

URGENT CARE IN SALFORD



- **The right team – who needs to be involved?**
 - Health Authority
 - Salford City Council (Social Services & Housing)
 - Salford Community Trust
 - Salford Royal Foundation Trust
 - General Practitioners
 - Greater Manchester Ambulance Service
 - Age Concern & other voluntary agencies

Responding to Winter Pressures...

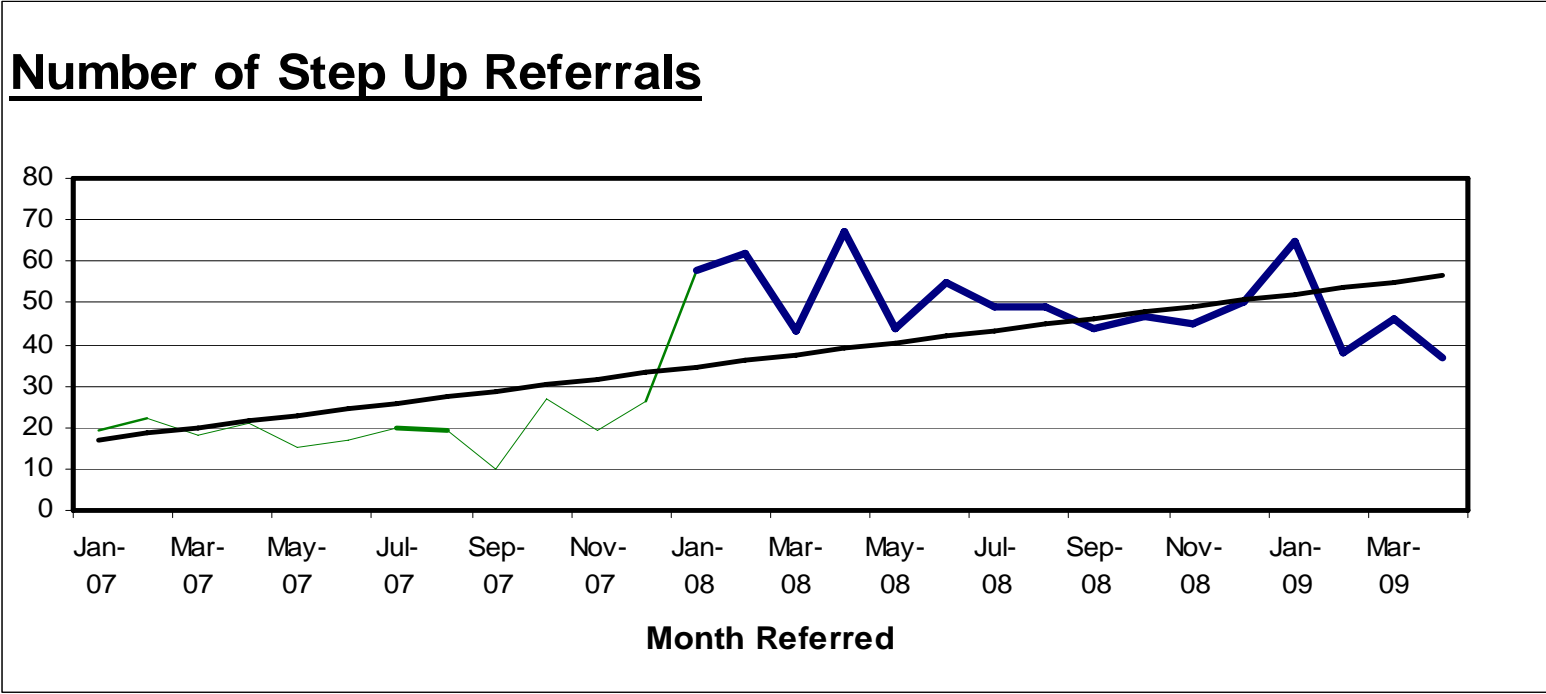
- Single Entry Point
- Implemented enhanced Rapid Response Team (RRT) – Admission Avoidance
- RRT attending PTWRs
- Early Supportive Discharge
- RRT assessors in emergency areas
- Spot purchase beds
- Dedicated therapy teams for community beds

Aims of the Enhanced RRT...

