

Board of Directors

Subject:	Winter Plan		Date: 19 September 2017	
Prepared By:	Denise Smith, Acting Chief Operating Officer			
Approved By:	Denise Smith, Acting Chief Operating Officer			
Presented By:	Denise Smith, Acting Chief Operating Officer			
Purpose				
The winter plan for 2017/18 is presented for approval .			Decision	
			Approval	X
			Assurance	
Strategic Objectives				
To provide outstanding care to our patients	To support each other to do a great job	To inspire excellence	To get the most from our resources	To play a leading role in transforming health and care services
X			X	
Overall Level of Assurance				
	Significant	Sufficient	Limited	None
		X		
Risks/Issues				
Financial	Increased expenditure over the winter period to support increased capacity			
Patient Impact	Increased demand may have a detrimental impact on patient flow			
Staff Impact	Increased demand may cause increased pressures on staff			
Services	Increased demand for services over the winter period			
Reputational	Potential impact on reputation as a result of pressures on patient flow			
Committees/groups where this item has been presented before				
Executive Team 13 September 2017				
Executive Summary				
<p>This paper sets out the Trust plans to increase capacity to manage the surge in demand expected during the winter period. For 2017/18 the winter period is defined as 1 November 2017 to 6 April 2018.</p>				

1. Introduction

This paper sets out the Trust plans to increase capacity to manage the surge in demand expected during the winter period. For 2017/18 the winter period is defined as 1 November 2017 to 6 April 2018.

1. Aim

The overarching aim of the winter plan is to ensure there is sufficient capacity to meet predicted demand, maintain patient safety and patient flow.

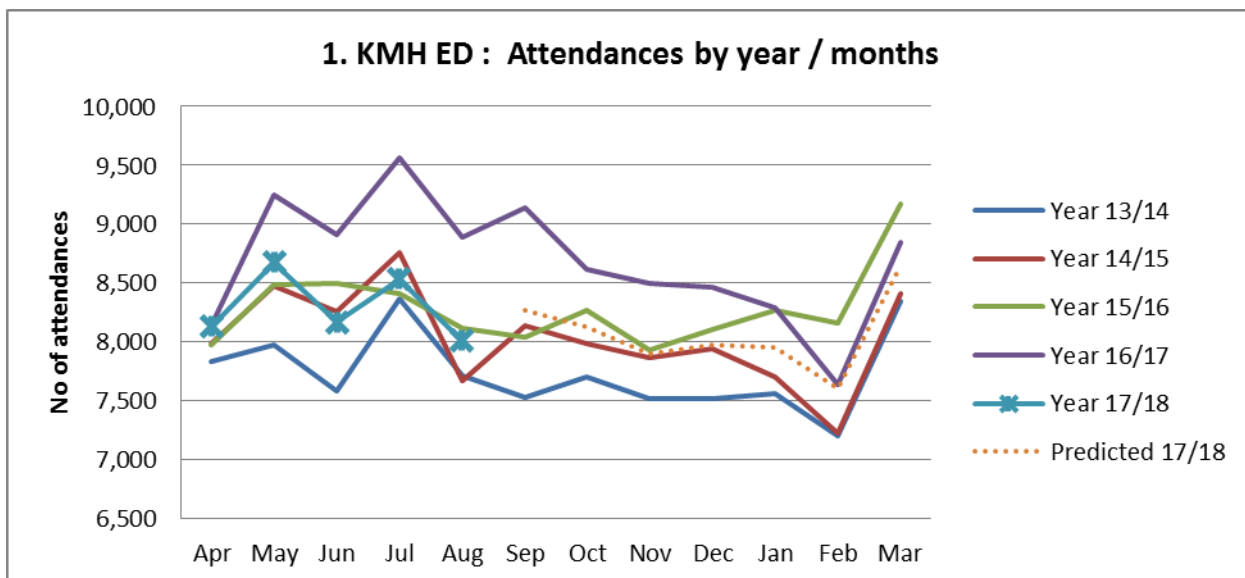
2. Objectives

The key objectives of the winter plan are to:

