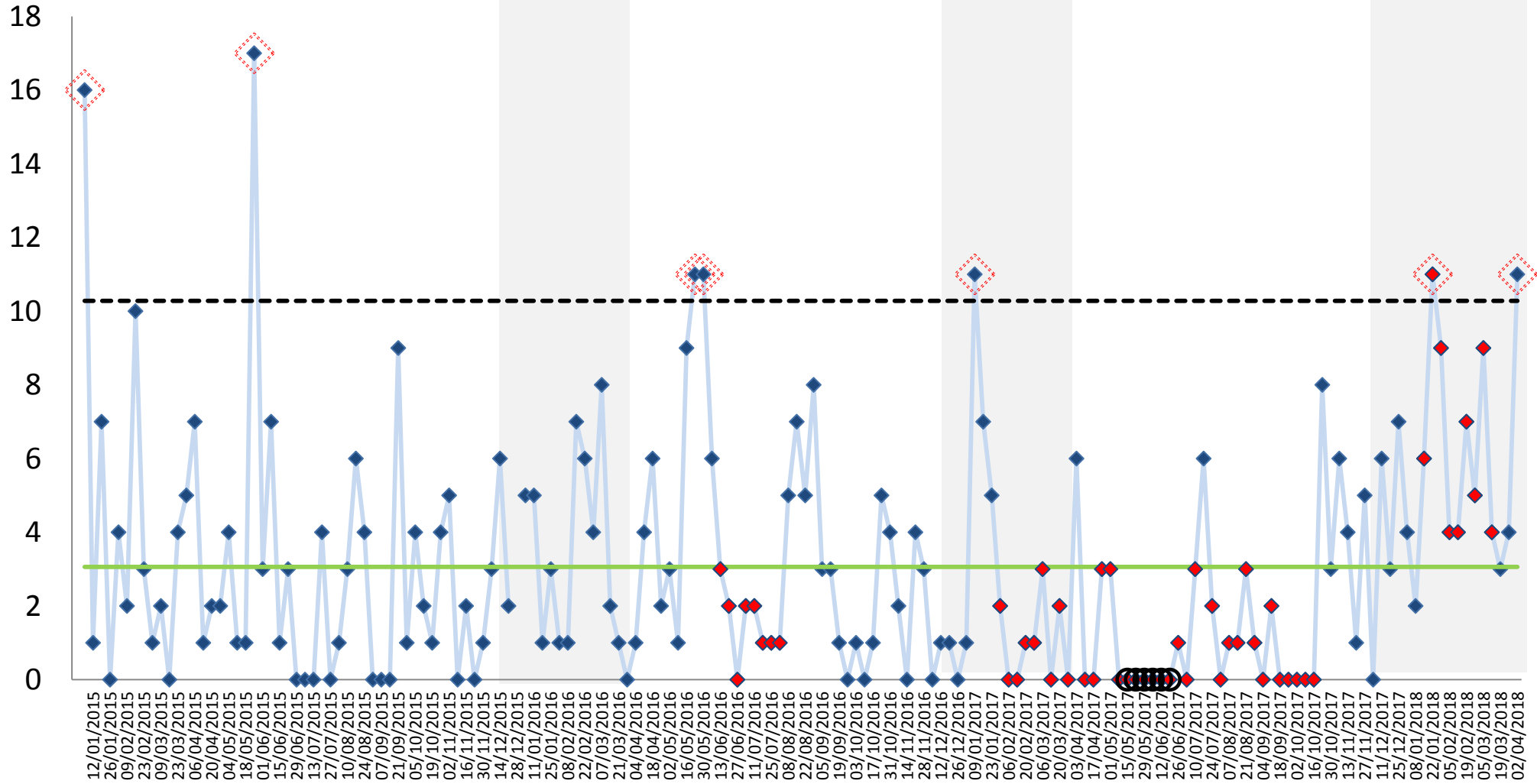
Scottish Borders  
Health and Social Care  
PARTNERSHIP