- Divert GP calls from hospital to SEP
- Multi-disciplinary assessment in own home
- Provide patient choice – to remain at home
- Avoid inappropriate admissions
- Provide physical bed as an alternative to hospital
- Stagger hospital admissions
- Increase confidence in Intermediate Tier Services

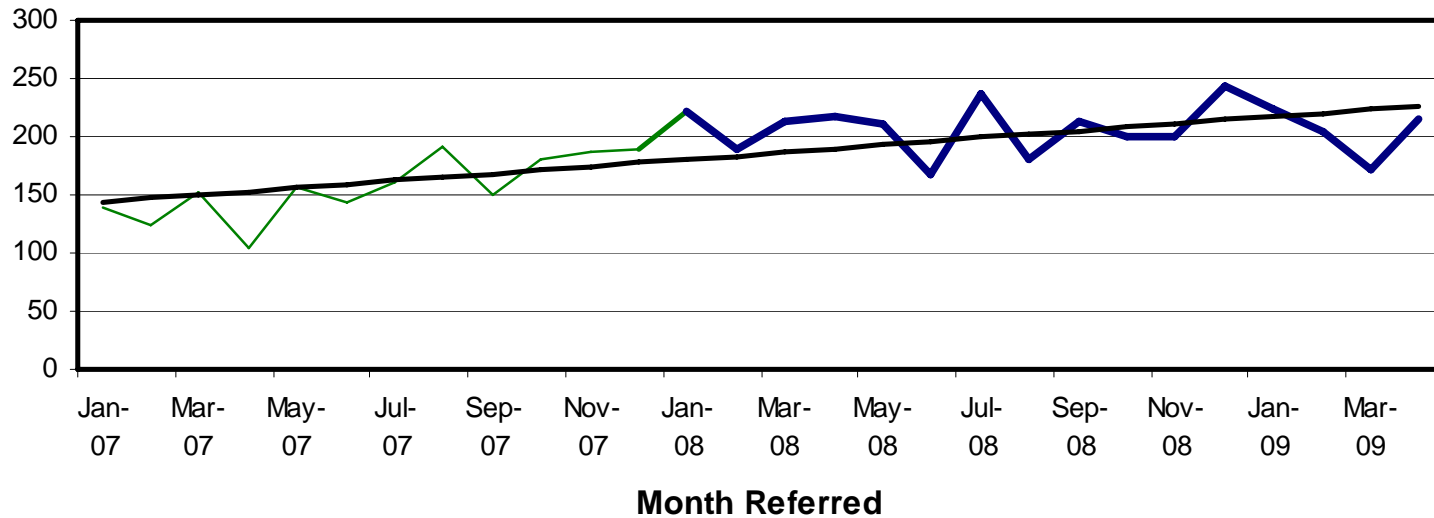
- **Services avoided by Enhanced Rapid Response intervention?**
 - 999 and Urgent Ambulances
 - Accident and Emergency
 - Unplanned acute admissions
 - Social emergency respite (residential/nursing home)
- **The confusion around which services to access from the community not only creates poor patient pathways but costs time and money**

Outcomes – Stepped up referrals



Outcomes – Stepped down referrals

Number of Step Down Referrals



Primary Care Centre

- Pilot scheme – operational 23rd December 2007 as part of the A&E action plan.
- Co-located with the GP Out of Hours service, in close proximity to the A&E department, on SRFT site

Aim

- Support improvements in achieving the A&E 4 hour waiting time targets
- Manage primary care patients that present to A&E
- Development of an integrated triage tool for A&E to streamline primary care patients
- Provide a mechanism to monitor the types of primary care patients presenting at A&E

