

Briefing Template

WINTER 2015/16 ACTION PLAN SUMMARY

SRG Name:	Borderline and Peterborough	SRG Chair name:	Catherine Mitchell	Main Provider:	PSHFT
Date completed:	01/10/15	SRG Chair e-mail:	<a href="mailto:catherine.mitchell1@nhs.net">catherine.mitchell1@nhs.net</a>	Plan completed by:	Simon Pitts

Please select the key pressures approaching winter, from the dropdown lists provided below (each choice can be used more than once):	Specific details of key local pressures	SRG actions to address local pressures	Action owner within the SRG (CCG/Acute Provider/Other Provider/LA)	Current timeline for action to be delivered	Comments
209 Demand	Increased demand predicted for heart failure and respiratory specifically over the winter months. Also tend to have increased demand from diabetics - either as a co-morbidity or primary problem	SRG funding to increase specialist nurse presence in the hospital for 6-7 days per week. Will cover predominantly ACU, MAU and ED, but also work with discharge team to increase weekend discharges	PSHFT	Oct-15	All posts recruited to. Services commenced for 6-7 days in diabetes, respiratory and heart failure.
Demand	Predicted increased demand in respiratory patients	SRG winter funding to provide additional respiratory physio at weekends, supporting front door and non-critical care areas at weekends	PSHFT	End October 2015	
System Capacity	Increase in weekend discharges to reduce pressures on acute beds over weekend and bank holiday periods	Increased weekend discharge team - currently have one consultant who works on discharges in the morning and ACU thereafter. Needs support from junior doctor for TTOs, diagnostic requests, bloods etc.	PSHFT	Nov-15	Difficulties may be experienced for junior doctor recruitment into this post. Alternative support being investigated.
System Capacity	Lack of surge capacity and acute medical beds in PSHFT to cope with increased winter demand	Additional beds added to B core wards to increase overall capacity by 12	PSHFT	End Nov 2015	

Demand	Increased demand of patients requiring psychiatric assessment/support attending ED	Full psychiatric liaison service available in ED (08:00 - 01:00) 7 days per week from Nov 2nd	CPFT	2nd Nov 2015	Confirmation of full implementation from CPFT
System Capacity	Increased predicted demand through winter months. Need additional acute care capacity for peaks in demand	Provision of two gynae/women's health surgical assessment beds (additional to ward compliment)	PSHFT	Nov-15	Building work commenced to change two non-clinical rooms into clinical assessment rooms.
Throughput	Reduction in LOS required in order to manage	Phase 2 of MAU development to increase assessment function and provision of a	PSHFT	Nov-15	
Throughput	Increase in weekend discharges and reduction in	Implement nurse-led discharge on key wards in the Trust, including short stay unit.	PSHFT	Dec-15	
System Capacity	Pressures on step down/rehabilitation beds in the system to facilitate movement from acute beds	Provision of an additional 10 rehabilitation beds on JVG ward at Stamford to support Lincolnshire and north Peterborough patients	PSHFT	Dec-15	Internal refurbishment required.
Throughput	Increase in weekend discharges and reduction in length of stay to ensure enough capacity during winter months	Red Cross discharge service to support simple discharges for older people, service to be focussed on weekend discharges	Red Cross	Oct-15	staff recruited and service to commence
Throughput	Pressures on step down/rehabilitation capacity in the system	Provision of physio in the reablement service to enable a wider group of patients into the service, increase patient outcomes, reduce LOS in reablement	PCC	Sep-15	commenced
System Capacity	Pressures on patient flow	Provision of a coordinator for patients who would benefit from third sector support	PCC	Nov-15	On track
System Capacity	Pressures on patient flow	Provision of additional discharge nurse and admin support to Single Point of Access	PCVS	Nov-15	On track
System Capacity	Pressures on step down/rehabilitation capacity in the system	Provision of 2 residential reablement flats in Peterborough. Increase provision of reablement for patient not able to return home but not needing interim nursing	PCC	Sep-15	Commenced
System Capacity	Pressures on ED for people requiring Dementia	Support for patients and carers in the community of SH - lead CW	SL CCG	Oct-15	
System Capacity	Increased pressures on Ambulance and ED. CAT Car scheme	Car operated by EMAS to attend calls in an attempt to treat at scene or signpost to	SL CCG	Apr-15	commenced
Throughput	CHC Assessments	Scheme to increase the number of CHC/DST assessments completed to reduce	SL CCG	Apr-15	commenced
System Capacity	LCHS rapid response/admissions avoidance	Commissioned LCHS to provide urgent response teams supporting neighbourhood	SL CCG	Apr-15	commenced
Throughput	Intermediate Care Project	Intermediate step up and step down beds in Bourne commissioned via LCHS.	SL CCG	Apr-15	commenced
Throughput	Expansion PSHFT AIRS	Expand Airs team in PSHFT to allow for discharge planning from point of admission.	SL CCG/CP CCG	Apr-15	commenced
Throughput	Additional Nursing Beds	The CCG have agreed to fund an additional 2 ILT nursing beds at Barchester	SL CCG	Apr-15	commenced
Throughput	Tallington Beds	Tallington ILT bed - Cost Increase. The CCG agreed to fund the increase for the	SLCCG	Apr-15	commenced
Throughput	Pressures on ambulance handovers and conveyance	Ambulance HALO based in ED to support ambulance conveyance, handovers and	EEAST	Oct-15	commenced
Demand	Pressures of ambulance conveyances to PSHFT	GP in EEAST call centre to triage green ambulances	EEAST	Sep-15	commenced
System Capacity	GP hubs open 8-8 7 days per week	Increased system capacity for primary care with 3 hubs across the Peterborough region	PMCF	Oct-15	Commenced
Demand	Pressure on social Care provision	Increase in Reablement capacity by 185 hours a week	PCC	Oct-15	commenced

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Demand	Provision of JET to reduce demand	JET admission avoidance by supporting patients in the community.	Uniting Care	Sep-15	Commenced
Demand	Neighbourhood teams	Case management and co-ordination processes	Uniting Care	Oct-15	Commenced
System Capacity	Hospice at Home	Implementation of Hospice at Home and rapid response service for Peterborough	Uniting Care	Oct-15	commenced
<b>Demand</b>	Crisis team	Intensive dementia support at home	Uniting Care	Oct-15	commenced
Demand	additional Oncology support	Additional clinical staff to review oncology patients in ED to prevent admissions	PSHFT	Nov-15	commenced
Demand	Pharmacy	Additional hospital Pharmacy support to revised MAU and A3 ward rounds	PSHFT	Nov-15	commenced

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