



Winter review and UHL winter performance

One team shared values

Winter review

Preparation

- Surge and Escalation Management
- Surge and Capacity Escalation
 - Escalation levels
 - Triggers
 - Actions
- Winter planning
- Review and learning

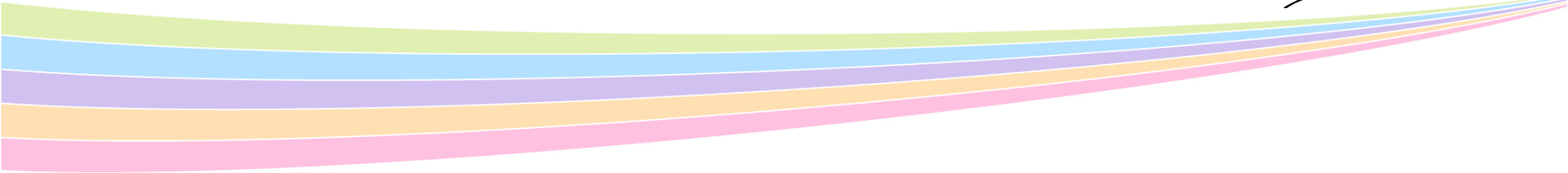
One team shared values

Actions to support winter resilience – meeting needs and sustaining flow

- **Pre hospital**
- Health promotion – flu vaccination
- Care planning for patients with long term conditions
- Admission avoidance
- **Supporting emergency flow**
- Focus on internal operational actions within UHL – operational management and monitoring, supporting discharge earlier in the day, Enhancing weekend service to improve flow
- **Supporting Discharge**
- Partner engagement in census meetings and weekend working
- Increased community beds to support timely transfers of care
- Reducing blocks and delays
- Engaging with nursing and care homes
- An increase in “Virtual beds” through Intensive Community Support

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Reviewing the effectiveness of emergency care over winter -UHL actions

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- UHL proportion of winter monies spent predominantly on additional staffing and beds
 - Changes to A&E process and flow through UHL
 - Site meetings and command and control style of working
 - Activities to support length of stay reduction through improved discharge
 - Increasing attendance from elderly frail and the role of the Elderly Frailty Unit

One team shared values

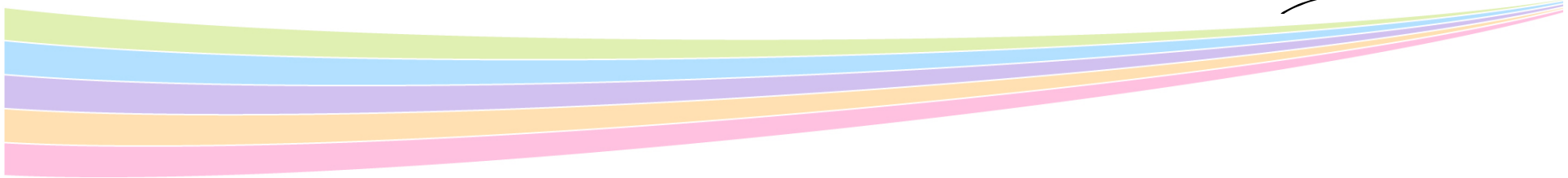
Reviewing the effectiveness of emergency care over winter - context

Non Elective medicine	2012/13	2013/14
UHL	5.7	5.2
HES PEER Average	6.8	5.6
BCBV Average	6.7	6.7
Nottingham	5.5	5.5
Sheffield	7.1	7.7
Newcastle	8.6	7.1
Leeds	7.1	7.7
Birmingham	6.3	7.4
Coventry	7.1	5.8