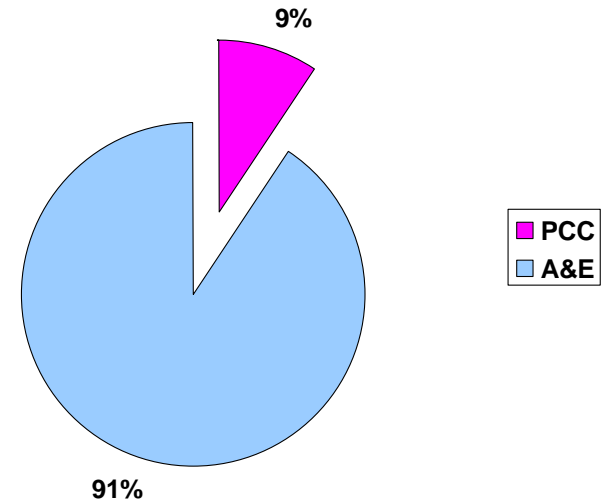
Primary Care Centre

Outcome

Since 23 December 2007

115,590 non-emergency presentations
of which

10,975 diverted to the Primary Care Centre



Key Factors for Success

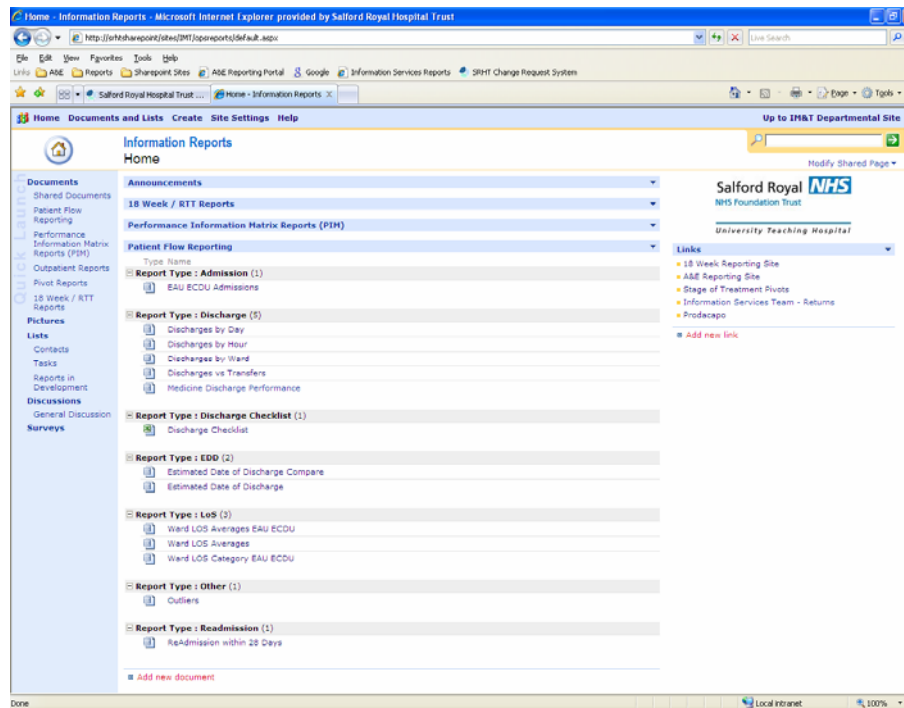
- Partnership working across primary and secondary care at clinical and managerial level
- Willingness to integrate and co-locate clinical teams
- Support of PCT and practice based commissioners
- Appropriate triage pathways delivering right patient, right time, right place

Patient Flow Reports

- Emergency Admission Reports
- Discharge Reports
- Discharge Planning Reports
- Length of Stay (Ward based) Reports
- Readmission Report
- Outlier Report

Reporting Access

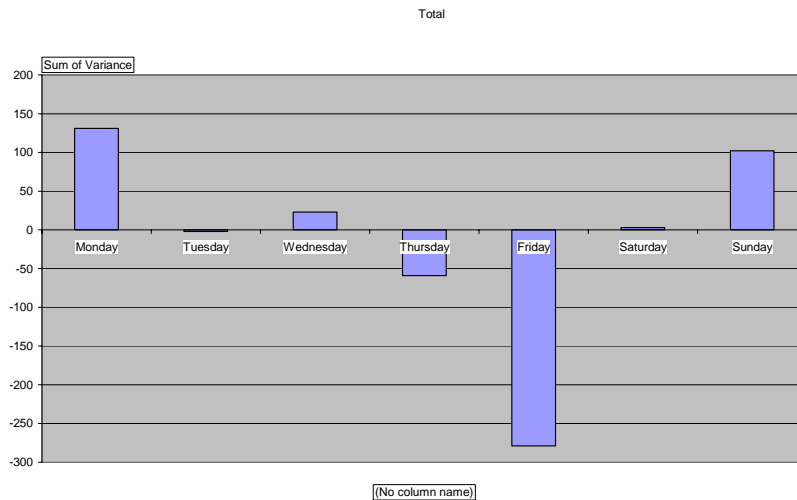
- Information held in a secure central area (Sharepoint)