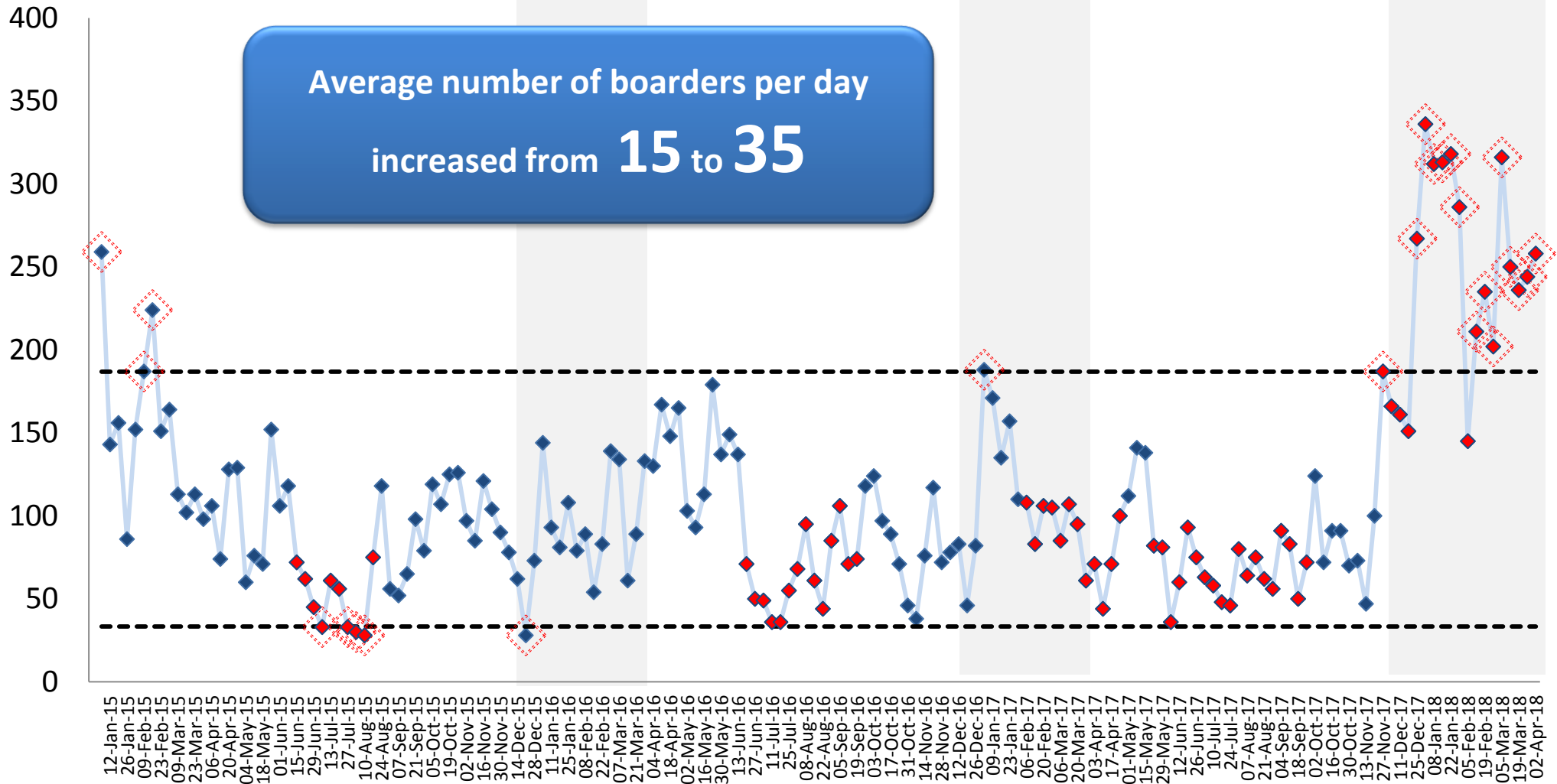
# 4-hour performance



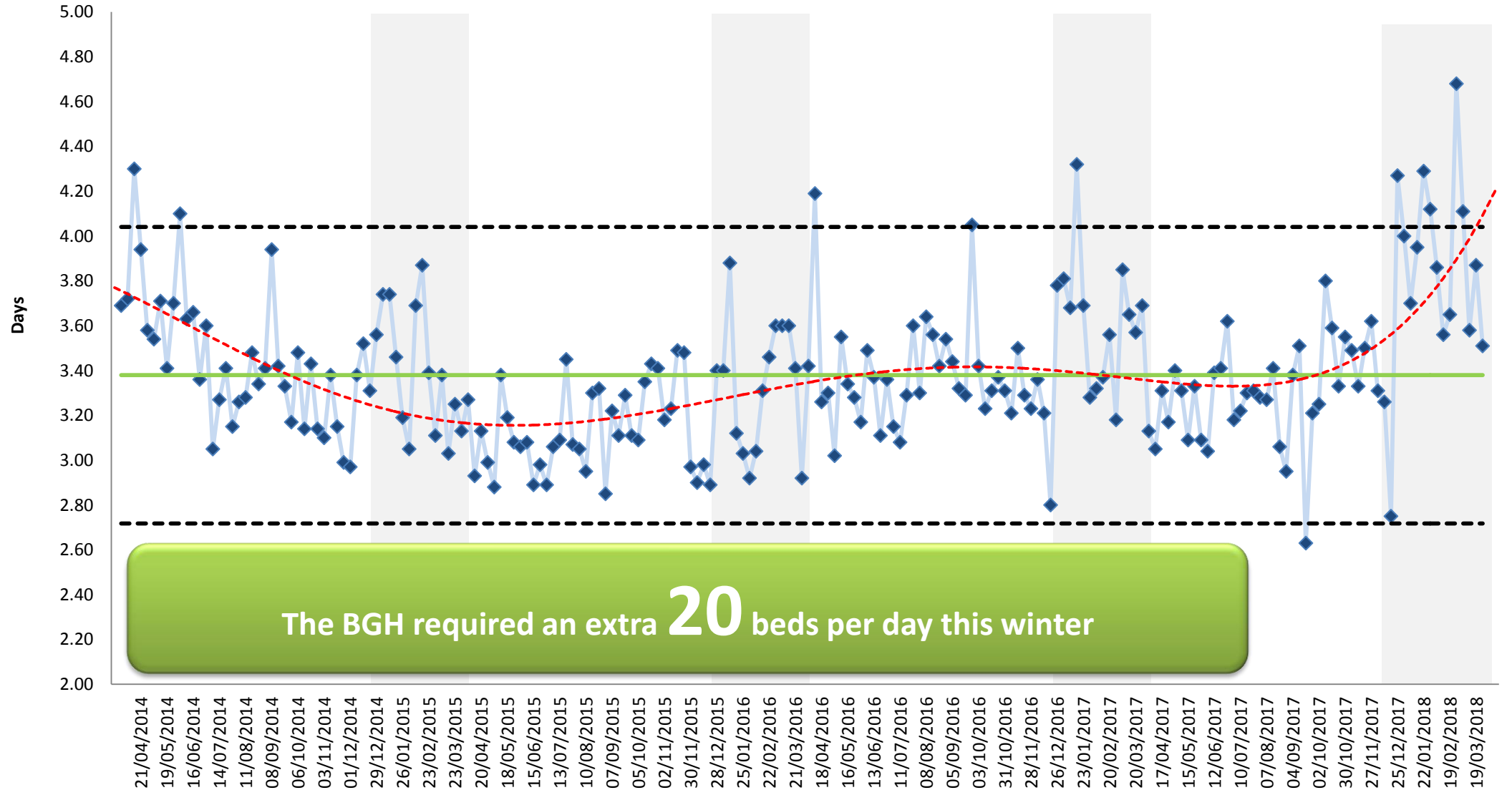
# Inpatient Cancellations



# Boarding bed days



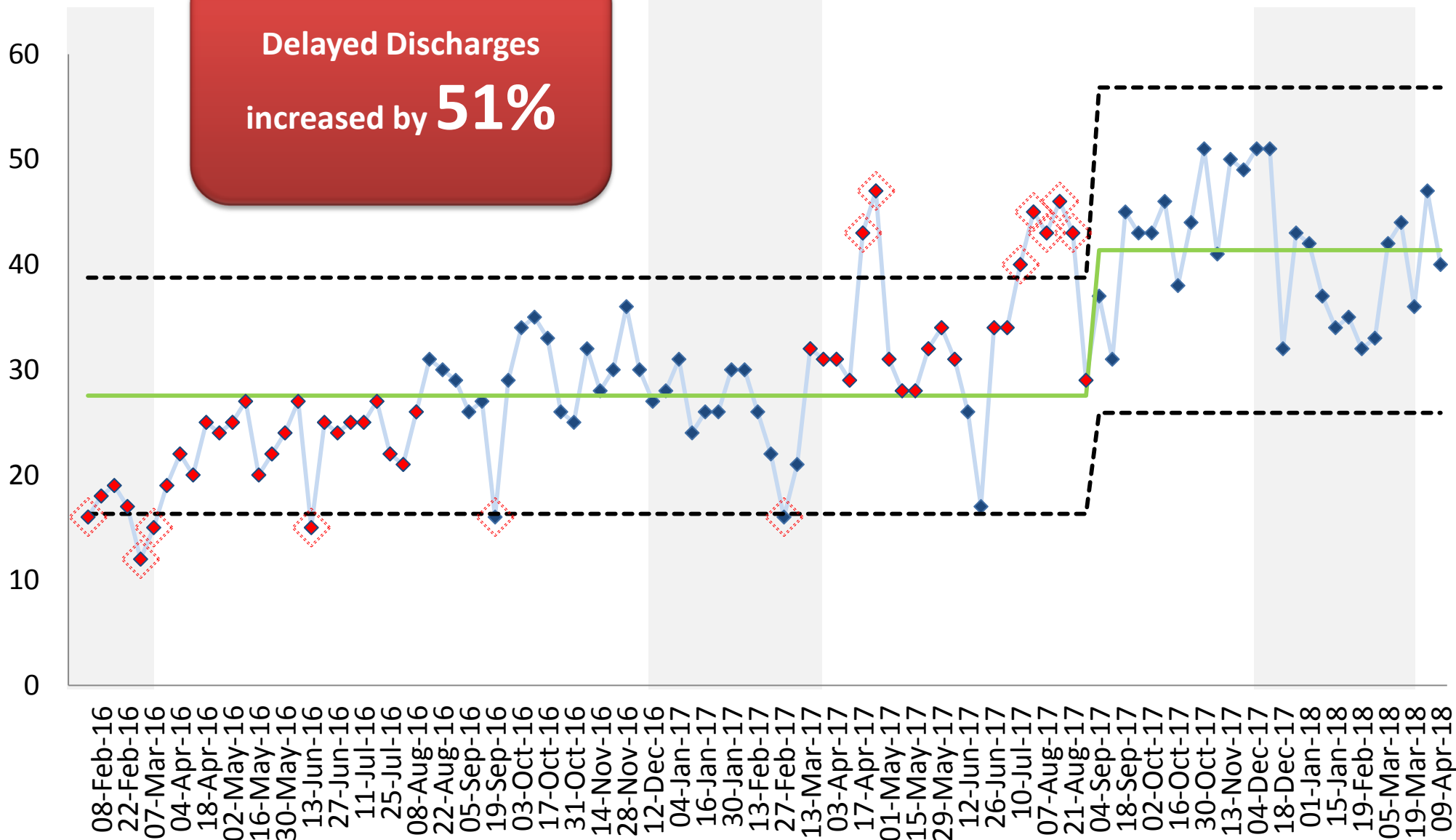
# BGH Average Length of Stay



The BGH required an extra **20** beds per day this winter

# Delayed Discharges over 72 hours

Delayed Discharges  
increased by **51%**





# A way forward



## Report for Scottish Borders Council and Borders NHS on care pathways and delayed discharges

By Professor John Bolton – February 2017

### 1.0 Introduction

This is a report written by Professor John Bolton for Borders Council and NHS Borders covering the following areas:

A review of joint care pathways

And

To provide recommendations to improve numbers of delayed discharges

This report covers the findings of the four days of fieldwork and the information provided by staff interviewed. The report is in two main parts. Part one provides a diagnosis as to the weaknesses in the current system on which broad recommendations were found. Part two looks at the possible solutions and recommends a way forward.

### 2.0 Background

2.1 Borders General Hospital has 231 beds and is supported by four community hospitals which have 92 beds between them. The average number of admissions to the General Hospital per day is 35 new patients. This requires a minimum of 35 discharges per day. On average from what could be gleaned from the information available, approximately 10-12 of the people discharged each day are likely to need some form of care and support. It is likely that most of these people 8-10 will be able to be discharged to their own homes. For the purposes of future planning, it appears that one third of the people being discharged are likely to require some form of care and support. The aim of any out of hospital care system is to support people to get home with the maximum opportunity to recover from their condition.

The purpose of this piece of work is to offer advice and recommendations on how the out of hospital care system might be improved with a specific focus on reducing the number of delayed discharges from the General Hospital.

### 3.0 Summary

3.1 The main finding from this review is that the Borders has not developed a systematic set of services to support people who have care needs out of hospital. They have used existing services to meet the needs and these services have caused blockages in the system, which has meant that there is less capacity to support current discharges. People who are discharged from hospital are offered very limited services to assist with their recovery. There is a need for change. There needs to be clarity in the role of domiciliary care services. Services should be reablement based and therapeutically supported and in the

## Review of the Clinical Model for Community Hospitals in Scottish Borders

Professor Anne Hendry

January 2018

## BGH Unscheduled Care Improvement Forum

### BGH Winter Review

Gareth Clinkscale, General Manager  
Lynn McCallum, Unscheduled Care Clinical Lead

# 2018/19 Winter Plan



## Objectives

## Activities

## Key Performance Indicators

Increase Weekend Discharge	7 Day RAD Service	% Weekend Discharges
	Increased Weekend Medical Cover	
	Enhanced Weekend Pharmacy Service	
	Increased Weekend Social Work Access	
	Establish Hospital @ Weekend	
	Increase discharge to Care Homes and POC	
Increase Capacity To Meet Demand	Winter Surge Ward	Length of Stay ED First Assessment Breaches Cancelled Electives Ambulatory Care Numbers
	Elective Cessation Plan	
	ED Twilight Shifts	
	Enhanced BECS during Public Holidays	
	Increase AHP capacity	
	Enhance Ambulatory Care	
Improve Patient Flow	New Site & Capacity Team	4 Hour Emergency Access Standard Pre 12pm Discharges Delayed Discharges
	Daily Dynamic Discharge Re-launch	
	Unscheduled Care Improvement Forum	
	Escalation Policy Review	
	Establish Rapid Assessment and Transfer	
Reduce Delays	Establish central Borders Hospital to Home	Delayed Discharges Community Hospital DD > 28 Days Length of Stay
	Community Hospital capacity	
	Weekly Delayed Discharge Meeting	
	Day of Care Audit Plus	
Safer Services	Review BGH Boarding Policy	Boarding bed days AAU Bedded/Functioning SAU Bedded/Functioning
	Protect Acute Assessment Unit	
	Protect Surgical Assessment Unit	
	Winter Communications strategy	
Staff Wellbeing	New monthly BGH Staff Awards	Sickness Absence
	Staff Wellbeing Champion	
	Targeted Wellbeing Activities	