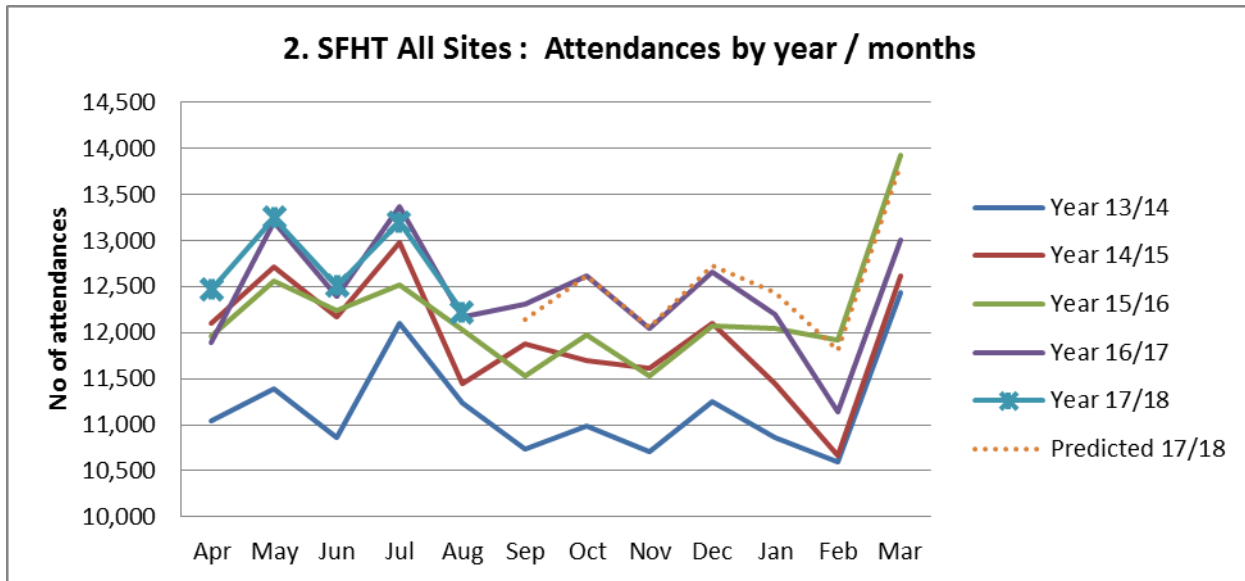
- Work with local primary, community and ambulance service providers to ensure alternatives to attendance and admission are available
- Increase Emergency Department and assessment capacity to manage peaks in demand
- Maximise ambulatory emergency care to maintain optimal admission conversion rates
- Increase the medical inpatient bed base to minimise / eliminate medical outliers
- Maintain effective discharge processes and minimise delayed transfers of care
- Minimise the impact on elective activity

