ABM University Health Board	
Date of Meeting: 23 <sup>rd</sup> May 2018	
Name of Meeting: PERFORMANCE & FINANCE COMMITTEE	
Agenda item: 6a	
Subject	UNSCHEDULED CARE BOARD BRIEFING – MAY 2018
Prepared by	Jan Thomas, Assistant Chief Operating Officer
Approved by	Chris White, Interim Chief Operating Officer
Presented by	Chris White, Interim Chief Operating Officer

- The second meeting of the newly reconstituted Unscheduled Care board included the welcomed addition of colleagues from the 3 Local Authorities, who are key to supporting the development of system wide solutions to unscheduled care and patient flow.
- Colleagues from the **Delivery Unit** are also in attendance and were asked for guidance
  on whether any organisation had managed to measure the whole system. The DU
  agreed to explore this further on behalf of the Health Board, but indicated that they had
  colleagues in DU who are very interested in **system dynamics** and would discuss how
  they could assist the Health Board in this area. Primary and Community care services
  offered to be the initial point of contact for this potential piece of work.
- The focus of the new USC board is on **learning**, and sharing this across the Health board and between other partners such as WAST and the Local Authorities.
- The first presentation at the meeting was given by Jacqui Collins from the Delivery Unit, on the development of the Safety Huddle- the aim of which is to improve patient safety and reduce risk across the USC system. This approach reinforces the purpose of the National Risk Based Escalation process which has been in use across Wales since December 2015, but which has, over time, become too focussed on the hazards that contribute to patient risk, as opposed to the responses required to mitigate the impact of increasing system risk on the potential harm to patients.
- The Safety Huddle approach requires a once a day 8.30 meeting of all key stakeholders who need to be involved in achieving good patient flow. This will require the participation of medical staff, primary and social care staff, ward managers, clinical support services and hotel services and facilities staff. Senior management team support is also critical. The safety huddle meeting replaces the traditional bed management meetings which currently take place three times a day, and which have largely developed into a reporting function.
- The Safety Huddle meeting is supported by a tool that will routinely provide the
  predicted demand analysis for the day, enabling the focus of meeting to be one of a
  solutions focussed approach, to deliver the necessary capacity required to meet the
  predicted demand to maintain good patient flow and safety across the whole of the

unscheduled care system for that day. This approach – whilst more labour intensive at the beginning of the day - should be more productive and effective as a wider group of staff are engaged in the process and are accountable for resolving the constraints or blockages that impact on patient flow, avoiding the need for progress chasing and duplication. This approach also **promotes dynamic learning and a whole system response** – the product being an agreed plan for the day by all key partners who have an impact on patient flow.

- The USC board supported this approach. It was confirmed that it is currently being developed at Morriston hospital and is being supported by the Delivery Unit and is at the engagement stage with all key stakeholders to explain the purpose and benefit of this revised approach. The COO requested that the implementation plan for Morriston is brought back to the USC board in July. However colleagues in Princess of Wales hospital and other sites are reviewing current bed management processes, and are also interested in developing this approach.
- It was also confirmed by DU colleagues that it is intended to review the role and value of the National 11am daily unscheduled care conference calls, with a proposed range of options being discussed at the next Chief Operating Officer meeting in June 2018.
- Winter planning event 1st May 2018. The presentations from the National winter planning event were shared with the USC board. The COO reflections of the day were:
  - The event provided opportunities to share learning from organisations across Wales
  - The event allowed time for organisations to reflect upon the learning from their respective winter plans.
  - o The day reinforced the need for a system wide approach to managing the additional pressures which the winter months bring.
  - The positive attendance from the multi agency team which represented ABMU Health Board at the learning event was a good foundation upon which to develop the plan for 19/20.
  - Service delivery units were reminded of the need to submit outstanding evaluations of the impact of the additional WG winter planning monies to the Assistant COO by 23<sup>rd</sup> May to inform the development of the plan for 2019/20.
- Presentation on the Western Bay structure and optimal model. Jason Crowl, the recently appointed Head of Nursing for Primary and Community services provided an overview of the current Western Bay programme structure and governance arrangements, the agreed optimal model for community services, and in particular the role of the community services board. It was confirmed that Western Bay was reviewing structures and this included encouraging wider membership for the respective sub groups, in particular the need for increased input from colleagues in acute care services, as well as strengthening the performance measures such as moving to a patient/client outcome focussed approach. It was agreed that colleagues from secondary care would be asked to identify appropriate representation to participate in this important programme of work.
- The Head of Nursing also reported on a visit from ABMU colleagues to Neville Hall hospital on 1st May to find out at first hand about the positive impact of the discharge to assess model that had been commissioned by Aneurin Bevan Health Board in 2017. The service, which provided a 4 hour response time to support simple to moderately complex patient discharges, had resulted in a reduction in outlying patients benefiting

planned care services, significantly reduced 12 hour waits in the ED, reduced overall levels of hospital escalation, and had received excellent feedback from patients and staff. On the basis of the learning from this visit, alongside learning from other similar models that were being developed in Wales, and across the UK, the Head of Nursing for Primary and Community services was requested to work up the development of proposal for ABMU Health board in conjunction with colleagues from the Local Authorities, secondary care, and with support from the Delivery Unit, with a view to implementing this approach prior to the winter. It was also confirmed that this proposal could form the basis of a bid against the Transformation fund.

- The USC received an update on the **joint work programme between WAST and the Health Board** on managing pre-hospital demand. It was confirmed that WAST and Health Board colleagues were meeting in early June to develop a joint response to the ambulance internal audit report on hospital handover. It was also noted that there had been a productive meeting between Executives from the Health Board and WAST in April and a commitment had recently been given to recruiting a team of additional paramedics to support the out of hours service. It was confirmed that the Health Board had already commenced an analysis of ambulance demand which would feed into the National review of amber call demand which was due to be concluded by September. Further joint work was also being progressed by the Health Board, WAST and Western Bay on the management of patients who had fallen at home with the aim of reducing conveyance to hospital by an ambulance. The Unit medical director raised the issue of WAST response times to GP surgeries and it was agreed that an analysis of this data would be obtained in the first instance to inform a discussion with LMC.
- Performance. The COO reaffirmed the expectations of the Health Board and WG in relation to the improvement trajectories for unscheduled care. This required continued focus on the key improvement actions contained within the respective delivery unit plans. The recent positive improvement being achieved in PoW 4 hour performance was highlighted. On this basis, Dr Sarah Spencer was invited to talk to the next board meeting in June on the work being progressed at PoW with the support of NHS Elect.
- The next meeting of the USC board is scheduled to take place on 29<sup>th</sup> June 2018.