Borders NHS Board



NHS BORDERS 2014/15 FESTIVE PERIOD REPORT

Aim

To update the Board on performance over the festive period only, 17th December 2014 until 4th January 2015.

Background

NHS Borders like all Health Boards are required on an annual basis to produce a Winter Plan which outlines potential risks and contingency planning relevant to the to the winter season, with a particular focus on the festive period. The 2014/15 plan was discussed and subsequently approved at the 4th December 2014 NHS Borders Board.

After each winter period the Winter Planning Group convenes to assess what worked well and what didn't over the previous period and key recommendations are made, which are taken forward in preparation for the next winter period. This full report will come to the Board on 2nd April 2015.

Assessment

Strengths:

The patient flow improvement initiatives implemented and reported last year continued to function well over the festive period.

The work undertaken by the Connected Care Programme who have been proactive in identifying and addressing blockages to patient flow have contributed to supporting the system during this period.

Finally, the utilisation of Flex Beds and Surge Beds to create additional capacity and the early recruitment of nurses to staff these beds have been particularly successful.

Recommendations for Future Winter Planning:

These are still being discussed but early suggestions for further work to build upon are:

- Proactive Discharge Planning, this is not a problem specific to the festive period or winter period but needs to be addressed
- Delayed Discharges and achieving the 2 week target.
- Avoiding Attendance.
- Capacity Management.
- Managing Flow through ED

Emergency Department Activity Summary

Attendance at the Emergency Department over the festive period has increased by 17.2% since 2012/13, with a 12.4% increase between 2013/14 and 2014/15. ED attendances increased over the festive weekends by 8.2% and Public Holiday attendance increased by 4% compared to 2013/14.

With Christmas Day and New Years Day falling on a Thursday, GP surgeries were closed for 2 periods of 4 consecutive days over the festive period, both incorporating weekends, which may have contributed to the increase in attendances.

ED had a 1000% increase in breaches compared to 2013/14. This was largely due availability of medical beds as medical admissions increased by 26% compared to the previous year. 77.8% of all breaches during the festive period were due to bed availability. December 2014 saw a 58% increase in the number of delayed discharge cases (71) compared with December 2013 (45).

Performance against the EAS had improved in previous years but overall performance slipped during 2014/15 to 88.1% a reduction in performance of 8.9% compared to 2013/14. Public holiday performance declined at 92.9%, compared to 99.9% in 2013/14 and weekend performance also declined at 88.6% compared to 98.6% in 2013/14.

A local radio campaign 'keep our emergency department at the BGH for emergencies only' was launched at the beginning of December, encouraging patients to get their care from the most appropriate provider and only use the ED in a real accident or emergency. The radio campaign ran on a Thursday and Friday so there was a focus on the weekend periods. This campaign is scheduled to run until 23 February 2015. Additional air time was added into the period between Christmas and New Year as an additional reminder. Social media played a large part in this year's campaign with one 'know where to turn to' face book posts receiving a reach of 5528 and 58 shares.

Table 1: ED Attendances

Year	Total Attenda	ınce	Total	Breaches	Weeker Attenda	•	Weel Brea	kend ches²	Public I Attenda	•	Public Breac	Holiday hes
2012/13	1,266	(+111) 9.6%	72	(+36) 100%	454	(+225) 98.3%	10	(+7) 233.3%	248	(-48) -16.2%	7	(0) 0.0%
2013/14	1,320	(+54) 4.3%	16 ¹	(-56) -77.8%	439	(-15) -3.3%	6	(-4) -40.0%	297 ¹	(+53) 19.8%	1	(-6) -85.7%
2014/15	1,484	(+164) 12.4%	176	(+160) 1000%	475	(+36) 8.2%	54	(+48) 800%	309	(+12) 4.0%	22	(+22) 2200.0%

*Variance from previous year

¹Previously reported data to the board included dates out with the reporting period which have now been updated.

² Please note: Weekend figures have adjusted for all years to include 3 full weekends (6 days) to enable an accurate year on year comparison.