3. Forecast demand

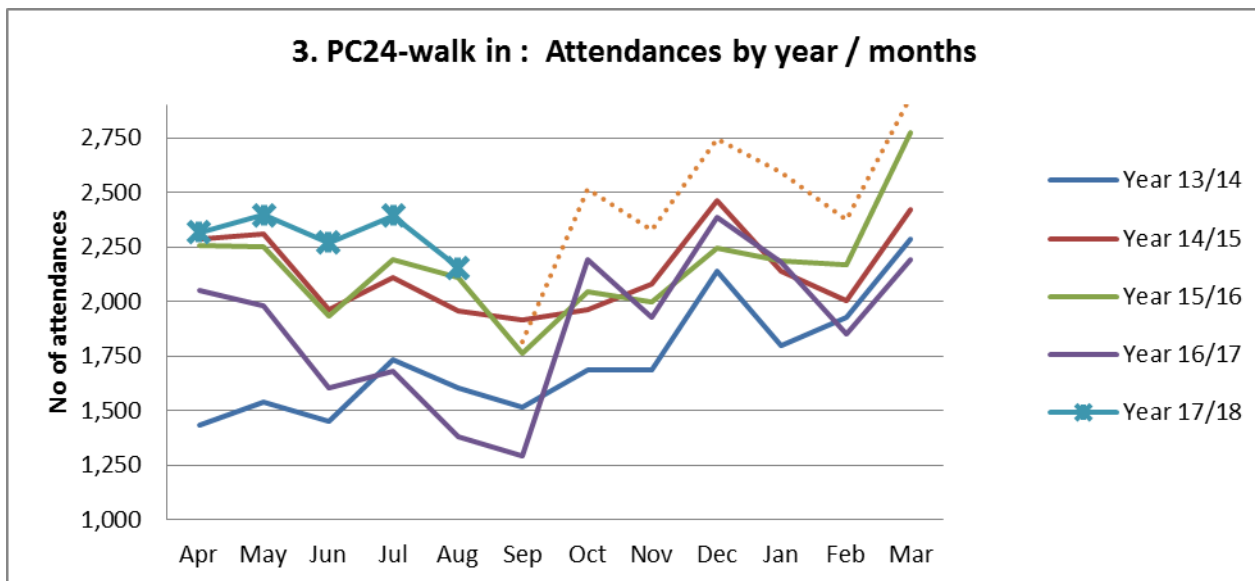
The following graphs show non-elective demand for 2016/17 and year to date, together with predicted demand to 31 March 2018.



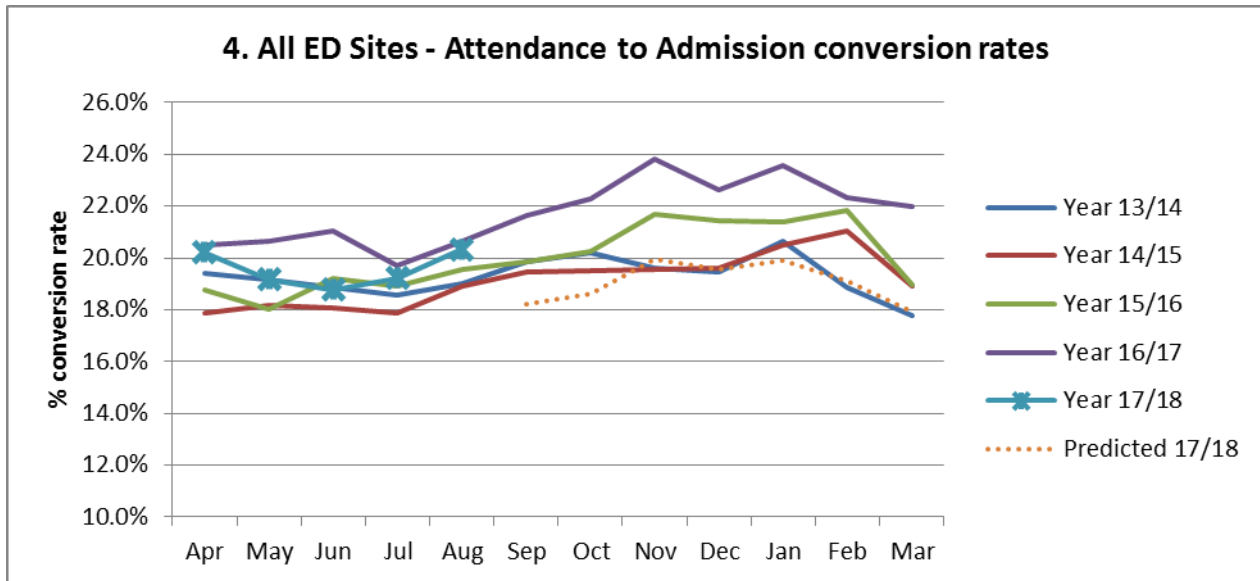
KMH	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		
Year 13/14		7,829	7,974	7,582	8,370	7,713	7,527	7,701	7,518	7,520	7,565	7,197	8,340	92,836
Year 14/15		7,986	8,478	8,257	8,756	7,665	8,138	7,986	7,863	7,939	7,702	7,224	8,405	96,399
Year 15/16		7,972	8,490	8,495	8,407	8,114	8,035	8,270	7,929	8,110	8,270	8,163	9,167	99,422
Year 16/17		8,139	9,247	8,907	9,563	8,894	9,138	8,612	8,493	8,466	8,295	7,642	8,842	104,238
Year 17/18		8,129	8,675	8,168	8,535	8,012								41,519
Predicted 17/18							8272	8131	7903	7977	7955	7600	8650	56,488