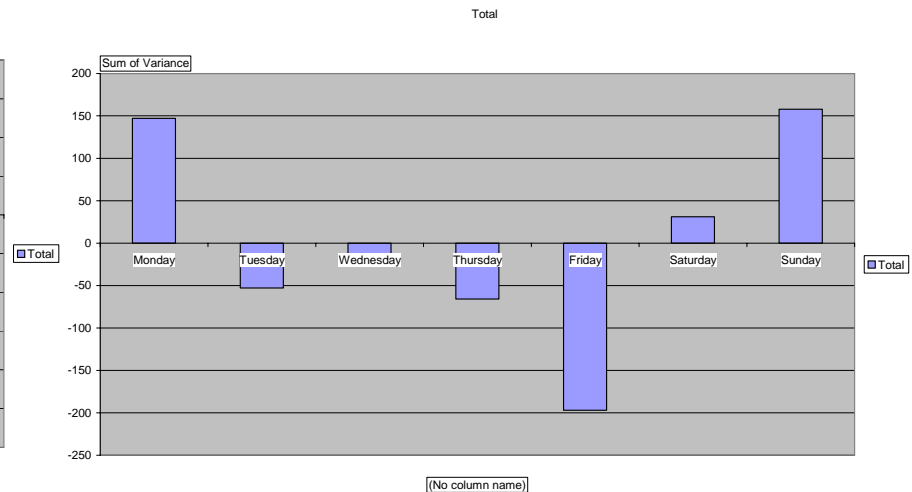
Admission vs Discharges

- Improvement in the number of Admissions against the number of Discharges

4 Weeks in June 07



4 Weeks in June 08



Discharges by Ward

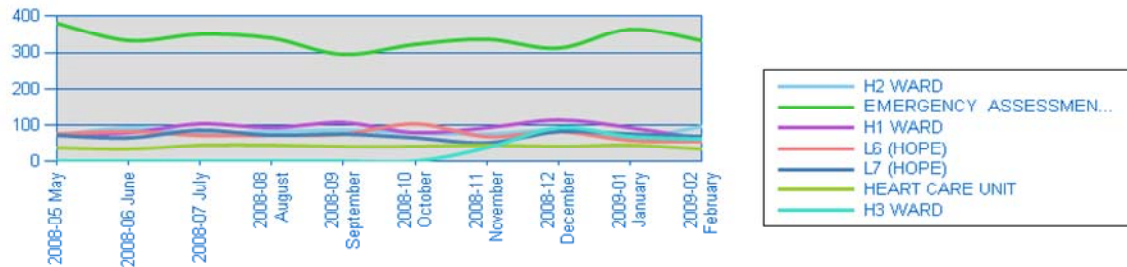
Version 1: 29/04/2008

The Discharges by Day Report shows the number of Discharges by Ward for the last 12 months. The report excludes Maternity, ICU, MIU wards and A&E attendances (where speciality = 'HCG')

For the latest week's data, Sunday's information may not be complete as patient records are updated on the Monday.

The Ward Category filter at the top of the report is defaulted to Acute Medicine, please select one from the drop down list.

	EMERGENCY ASSESSMENT UNIT	H1 WARD	H2 WARD	H3 WARD	HEART CARE UNIT	L6 (HOPE)	L7 (HOPE)
2008-05 May	380	77	72	0	38	76	74
2008-06 June	333	80	92	0	35	82	66
2008-07 July	351	102	81	0	47	72	85
2008-08 August	340	92	82	0	44	74	74
2008-09	296	106	86	0	43	77	75
2008-10 October	322	79	81	0	43	104	66
2008-11	335	94	77	40	46	71	53
2008-12	313	113	88	94	41	82	84
2009-01 January	365	94	66	68	44	58	77
2009-02 February	332	64	96	64	34	54	71
Total	3367	901	821	266	415	750	725



The information in the report is taken from Discharge information held on the PAS system.

