

# Worcestershire

## Improvement Plan

**In response to Omicron and sustained  
ambulance delays**

# Approach

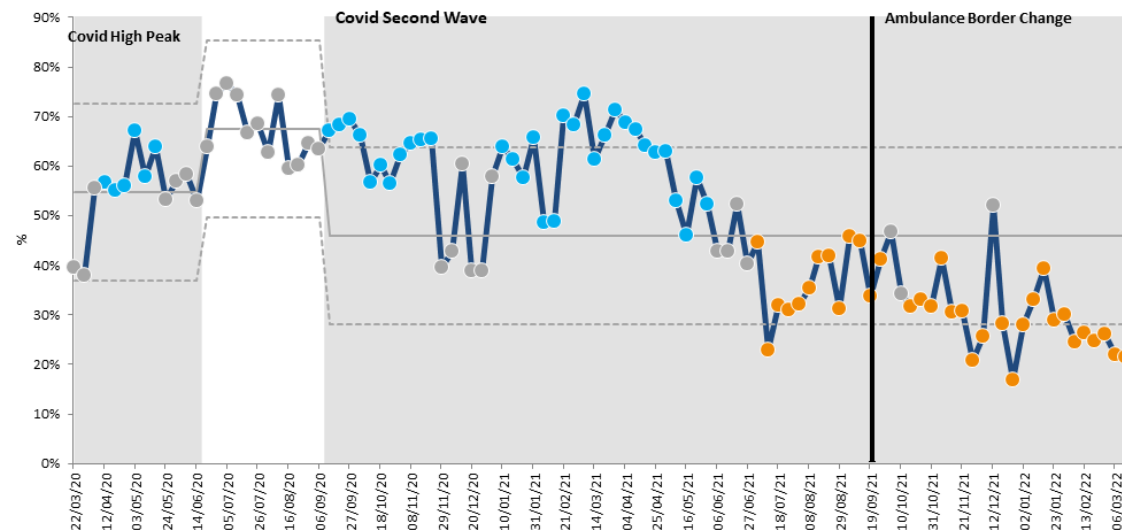
- A detailed SILVER plan is in place, managed daily across the system – led by Winter Executive
- Taken actions from all “home first” work streams plus further system risk based actions agreed with regulators aiming to deliver actions at pace/take corrective actions when required
- Assessed by region as an robust/appropriate plan
- Focusing on delivery
- Many actions delivered, largely related to increasing capacity in the pathways and to support COVID requirements
- Slides outline current focus on actions that require implementation/ require maturing

Action	Outcome to date
Further develop and mature discharge cells on both acute sites. <i>(Discharge Cells are meetings attended by senior health and social care colleagues with a focus on reducing delayed discharges)</i>	<ul style="list-style-type: none"> <li>Impact seen on reduction in time between Medically fit and actual discharge, also emphasis on “home first”.</li> <li>Plans now to mature discharge cell to focus on early in the day discharge and criteria led discharge</li> </ul>
System to identify up to 8 ward-based discharge support workers on WRH site only to enhance speed of actions required to further reduce time between MFFD and actual discharge and earlier in day discharge on acute medical and trauma wards	<ul style="list-style-type: none"> <li>System partners asked to scope ability to support</li> <li>Training package requires development and resource requirements agreed</li> <li>8-12 individuals expressed an interest – redirected from vaccination programme – funding being agreed with acute trust</li> </ul>
Urgent assessment of acute bed capacity required on WRH site to determine if an increase in beds would reduce delays	<ul style="list-style-type: none"> <li>Modelling undertaken, Current bed deficit ranges from 35 – 42. CCG / Acute colleagues to work through implications of this / solutions</li> </ul>
Implement capacity for COVID/non-COVID virtual wards <i>(Virtual wards are when patients are discharged home or to usual place of residence, but patients remain under care of consultant for a period of time)</i>	<ul style="list-style-type: none"> <li>Capacity in place and Standard Operating Policy agreed and rolled out.</li> <li>Currently No patients on ward. Clinical audit undertaken – awaiting results to come to SILVER</li> </ul>
To reinforce front door streaming in place across Trust each day <i>(Front door streaming promotes a rapid assessment of patients attending Emergency Departments and onward direction to appropriate service and thereby reducing patient delays)</i>	<ul style="list-style-type: none"> <li>Only able to undertake periodically due to staffing</li> <li>Positive impact noted when in place</li> <li>PDSA process undertaken, awaiting feedback to SILVER, initial feedback included findings re diversion to 2 hour response and acceptance by assessment units requiring improvement</li> </ul>
Development of COHORT Area <i>(A cohort area means a safe place within the hospital for patients to be handover off from the Ambulance Service to the Acute Trust and thereby reducing handover delays)</i>	<ul style="list-style-type: none"> <li>Clinical model and pathways being finalised. Implementation plan aiming for 27/3/22</li> </ul>