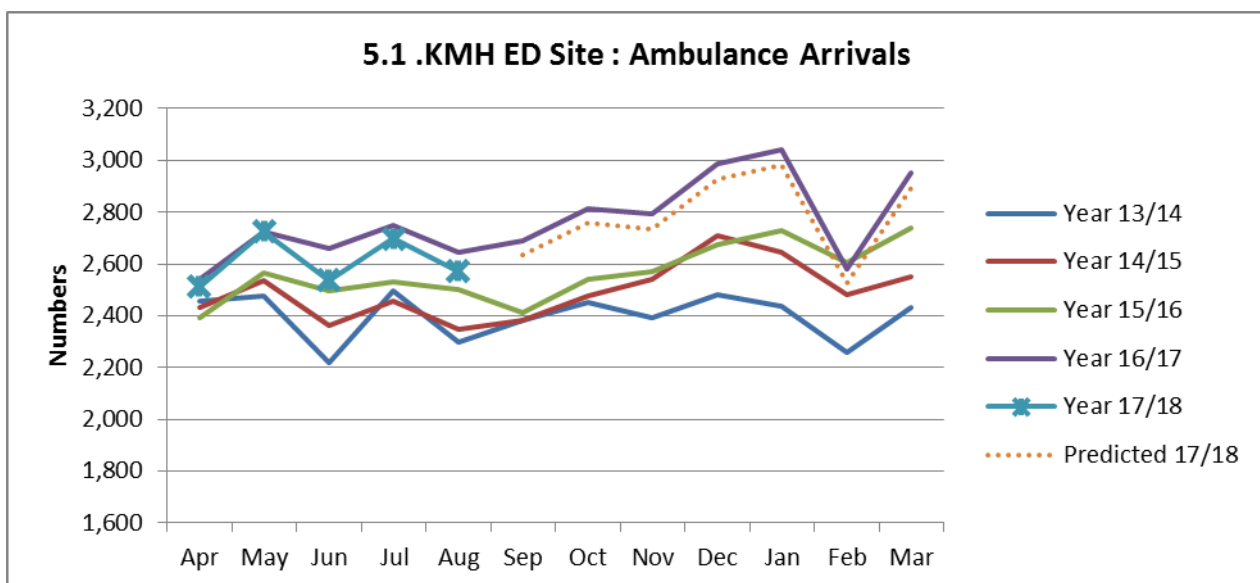
SFHT All	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		
Year 13/14		11,037	11,389	10,862	12,097	11,238	10,737	10,983	10,704	11,245	10,858	10,597	12,435	134,182
Year 14/15		12,095	12,720	12,175	12,978	11,444	11,874	11,703	11,610	12,105	11,447	10,666	12,623	143,440
Year 15/16		11,968	12,561	12,239	12,518	12,034	11,527	11,971	11,532	12,077	12,050	11,924	13,932	146,333
Year 16/17		11,892	13,206	12,389	13,375	12,176	12,314	12,616	12,049	12,660	12,203	11,136	13,011	149,027
Year 17/18		12,471	13,251	12,512	13,200	12,225								63,659
Predicted 17/18							12137	12614	12066	12728	12434	11810	13837	87,626