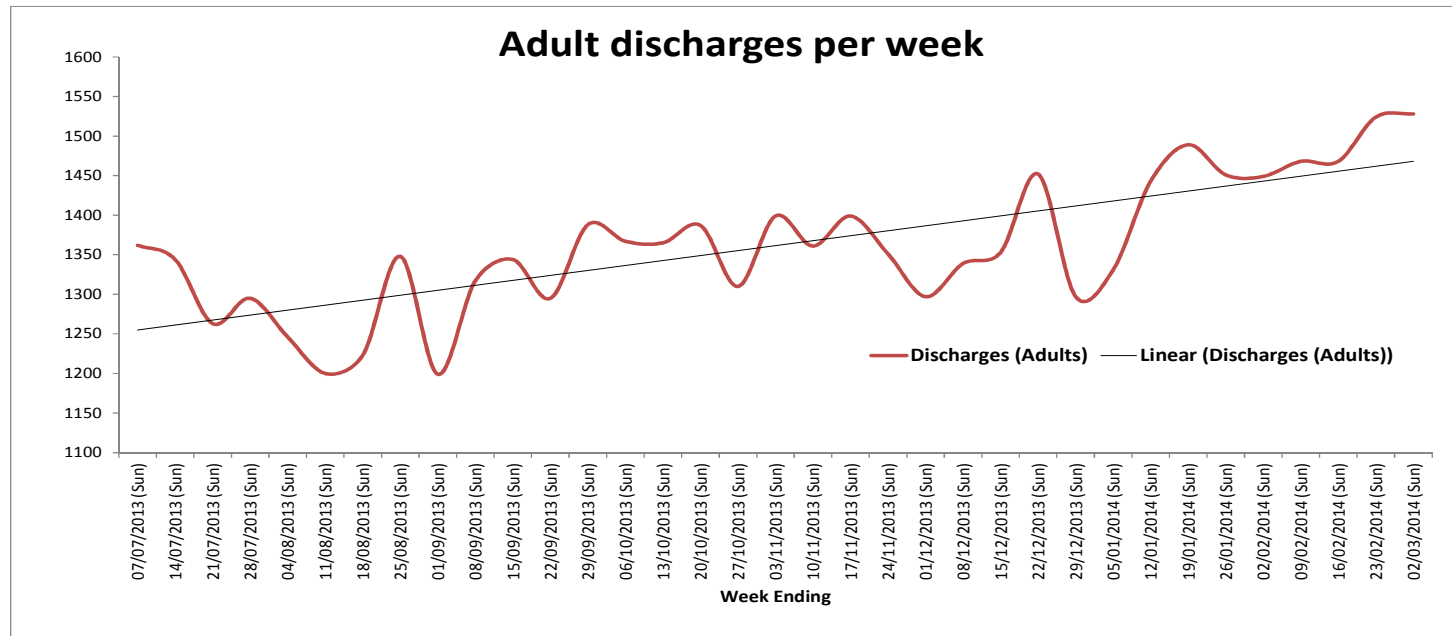
One team shared values

Discharge

Caring at its best



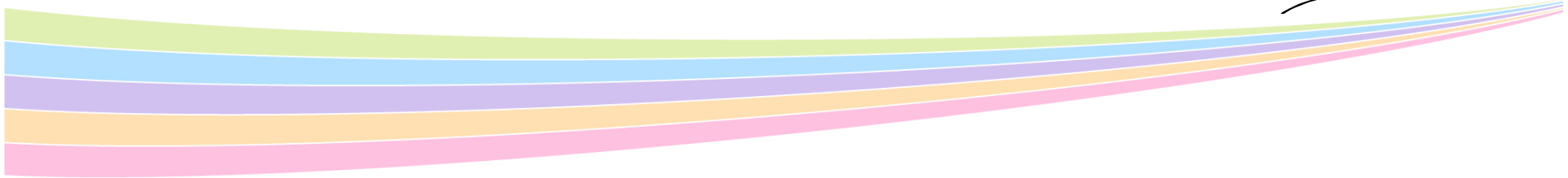
- Discharging more patients than ever before