Action	Outcome to date
Designated COVID care home beds	<ul style="list-style-type: none"><li>Funding ceases at end of March – need to determine requirements in new financial year</li></ul>
Relocate Discharge Lounge	<ul style="list-style-type: none"><li>Will progress in line with ambulance cohort development and when COVID numbers decrease.</li></ul>
Full Roll out of Criteria Led Discharges <i>(Criteria Led Discharge is when plans are formulated for when patients can be discharged – which are enacted by Nursing staff without the need for further consultant review – and thereby reducing discharge delays)</i>	<ul style="list-style-type: none"><li>Process in place and reinforced regularly. Needs to be matured to see delivered in practice and achieve outcomes</li></ul>
Increase levels of pre midday discharge	<ul style="list-style-type: none"><li>Aligned to action related to 8 support workers and implementation of criteria led discharge</li></ul>
Enhancing PW1 capacity & implementing PW1 wrap around care <i>(Pathway 1 and Pathway1 Wrap around both support the discharge home of patients with some in-home support provided)</i>	<ul style="list-style-type: none"><li>In last 2 months significant improvement in pathway 1 flow across the system, Ongoing monitoring in place for sustainability and procurement of element of ongoing service managed through DRG.</li><li>Wrap around care commenced 14/03</li></ul>
Opening of a further ward	<ul style="list-style-type: none"><li>Harvington ward confirmed to be utilised to end of April (15 additional beds).</li></ul>

## Ambulance Handovers % < 15 mins: w/e 3rd April 2022

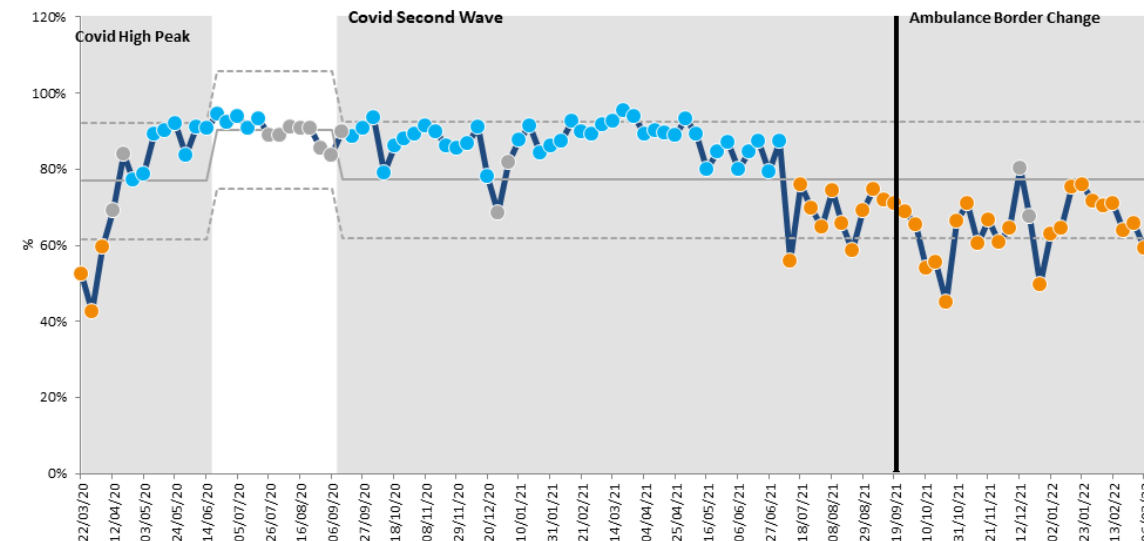
% of Ambulance Handovers < 15 minutes Worcestershire Royal Hospital