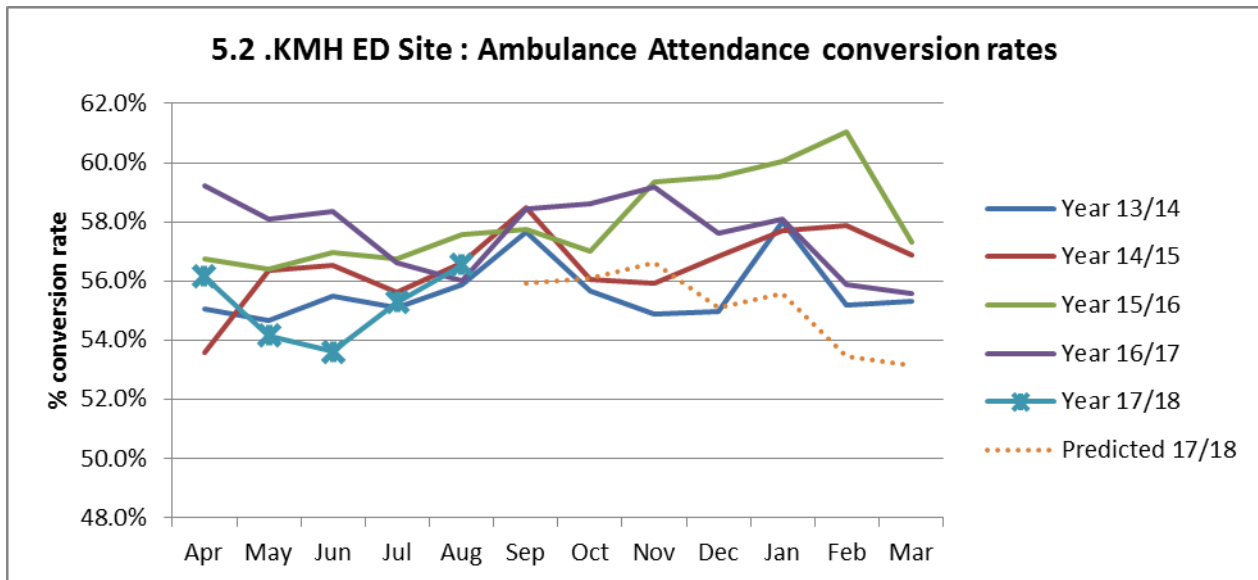
PC24	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		
Year 13/14		1,433	1,542	1,452	1,732	1,603	1,516	1,687	1,688	2,142	1,799	1,929	2,285	20,808
Year 14/15		2,286	2,314	1,962	2,111	1,958	1,915	1,964	2,081	2,462	2,143	2,008	2,423	25,627
Year 15/16		2,260	2,250	1,935	2,191	2,114	1,762	2,047	1,998	2,245	2,189	2,169	2,776	25,936
Year 16/17		2,052	1,980	1,603	1,682	1,383	1,294	2,193	1,928	2,388	2,184	1,852	2,196	22,735
Year 17/18		2,319	2,397	2,272	2,394	2,157								11,539
Predicted 17/18							1815	2518	2330	2749	2596	2376	2939	17,323



KMH	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
Year 13/14		19.4%	19.2%	18.8%	18.6%	19.0%	19.9%	20.2%	19.6%	19.4%	20.6%	18.9%	17.7%
Year 14/15		17.9%	18.1%	18.1%	17.8%	18.9%	19.5%	19.5%	19.6%	19.6%	20.5%	21.1%	18.9%
Year 15/16		18.8%	18.0%	19.2%	18.9%	19.6%	19.8%	20.2%	21.7%	21.4%	21.4%	21.8%	19.0%
Year 16/17		20.5%	20.6%	21.0%	19.7%	20.7%	21.6%	22.3%	23.8%	22.6%	23.6%	22.3%	22.0%
Year 17/18		20.2%	19.2%	18.8%	19.2%	20.3%							
Predicted 17/18							18.2%	18.6%	19.9%	19.5%	19.9%	19.1%	17.9%