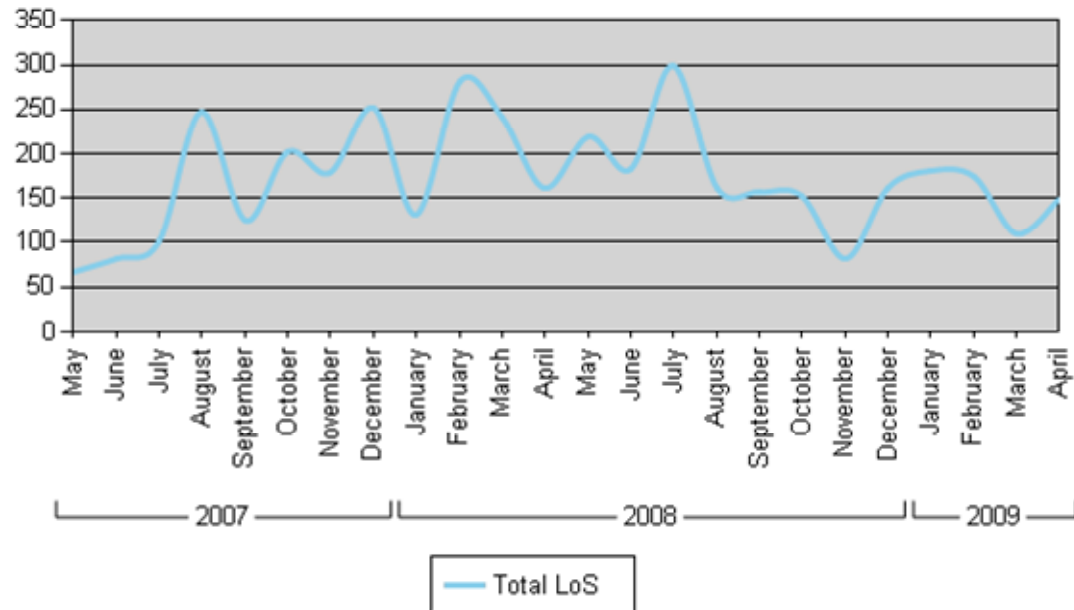
Version 1: 23/09/2008

The Virtual Ward Report displays the number of patients on the virtual ward, the average length of stay by year and month and the total length of stay by year and month.

The report shows information since the Virtual ward started, from May 2007.

Year	Patients	Average LoS	Total LoS
2007			
2008			
2009			
	642	7.16	4096

Virtual Ward Total LoS



The report is sourced from Virtual Ward information from within the EPR system.

Estimated Date of Discharge

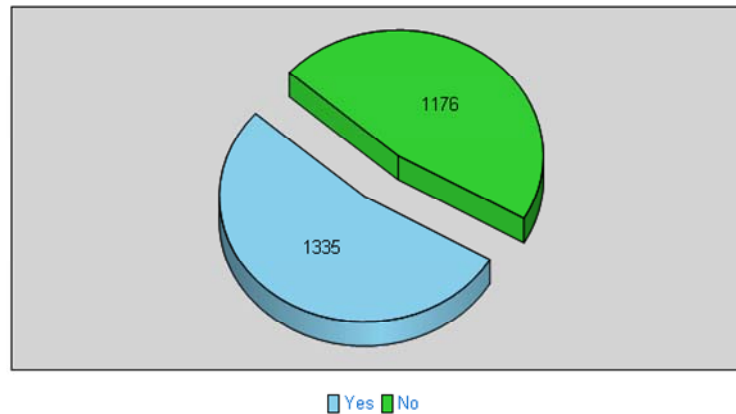
Version 1: 29/04/2008

The Estimated Date of Discharge Report shows the number of discharges where an Estimated Date of Discharge has or hasn't been completed for the last 12 months.

The report excludes Maternity, ICU, MIU wards and A&E attendances (where specialty = 'HCG'). Day Cases are also excluded. For the latest week's data, Sunday's information may not be complete as patient records are updated on the Monday.

EDD Completed	Discharge Month	Discharge Date	Patients
No			1176
Yes			1335

Estimated Date of Discharge Complete



The report is derived from Discharge information held within the PAS system and Estimated Date of Discharge information on EPR.