Special Cause Concern

Special Cause Concern

% of Ambulance Handovers < 15 minutes Alexandra Hospital

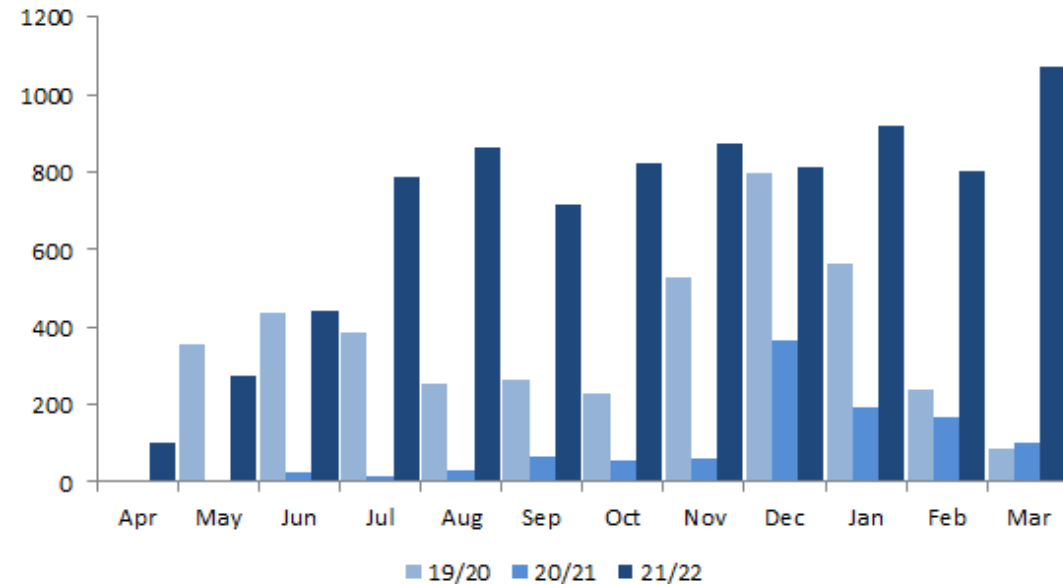


Data taken directly from WMAS Extranet site

## Ambulance > 60 min Handovers : Latest data 6<sup>th</sup> April 2022

### Over 1 hour breaches

Month	WRH	AGH	Total
Apr-19	0	0	0
May-19	225	129	354
Jun-19	314	124	438
Jul-19	257	129	386
Aug-19	168	84	252
Sep-19	197	67	264
Oct-19	115	113	228
Nov-19	415	113	528
Dec-19	513	284	797
Jan-20	449	117	566
Feb-20	190	49	239
Mar-20	73	15	88
Apr-20	2	0	2
May-20	3	0	3
Jun-20	25	0	25
Jul-20	12	1	13
Aug-20	27	1	28
Sep-20	66	1	67
Oct-20	52	6	58
Nov-20	60	3	63
Dec-20	352	13	365
Jan-21	158	34	192
Feb-21	167	3	170
Mar-21	96	4	100
Apr-21	99	2	101
May-21	255	18	273
Jun-21	406	38	444
Jul-21	692	97	789
Aug-21	718	144	862
Sep-21	603	112	715
Oct-21	658	165	823
Nov-21	691	181	872
Dec-21	706	105	811
Jan-22	791	130	921
Feb-22	753	51	804
Mar-22	876	198	1074
Apr-22	181	43	224



Data taken directly from WMAS  
Extranet site

## Ambulance Delays: WRH March 2022

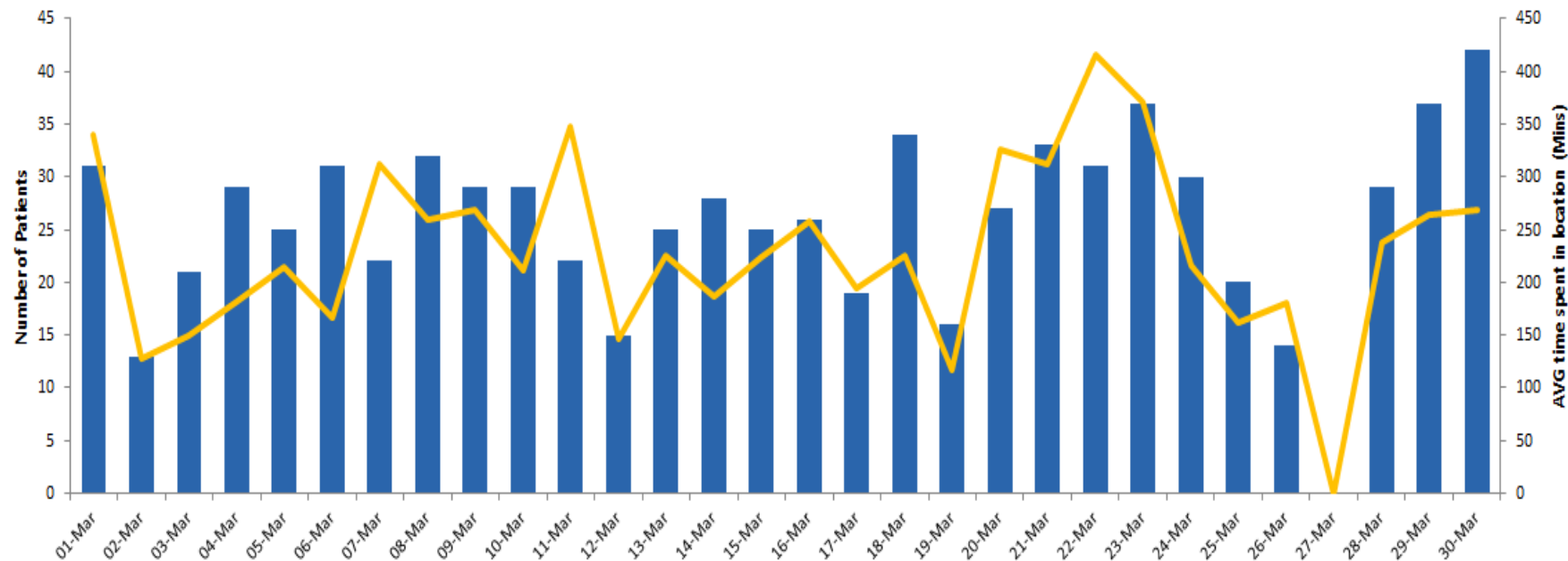
### Ambulance delays can we tell how long ambulances have been outside the hospital with patients