KMH	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Year 13/14		2,454	2,218	2,495	2,298	2,383	2,452	2,392	2,479	2,436	2,259	2,431
Year 14/15		2,434	2,364	2,457	2,348	2,384	2,476	2,539	2,710	2,645	2,482	2,552
Year 15/16		2,392	2,496	2,530	2,503	2,411	2,541	2,569	2,672	2,727	2,607	2,739
Year 16/17		2,539	2,722	2,661	2,749	2,644	2,688	2,814	2,791	2,987	3,042	2,951
Year 17/18		2,511	2,725	2,536	2,699	2,571						
Predicted 17/18						2633	2756	2734	2926	2980	2528	2890



KMH	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
Year 13/14		55.1%	54.7%	55.5%	55.1%	55.9%	57.7%	55.7%	54.9%	55.0%	58.0%	55.2%	55.3%
Year 14/15		53.6%	56.4%	56.5%	55.6%	56.6%	58.5%	56.1%	55.9%	56.8%	57.7%	57.9%	56.9%
Year 15/16		56.7%	56.4%	57.0%	56.8%	57.6%	57.7%	57.0%	59.4%	59.5%	60.1%	61.0%	57.3%
Year 16/17		59.2%	58.1%	58.4%	56.6%	56.0%	58.4%	58.6%	59.2%	57.6%	58.1%	55.9%	55.6%
Year 17/18		56.2%	54.2%	53.6%	55.3%	56.6%							
Predicted 17/18						55.9%	56.1%	56.6%	55.1%	55.6%	53.4%	53.2%	

4. Capacity planning

The following additional capacity will be put in place during the winter period:

Bed capacity

The current Trust core bed stock and flex capacity is detailed below:

Division	Core	Flex	Total
UEC	64	8	72
W&C	53	1	54
Surgery	117	3	120
Medicine	348	44	392
	582	56	638

The Trust will plan to open the flex capacity, taking a phased approach, from November to January. This flex capacity will be stepped down incrementally as demand returns routine levels from February onwards.

Emergency Department

An additional middle grade shift will be in place 7 days a week, 6.00pm to 3.00am to manage the surge in attendances from early evening.

A transfer team will be in place 7 days per week, 3.00pm to midnight to support the transfer of patients requiring admission from the Emergency Department to an assessment area or inpatient ward.

An additional Paediatric Consultant and Registered Children's Nurse will be available to support the Emergency Department, 3.00pm to 10.00pm, Monday to Friday.

Ambulatory Emergency Care

It is planned to increase the physical capacity and hours of operation of the ambulatory emergency care unit. This will support the increase of same day emergency care, thereby reducing the inpatient bed demand.

Discharge Lounge

The discharge lounge will open at weekends, 10.00am – 4.00pm.

Support Services

An additional duty nurse manager will be on site 7 days per week, 4.00pm to midnight, to support patient flow.

Increased junior doctor cover will be in place to ensure TTOs are available in a timely manner, thereby avoiding delays to discharges.

Patient transport services will be increased to support timely discharge.

Increased pharmacy, radiology and therapy services will be available to urgent and emergency care areas to maintain good patient flow and support timely discharge.

5. Workforce

As in previous years, the Trust workforce plan for winter will be to utilise bank and agency staff to increase staffing levels as required.

6. Finance

The Trust has set aside £1.1m winter pressures funding, this is based on the amount spent on additional capacity to manage winter 2016/17. For month 6 reporting, the anticipated income and expenditure implications need will be included in the forecast outturn for each Division.

7. Additional actions

Flu planning

The Trust has a comprehensive immunisation programme in place which is well underway, it is anticipated that there will be a high take up of the flu vaccine across all staff groups.

Reducing delayed transfers of care

The Trust will maintain close operational links with local authority and community services partners to minimise delayed transfers of care.

Wider system preparation

The Trust is closely involved in the wider system resilience planning through the A&E Delivery Board and will continue to work with all partners to maintain effective patient flow.

8. Recommendations

The Trust Board is asked to approve the winter plan for 2017/18.