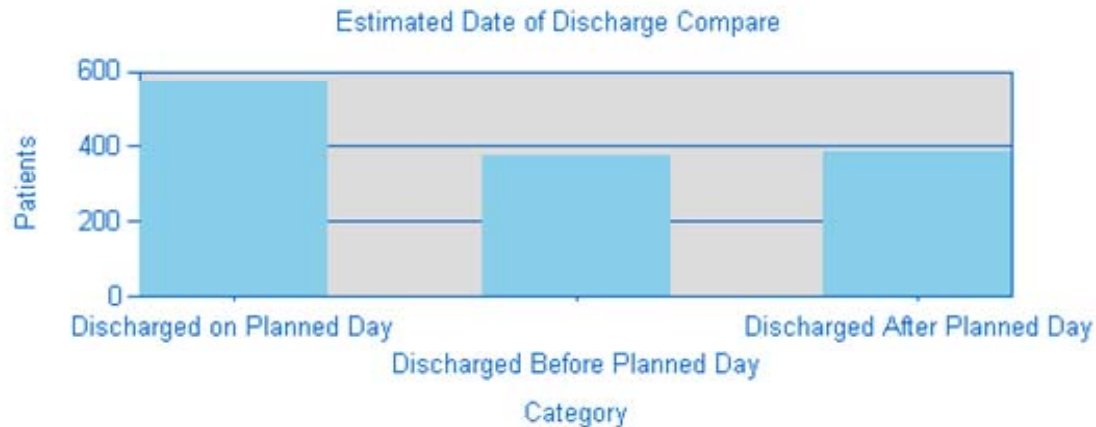
Estimated Date of Discharge Compare

Version 1: 29/04/2008

The Estimated Date of Discharge Compare Report compares the EDD Date with the Actual Discharge Date for all Discharges with an EDD Date for the last 12 months.

The report excludes Maternity, ICU, MIU wards and A&E attendances (where specialty = 'HCG'). Day Cases are also excluded from the report. For the latest week's data, Sunday's information may not be complete as patient records are updated on the Monday.

Discharge Status	Discharge Month	Discharge Date	Patients
Discharged After Planned Day			388
Discharged Before Planned Day			375
Discharged on Planned Day			572



The report is derived from Discharge information held within the PAS system and Estimated Date of Discharge information on EPR.

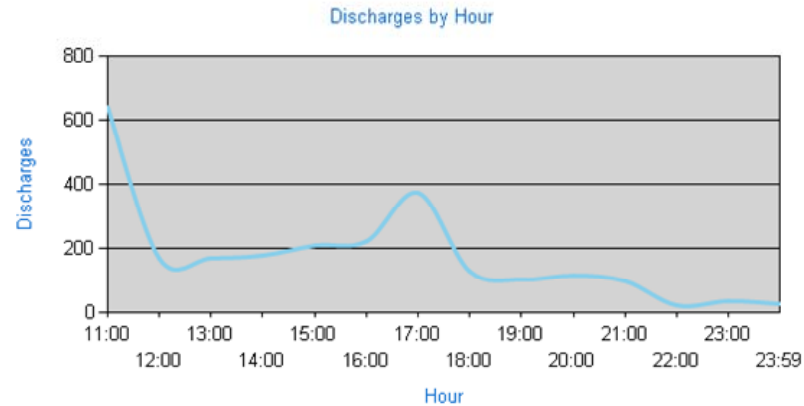
Version 1: 29/04/2008

The Discharges by Hour Report shows the number of Discharges by Hour for the last 12 months , with a summary that display the number of Discharges before and after 11am.

The report excludes Maternity, ICU, MIU wards and A&E attendances (where specialty = 'HCG')

For the lastest week's data, Sunday's information may not be complete as patient records are updated on the Monday.