Table 2: ED Breaches by Reason for Wait Description

Breach Reason for Wait Description	2012/13	2013/14	2014/15
Wait for bed	31	1	137
Wait for 1st ED Assessment	20	5	17
Other reason	2	2	6
Wait for Senior Review- Orthopaedics			6
Wait for treatment to end	5	1	5
Wait for transport	5	4	2
Clinical reason(s)	2		1
Wait for diagnostics test(s)	4	1	1
Wait for a specialist	3	2	1
Total	72	16	176

Table 3: ED Attendances by Flow

	Attendances			Percentage Difference on Previous Year		
Patient Flow Description	2012/13	2013/14	2014/15	2013/14	2014/15	
Flow 1: Minor Injury & Illness	685	538	692	-21%	29%	
Flow 2: Acute assessment - includes major injuries	102	249	192	144%	-23%	
Flow 3: Medical Admissions	361	371	466	3%	26%	
Flow 4: Surgical Admissions	118	162	134	37%	-17%	
Total	1266	1320	1484	4%	12%	

Table 4: EAS Performance

Year	Total EAS	Weekend EAS	Public Holiday EAS	
	Performance	Performance ¹	Performance	
2012/13	94.3%	97.8%	97.2%	
2013/14	98.8%	98.6%	99.9%	
2014/15	88.1%	88.6%	92.9%	

Please note: Weekend figures have been adjusted for all years to include 3 full weekends (6 days) to enable an accurate year on year comparison.

Appendix 1 (attached) shows the postcode attendances for a two year period.

BGH Activity Summary

Emergency admissions to the BGH increased by 5.5% during 2014/15 compared to the previous year, whilst weekend admissions increased significantly by 90.7% and public holiday admissions increased by 5.1%, following on from the high ED attendance rate.

Total discharge performance reduced by 2.4% during the 2014/15 festive period, compared to the previous year, however weekend and Public Holiday discharge performance improved compared to the previous year at 48.8% and 16.8% increase respectively.

Table 5: BGH Emergency Admissions & Discharges

Year	Total Admis	sions	Total Dischar	ges	Week Admi:	end ssions¹	Weeke Discha			c Holiday ssions		c Holiday arges
2012/13	742	-(108) -12.7%	758	(-83) -9.9%	233	(-74) -24.1%	192	(+16) 9.1%	153	(-29) -15.9%	161	(+27) 14.4%
2013/14	732	(-10) -1.4%	761	(+3) 0.4%	119	(-114) -48.9	123	(-69) -35.9	156	(+3) 2.0%	113	(-48) -29.8%
2014/15	772	(+40) 5.5%	743	(-18) -2.4%	227	(+111) +90.7%	183	(+60) 48.8%	164	(+8) 5.1%	132	(+19) 16.8%

^{*}Variance from previous year

Table 6: BGH December 2014 Activity

		December A	Percentage Increase on Previous Year				
Month	Admissions	Discharges	Occupied Bed Days	ALoS (Days)	Admissions	Discharges	Occupied Bed Days
Dec-12	1661	1758	6090	3.46	-	-	-
Dec-13	1751	2050	6800	3.32	5.4%	16.6%	11.7%
Dec-14	1807	2115	7006	3.31	3.2%	3.2%	3.0%
Percent	age increase D	ecember 2014	8.8%	20.3%	15.0%		

Community Activity Summary

Total community hospital admissions increased by 13% for 2014/15 compared to the previous year. Weekend admissions increased by 100% whilst public holiday admission remained the same as 2013/14 at 3 admissions.

Overall discharge performance improved by 21.8% during the 2014/15 festive period, compared to the previous year. Weekend and Public Holiday discharge performance also improved compared to the previous year at 160% and 80% increase respectively.

NHS Borders successfully submitted a request for additional funding to reduce bed pressures, due to occupied bed days by delayed discharges. The funding was for the spot purchase of care home beds to be used as part of NHS Borders winter surge capacity, with the aim of creating capacity within BGH by increasing the number of patients that could be cared for in another setting in the system rather than occupying acute beds.

These beds came into use of 22 December 2014 and between that date and 8 January 2015, 6 patients were transferred saving a total of 107 occupied bed days in the BGH, but effectively adding to the number of delays in the system.

¹Please note: Weekend figures have been adjusted for all years to include 3 full weekends (6 days) to enable an accurate year on year comparison.