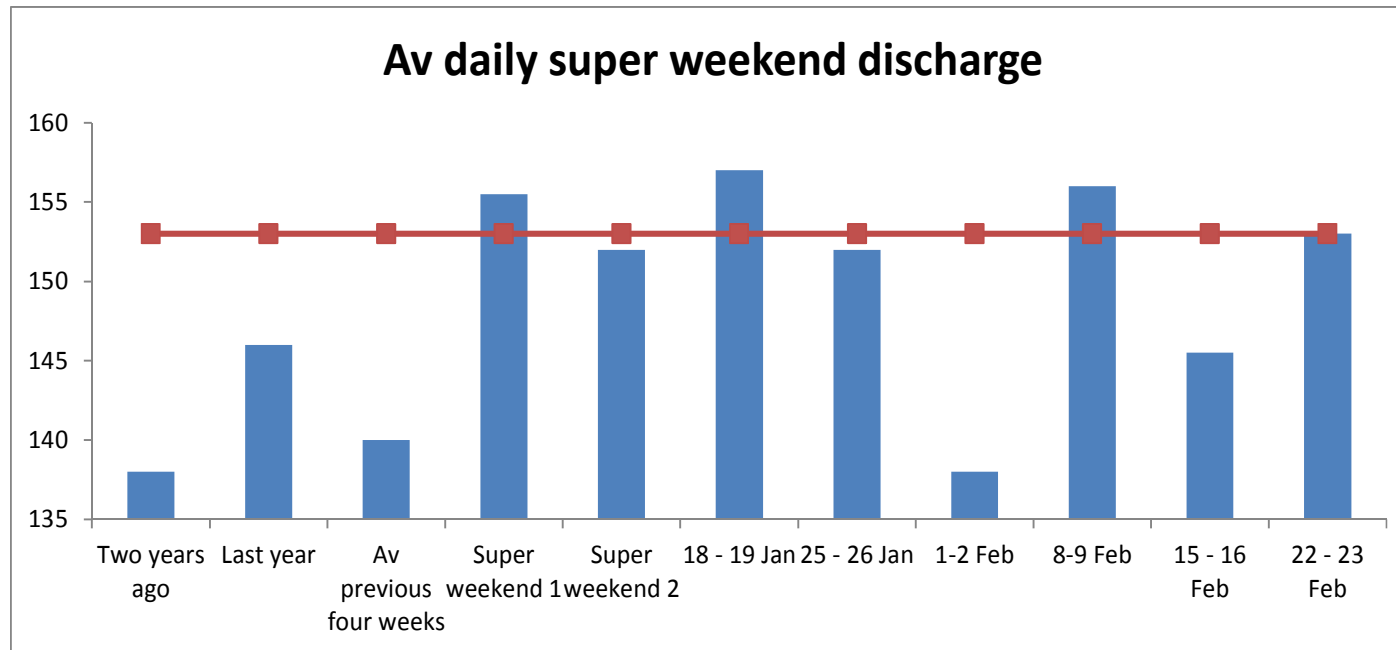
One team shared values

Discharge

Caring at its best