	Day 1 Mon	Day 2 Tues	Day 3 Wed	Day 4 Thurs	Day 5 Fri	Day 6 Sat	Day 7 Sun	Total
11:00	95	88	101	125	118	75	40	642
12:00	19	32	31	35	27	17	10	171
13:00	15	26	24	45	36	12	11	169
14:00	19	30	26	32	38	21	14	180
15:00	28	21	37	39	59	13	14	211
16:00	41	34	32	44	48	16	7	222
17:00	55	81	79	86	52	17	5	375
18:00	32	13	25	26	22	11	3	132
19:00	13	16	25	12	29	6	2	103
20:00	23	9	19	24	23	12	9	119
21:00	18	8	17	22	16	12	5	98
22:00	1	4	10	1	2	5	2	25
23:00	15	4	3	2	3	1	7	35
23:59	0	4	5	10	3	5	2	29
Total	374	370	434	503	476	223	131	2511



Discharged before 11am?

	Discharges
No	1869
Yes	642
Total	2511

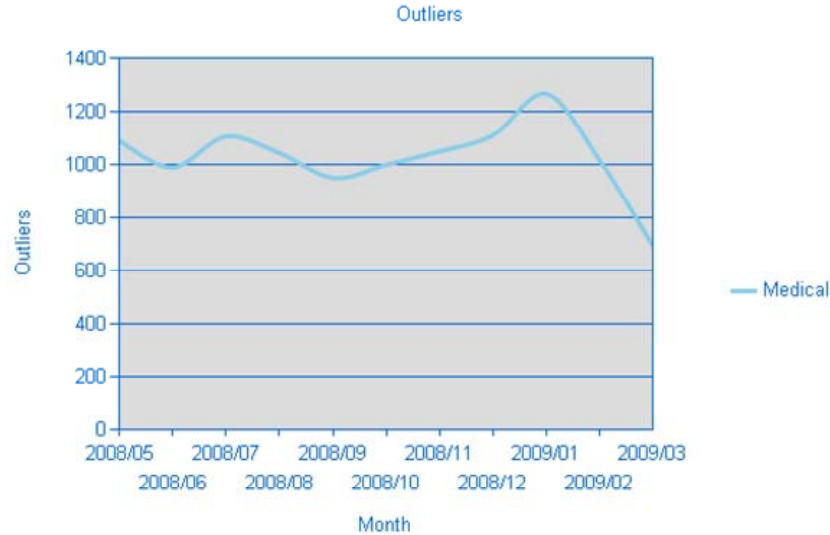
Version 1: 08/01/2008

The Outlier Report shows the number of bed days were Surgical and Medical Outliers have occurred.

If the Patient's Ward Stay Specialty is Medical but they are on a Surgical Ward, this patient will list as a Medical Outlier. The patient will list as a Surgical Outlier if Patient's Ward Stay Specialty is Surgical but they are on a Medical Ward. The Ward breakdown is listed below.

The report displays information for the last 12 months.

Month Name	Report Date	Patients
2008/05 - May		1086
2008/06 - June		988
2008/07 - July		1103
2008/08 - August		1042
2008/09 - September		948
2008/10 - October		997
2008/11 - November		1052
2008/12 - December		1112
2009/01 - January		1265
2009/02 - February		1017
2009/03 - March		694



The report is derived from information held within the PAS system.

Wards classified as Surgical: A3, B1, B2, B3, B4, B5, B6, ERW, HDU, J1, SPU
 Wards classified as Medical: EAU, ECDU, G2, G3, H1, H2, H3, HCU, ICU, K1, L2, L3, L3AS, L4, L5, L6, L7, L8, MHD