The information below looks at how long patients at WRH are recorded in the Location *"At ED on WMAS vehicle"* showing the AVG time spent in this Location for **those patients that spent over 1 hour in the location**. The first table shows AVG time per month for this cohort while the graph shows March 2022 by day against the number of pts recorded in that location who spent over 1 hour in there.

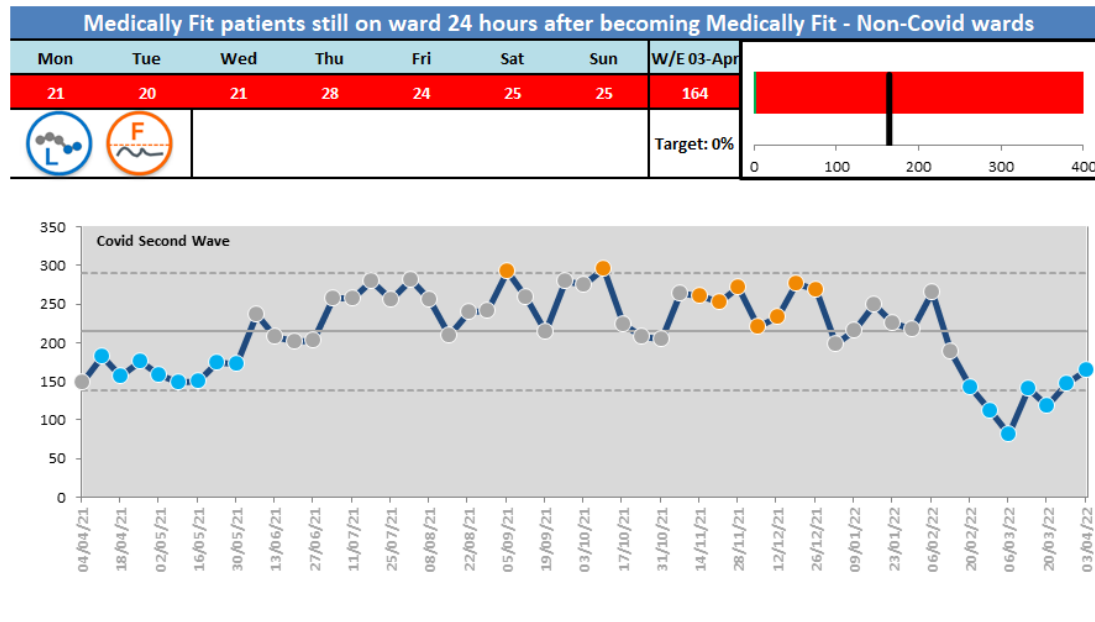
Not all ambulance arrivals will be recorded in this location.

Month	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22
AVG time	74	73	98	104	99	142	132	113	121	121	103	114	153	170	149	164	183	212	222	200	250

Number of Patients recorded in location of at ED on WMAS vehicle vs the AVG time spent in that location :  
March 2022



## Still on Non COVID ward 24 hours after becoming Medically Fit - w/e 3rd April 2022



WRH Special Cause Improvement

AGH Special Cause Improvement