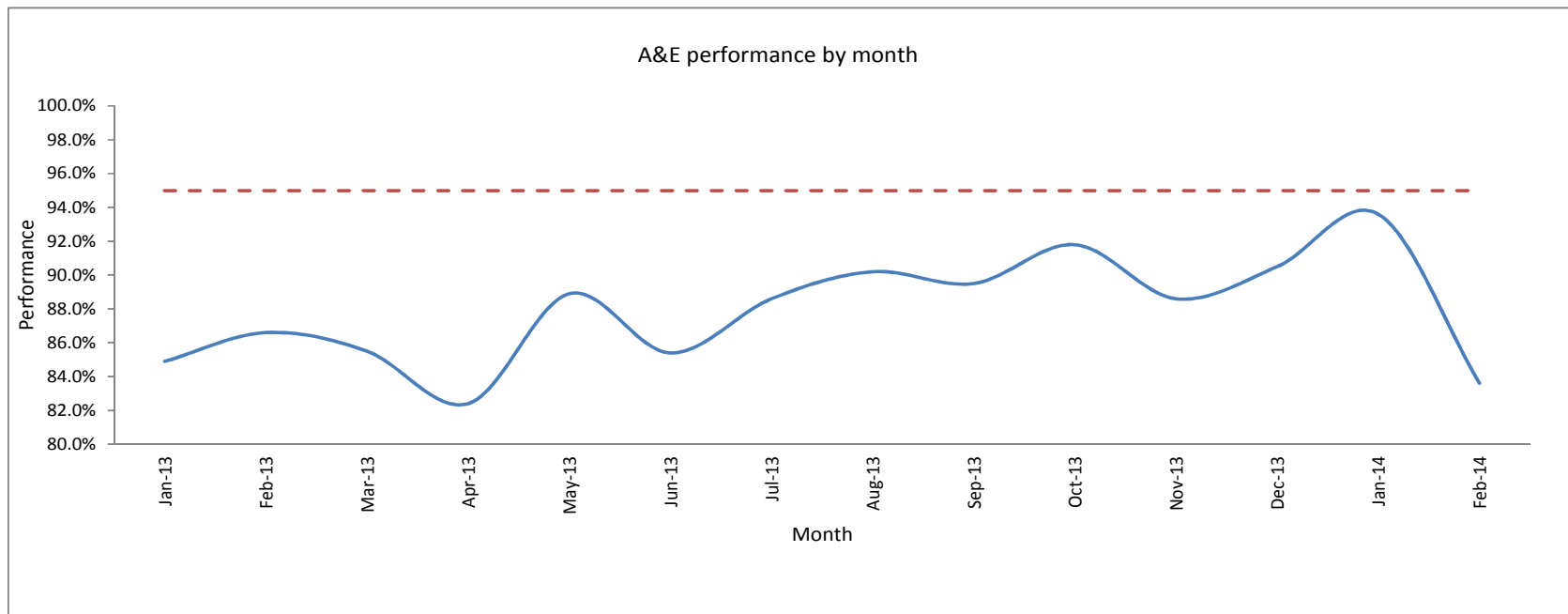
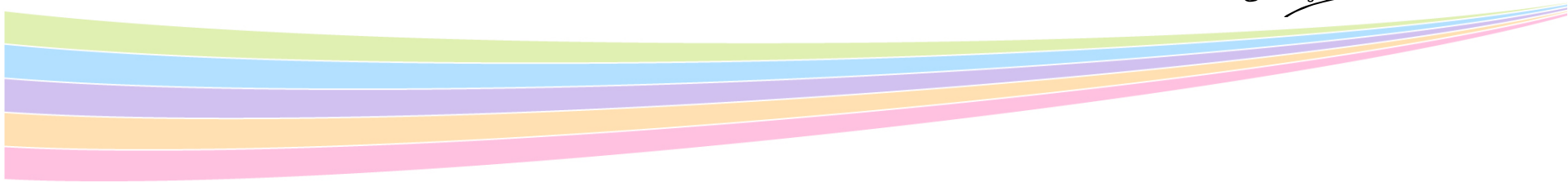
- Super weekends