Table 7: Community Hospital Admissions & Discharges

Year	Total Admiss	sions	Total Disch	narges	Week Admis	end ssions¹	Weeke Discha			c Holiday ssions	Public Discha	: Holiday arges
2012/13	68	(+30)	63	(+14)	6	(+4)	10	(+2)	9	(+7)	7	(+3)
		78.9%		28.6%		200%		25.0%		350.0%		75%
2013/14	54	(-14)	55	(-8)	5	(-1)	5	(-5)	3	(-6)	5	(-2)
		-20.6%		-12.7%		-16.7%		-50.0%		-66.7%		-28.6%
2014/15	61	(+7)	67	(+12)	10	(+5)	13	(+8)	3	0	9	(+4)
		13.0%		21.8%		100%		160.0%		0.0%		80%

^{*} Variance from previous year

Table 8: Community Hospital December 2014 Activity

		December /	Percentage Increase on Previous Year				
Month	Admissions	Discharges	Occupied Bed Days	ALoS (Days)	Admissions	Discharges	Occupied Bed Days
Dec-12	109	106	2448	23.1	-	-	-
Dec-13	80	82	2529	30.8	-26.6%	-22.6%	3.3%
Dec-14	118	122	2517	20.6	47.5%	48.8%	-0.5%
Percent	tage increase D	ecember 2014	8.3%	15.1%	2.8%		

BECS Activity Summary

The Festive Period for BECS showed a return to similar volumes of patient care episodes last seen in 2012/2013. Changes were however noted in the way care was delivered in 2014/15 compared to 2012/13 with a 46.4% increase in the number of telephone advice calls being undertaken, and a 14.8% fall in the number of patient attendances.

This pattern of activity was not unique to BECS and was reported elsewhere in Scotland by NHS24 and other NHS Board OOH services. 89.8% of patients requiring a face to face consultation within the Primary Care Emergency Centre at Borders General Hospital were seen within 3 hours and 97.4% within 4 hours of the time that their request for care was passed by NHS24. 93.6% of patients requiring a home visit were seen within their designated triage times of 1, 2 or 4 hours.

Patient care episodes increased across all areas compared to the previous year, Telephone advice by 33.6%, attendances by 16.3%, Visits by 31.3% and overall by 24.9%.

Table 9: BECS Activity Summary

Year	Year Telephone Advice Provided		Attendances		Visits		Total	
2012/13	293		763		432		1488	
2013/14	321	(+ 28) +9.6%	559	(-204) –26.7%	313	(-119) –27.5%	1193	(-295) -19.8%
2014/15	429	(+108) +33.6%	650	(+91) +16.3%	411	(+98) +31.3%	1490	(+297) +24.9%

*Variance from previous year

¹Please note: Weekend figures have been adjusted for all years to include 3 full weekends (6 days) to enable an accurate year on year comparison.

Summary

The increased level of activity coming through ED and the lack of available, appropriate beds within the system has resulted in poor EAS performance. The EAS Standard remains a proxy for quality care across the whole system, including social care. It is disappointing that we have been unable to respond better to the demand for our services during this period. We continue to focus on improvement in this area, in particular the possibilities around intra- hospital delays and in delays in discharge for patients who require alternative settings to Health.

Increased BECS activity also indicates that the increase in attendances may be due to GP surgeries being closed for 2 periods of 4 consecutive days over the festive period, both incorporating weekends.

There are learning points to take forward to improve performance and resilience next year.

Recommendation

The Board is asked to <u>note</u> the 2014/15 Festive Period Report, the performance of the system during this period and the outline recommendations for future winter planning

A full Winter Period Report will be brought to the next Board meeting.

Policy/Strategy Implications	Request from Scottish Government that all Health Boards produce a Winter Plan signed of by their Board in support of quality patient care.
	This report will inform the Winter Planning Process 2015/16
Consultation	Feedback was provided by the Winter Planning Group, Clinical Services and Managers and Partner organisations
Consultation with Professional Committees	The original Winter Plan was approved by the NHS Borders Board.
Risk Assessment	The Winter Plan is designed to mitigate the risks associated with the winter and festive periods
Compliance with Board Policy requirements on Equality and Diversity	-
Resource/Staffing Implications	Resource and staffing implications were addressed within the Winter Plan

Approved by

Name	Designation	Name	Designation
Jane Davidson	Chief Executive		
	(Interim)		

