#### **Borders NHS Board**



# SCOTTISH BORDERS HEALTH AND SOCIAL CARE PARTNERSHIP WINTER PLAN 2018-19

#### Aim

To request approval for the NHS Borders Winter Plan for 2018/19

### **Background**

The Scottish Borders Health and Social Care Partnership, like all Partnerships, is required on an annual basis to produce a Winter Plan which outlines potential risks and contingency planning relevant to the winter season. The 2018/19 Winter Plan has been developed as a joint Winter Plan between NHS Borders and Scottish Borders Council. An outline of the draft Winter Plan was presented to the Integrated Joint Board on 20<sup>th</sup> August 2018 and is presented for approval.

The Winter Plan is an overarching plan which signposts other relevant plans, which may be required over the winter period, for example severe weather plans, pandemic influenza plans and infection control policies and protocols. The overall aim of the planning process is to ensure that the partnership prepares effectively for winter pressures so as to continue to deliver high quality care, as well as national and local targets.

Scottish Borders Health and Social Care Partnership like many other partnerships experienced a very difficult winter period extending across 20 weeks during 2017/18. Unscheduled demand for medical beds and the large number of delayed discharges meant that priority for beds had to be removed for elective patients meaning a significant level of inpatient and day case cancellations and the requirement for a large number of surge beds across the Borders General Hospitals (BGH), community hospitals and the opening of Craw Wood as a discharge to assess facility. The BGH length of stay increased by 15% and the Scottish Borders saw an increase in the delayed discharge position. The summer months have continued to show an increase in demand in the Emergency Department, June and July showing increases of 6.1% and 4.3% respectively.

The evaluation of last year's winter plan was presented to the Board in June 2018. The learning provided a focus for the development of the 2018/19 Winter Plan.

# Summary of Winter Plan for 2018/19

Clinical engagement and integrated working has been at the heart of this year's winter planning process. A Winter Debrief session was held for BGH clinical leads in May which provided the basis for a number of improvement activities aimed at increasing capacity across both Health and Social Care.

The 2018/19 Winter Plan aims to achieve the following objectives: Weekend discharges will be increased to smooth flow across the seven days

Capacity will be increased across Health & Social Care to meet increased demand

Patient flow will be improved throughout the system

Fewer patients will be delayed

Services will be safer

Staff wellbeing will improve

Utilising the demand profiles of 2017/18 and further local intelligence throughout the summer, a bed model for winter 2018/19 was developed. The plan seeks to increase capacity through enhanced staffing levels across seven days in the BGH, reducing delays for patients, and providing more appropriate alternative care settings.

Based on the unscheduled demand from December 2017 – March 2018 and building in a 3% increase, the total numbers of beds required are **370 beds**. This assumes:

- A BGH elective programme balanced against expected periods of high demand that protects 10 elective beds during January and 17 throughout the rest of the winter period
- Assumes 3% increase in activity (typical for previous years, was 6% last year)
- o The Acute Assessment and Surgical Assessment Units are protected from bedding
- o Models assumes capacity to meet worst day for occupied bed days

The 2018/19 Winter Plan should create capacity equivalent to **375 beds**. The breakdown of this:

0	Core beds	300 beds
0	Surge beds (BGH & CH)	23 beds
0	Surgical Assessment	6 bed equivalents
0	Hospital to Home	20 bed equivalents
0	Craw Wood (relaxed criteria)	10 bed equivalents
0	Reduction BGH LOS	10 bed equivalents
0	Reduction in CH LOS	6 bed equivalents
$\circ$	ΤΟΤΔΙ	375 hade

TOTAL375 beds

The High Level Project Plan (Appendix 1) details those activities that will increase the capacity required to manage the winter demand. Appendix 2 summarises those key activities and associated Key Performance Indicators.

#### Financial Plan

Allocation from NHS Scotland is still to be determined.

## **Monitoring**

The Winter Planning Board will oversee progress against plan and a refreshed weekly monitoring scorecard is being established, capturing the key indicators which will monitor performance against prediction. This will form the basis of reporting to the Board and IJB.

Progress against the overall programme will be monitored through the Winter Planning Board, chaired by the Chief Officer.

#### Recommendation

The Board is asked to **approve** the 2018/19 Winter Plan

Policy/Strategy Implications	Request from the Scottish Government that a whole system Winter Plan is developed
	and signed off by the Health Board.
Consultation	The Winter Plan has been consulted on
	widely with stakeholders within NHS
	Borders and the Scottish Borders Council. It
	has been presented to the Integrated Joint
	Board.
Consultation with Professional	As above, and will be reviewed by Area
Committees	Clinical Forum
Risk Assessment	Will be undertaken as part of development
	of the final Winter Plan
Compliance with Board Policy	Final Winter Plan will be assessed using
requirements on Equality and Diversity	Equality and Diversity Scoping template
	Plan.
Resource/Staffing Implications	Resource and staffing implications of the
	Winter Plan will be addressed through the
	development of the plan

# Approved by

Name	Designation	Name	Designation
Gareth Clinkscale	General Manager		

## Author(s)

Name	Designation	Name	Designation
Pauline Burns	Programme		
	Manager		

# Appendix 1 NHS Borders High Level Project Plan

	Se	epte	mb	er	October			N	ove	mbe	er	D	ece	mbe	January					
Winter Plan 2017/18	w/c 3rd	w/c 10th	w/c 17th	w/c 24th	w/c 1st	w/c 8th	w/c 15th	w/c 22nd	w/c 29th	w/c 5th	w/c 12th	w/c 19th	w/c 26th	w/c3rd	w/c 10th	w/c 17th	w/c 24th	w/c 1st	w/c 7th	w/c 14th
Admission Avoidance																				
Match demand and capacity / review BECS rotas																				
Anticipatory Care Plan for all care home residents																				
ED																				
Increase medical and nurse staffing																				
Increase RAD to 7 day service																				
Expand Crawwood Criteria																				
Expand criteria to reduce delays																				
Implementing Hospital to Home - 20 beds																				
Full Implementation of Team																				
Reduced Length of Stay - BGH - 10- beds																				
Increased weekend medical cover																				
Increased Pharmacy cover																				
Increased social work access																				
Establish Hospital at Weekend																				
Enhance DDD with the inclusion of criteria led discharge																				
Increase utilisation of Discharge Lounge																				
Extend Ambulatory Care																				
Reduced length of Stay - Community - 6 beds																				
Enhance multi-disciplinary decision-making and coordination																				
Reduce Delays																				
Day of Care Audit Plus																				
Weekly Delayed Discharge Meeting																				
Patient Flow Management																				
Review Escalation Policy																				
Implement new Site and Capacity Team																				
Review Boarding Policy																				
Refocus Weekend Planning Meeting																				
Implement weekend huddles																				
Safer Services																				
Protect Acute Assessment Unit																				
Protect Surgical Assessment Unit																				
Infection Control Plan																				
Severe Weather Plan																		П	П	
Staff Wellbeing																		П	П	
New monthly BGH Staff Awards																		П	П	
Staff Wellbeing champion																		П	П	
Flu vaccination plan																		П	П	
Targeted wellbeing activities																		П	П	

# Appendix 2 Summary of NHS Borders Winter Plan Objectives and KPIs

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