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UHL winter performance

Caring at its best

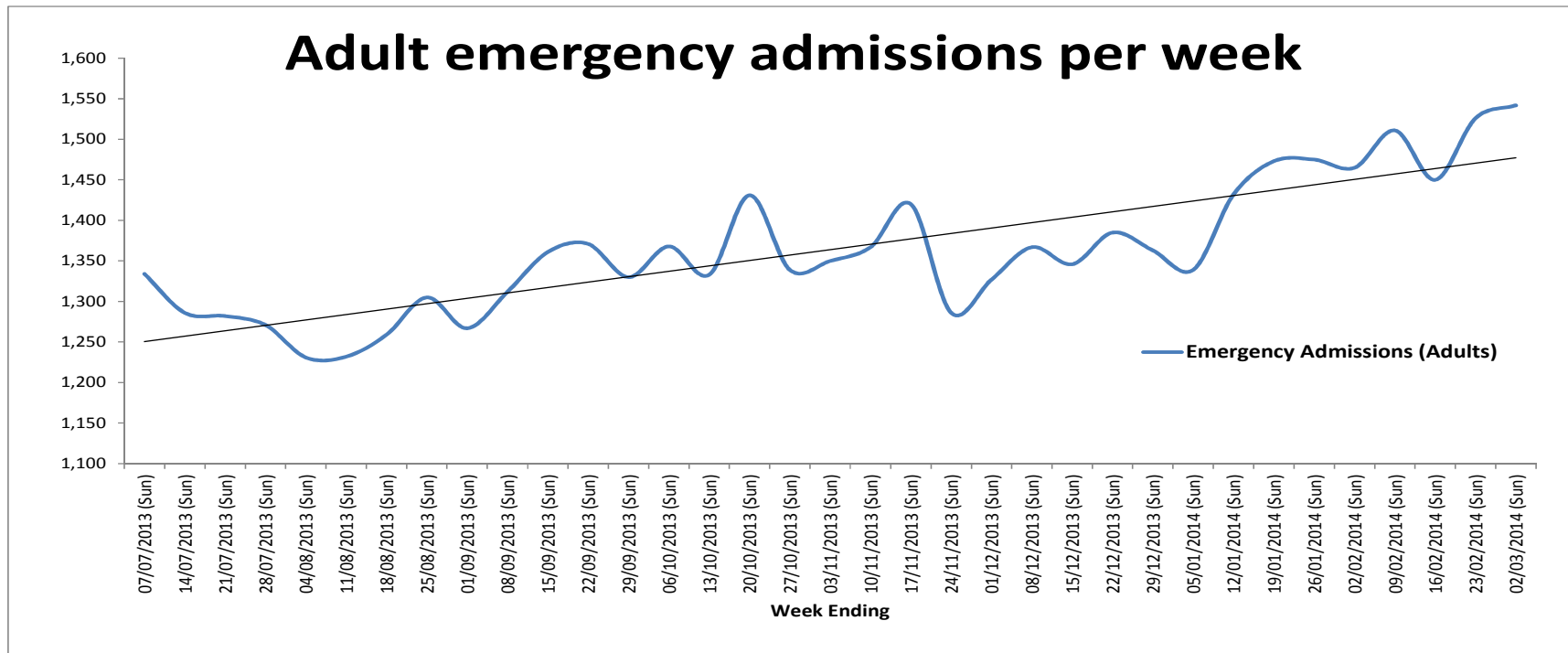
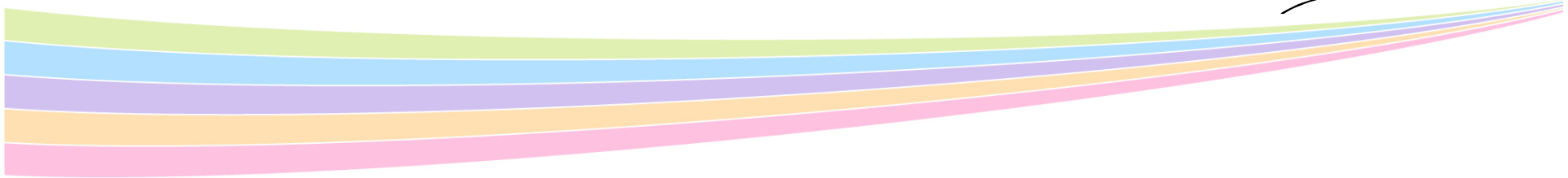


What happened in February?

One team shared values

Admissions

Caring at its best



Admissions were 9.5% higher in February compared to January - do not have the empty beds to accommodate this surge in demand

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Further actions

- Work with CCGs on reducing admissions
- 'Right size' UHL capacity – too few beds especially on LRI site
- Continue to improve discharge process in particular time of discharge
- Make full use of community beds and reduce delayed transfers of care rate (DTOC)

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