Author(s)

Name	Designation	Name	Designation
Evelyn Rodger	Director of Nursing	Karen Shakespeare	Planning and
	and Midwifery, Interim		Performance Manager
	Director of Acute		
	Services		

ED Attendances by Calendar year by Postcode Group by Flow

2013

FlowGroup	ALL	TD1	TD10	TD11	TD12	TD13	TD14	TD15	TD2	TD3	TD4
1	13640	3078	118	579	288	13	245	206	322	128	352
2	2265	435	20	84	55	2	72	48	42	23	54
3	6080	977	33	296	227	14	256	269	108	43	112
4	2819	478	25	166	96	8	124	120	45	19	51
Total	24804	4968	196	1125	666	37	697	643	517	213	569

2014

FlowGroup	ALL	TD1	TD10	TD11	TD12	TD13	TD14	TD15	TD2	TD3	TD4
1	13812	2924	103	552	299	17	234	168	348	151	352
2	3763	767	34	156	82	8	91	67	80	28	92
3	6725	1076	52	362	261	9	337	283	110	37	130
4	2705	414	27	150	94	5	131	103	50	13	41
Total	27005	5181	216	1220	736	39	793	621	588	229	615

2013 and

2014

FlowGroup	ALL	TD1	TD10	TD11	TD12	TD13	TD14	TD15	TD2	TD3	TD4
1	27452	6002	221	1131	587	30	479	374	670	279	704
2	6028	1202	54	240	137	10	163	115	122	51	146
3	12805	2053	85	658	488	23	593	552	218	80	242
4	5524	892	52	316	190	13	255	223	95	32	92
Total	51809	10149	412	2345	1402	76	1490	1264	1105	442	1184

ED Attendances

2013

FlowGroup	TD5	TD6	TD7	TD8	TD9	EH43	EH44	EH45	EH46	Other
1	999	1198	1039	737	1729	94	354	844	62	1255
2	172	168	159	113	375	15	60	138	7	223
3	489	401	447	259	1086	42	175	502	17	327
4	253	170	158	149	437	13	78	202	11	216
Total	1913	1937	1803	1258	3627	164	667	1686	97	2021

2014

FlowGroup	TD5	TD6	TD7	TD8	TD9	EH43	EH44	EH45	EH46	Other
1	962	1214	1123	780	1853	108	371	966	61	1226
2	282	303	259	196	595	30	105	253	19	316
3	557	420	440	344	1270	48	178	540	31	240
4	229	147	169	123	465	28	68	237	10	201
Total	2030	2084	1991	1443	4183	214	722	1996	121	1983

2013 and

2014

FlowGroup	TD5	TD6	TD7	TD8	TD9	EH43	EH44	EH45	EH46	Other
1	1961	2412	2162	1517	3582	202	725	1810	123	2481
2	454	471	418	309	970	45	165	391	26	539
3	1046	821	887	603	2356	90	353	1042	48	567
4	482	317	327	272	902	41	146	439	21	417
Total	3943	4021	3794	2701	7810	378	1389	3682	218	4004

Postcode district	Post town	Coverage
TD1	GALASHIELS	Galashiels, Blainslie, Clovenfords, Fountainhall, Stow, Tweedbank
TD2	LAUDER	Lauder, Oxton
TD3	GORDON	
TD4	EARLSTON	
TD5	KELSO	
TD6	MELROSE	
TD7	SELKIRK	
TD8	JEDBURGH	Jedburgh, Ancrum, Camptown, Crailing, Jed Valley, Nisbet, Oxnam
TD9	HAWICK, NEWCASTLETON	Hawick, Newcastleton, Bedrule, Bonchester Bridge, Chesters, Denholm, Kershopefoot, Newmill-on-Teviot, Roberton, Wilton Dean
TD10	DUNS	Greenlaw
TD11	DUNS	Duns
TD12	COLDSTREAM, CORNHILL-ON-TWEED, MINDRUM	
TD13	COCKBURNSPATH	
TD14	EYEMOUTH	
TD15	BERWICK-UPON-TWEED	Holy Island
EH43 EH44 EH45 EH46 Other	Innerleithen Area Innerleithen Area Peebles Area West Linton Area Non Borders	