# 2018/19 Winter Plan



Objective	Projects	KPIs
Increase Weekend Discharge	7 Day RAD Service	% Weekend Discharges
	Increased Weekend Medical Cover	
	Enhanced Weekend Pharmacy Service	
	Increased Weekend Social Work Access	
	Establish Hospital @ Weekend	
	Increase discharge to Care Homes and Packages of Care	

# 2018/19 Winter Plan



Objective	Projects	KPIs
Increase Capacity To Meet Peak Demand	Winter Surge Ward	Length of Stay ED First Assessment Cancelled Electives Ambulatory Care activity
	Elective Cessation Plan	
	ED Twilight Shifts	
	Enhanced BECS during Public Holidays	
	Increase AHP capacity	
	Enhance Ambulatory Care	

# 2018/19 Winter Plan



Objective	Projects	KPIs
Improve Patient Flow	New Site & Capacity Team	4 Hour Emergency Access Standard  Pre 12pm Discharges  Delayed Discharges
	Daily Dynamic Discharge Re-launch	
	Unscheduled Care Improvement Forum	
	Escalation Policy Review	
	Establish Rapid Assessment and Transfer	

# 2018/19 Winter Plan



Objective	Projects	KPIs
Reduce Delays	Establish central Borders Hospital to Home	Delayed Discharges Community Hospital DD > 28 Days Length of Stay
	Community Hospital capacity plan	
	Weekly Delayed Discharge Meeting	
	Day of Care Audit Plus	

# 2018/19 Winter Plan



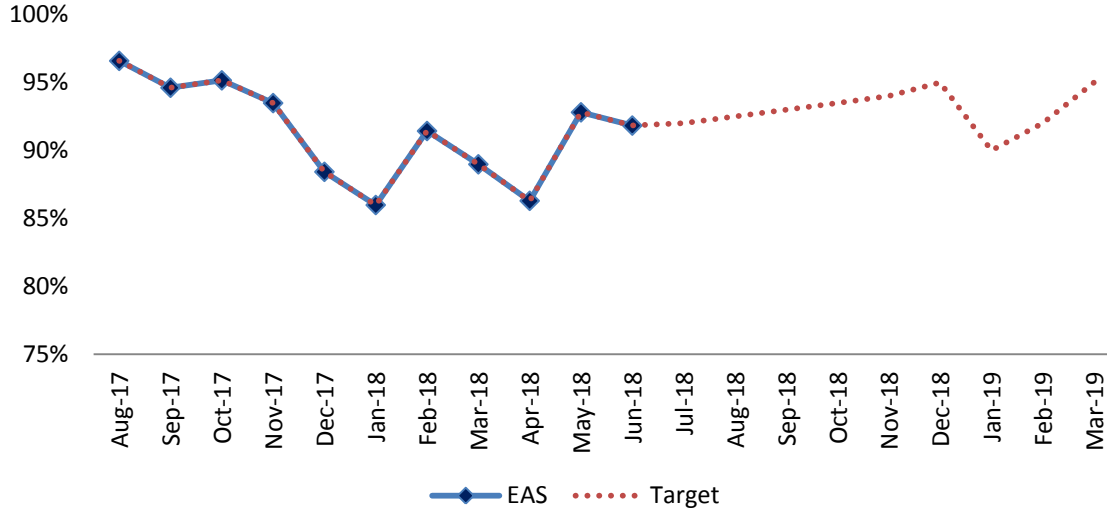
Objective	Projects	KPIs
Deliver Safer Services	Review BGH Boarding Policy	Boarding bed days
	Protect Acute Assessment Unit	
	Protect Surgical Assessment Unit	AAU open
	Winter Communications strategy	SAU open

Objective	Projects	KPIs
Maintain Staff Wellbeing	New monthly BGH	Sickness Absence
	Staff Awards	
	Staff Wellbeing Champion	
	Targeted Wellbeing Activities	

# Anticipated benefit



Emergency Access Standard Anticipated Performance Trajectory



Delayed Discharge Anticipated Performance Trajectory