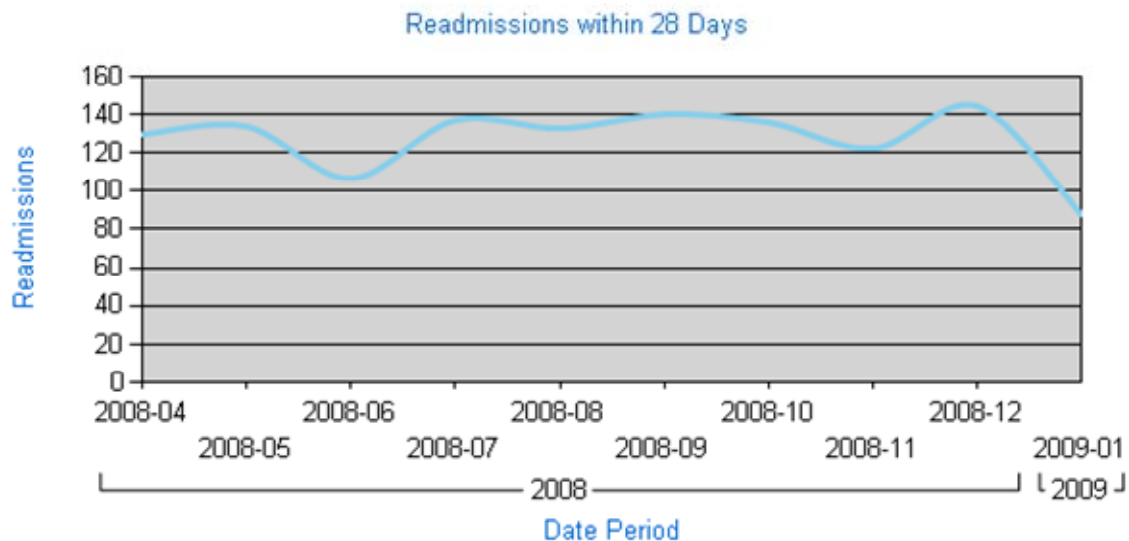
ReAdmission within 28 Days

Version 1.1 - 30/06/2008

The ReAdmissions within 28 Days Report is based on Discharges since the start of the previous financial year. The criteria is that both the Discharge and next Admission are an Inpatient Episode and not a Day Case. The report shows Emergency ReAdmissions only, those falling into the following Admission Method categories:

DO (Emergency Domicile), EM (Emergency Other), GP (Emergency GP Refer), OP (Emergency OPD),

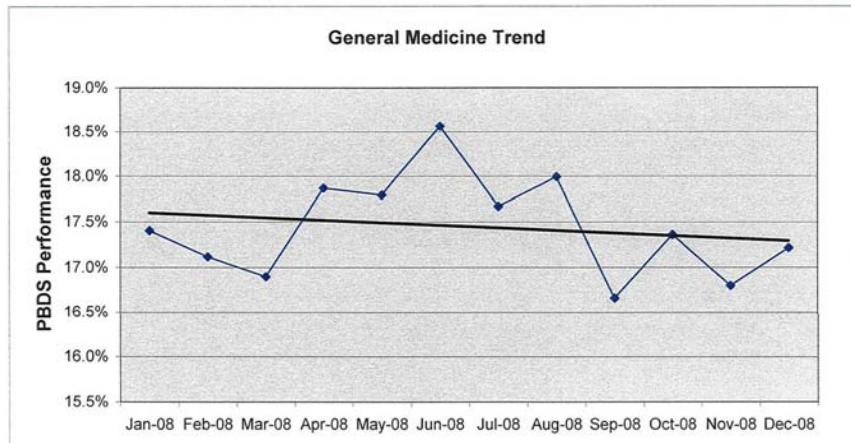
Readmission Year	Readmission Month	Readmission Date	Readmissions
2008			1182
2009			88



The report is derived from Discharge and Admission information held within the PAS system.

POTENTIAL BED DAYS SAVED

Trend (Month)	Bed Days	PBDS	25% PBDS	Performance
Jan-08	3546	2469	617	17.4%
Feb-08	3032	2076	519	17.1%
Mar-08	3197	2161	540	16.9%
Apr-08	3301	2360	590	17.9%
May-08	3446	2453	613	17.8%
Jun-08	3754	2788	697	18.6%
Jul-08	3385	2393	598	17.7%
Aug-08	3430	2469	617	18.0%
Sep-08	3454	2302	576	16.7%
Oct-08	3291	2286	572	17.4%
Nov-08	2918	1961	490	16.8%
Dec-08	3667	2526	632	17.2%



A&E 4 Hour Standard

- Consistent achievement of the A&E 4 hour target

A&E Reporting Portal - Microsoft Internet Explorer provided by Salford Royal Hospital Trust

https://livereports.srht.nhs.uk/aeReporting/

File Edit View Favorites Tools Help

Links A&E Reports Sharepoint Sites A&E Reporting Portal Google Information Services Reports SRHT Change Request System

Salford Royal Hospital Trust ... Web Part Page A&E Reporting Portal

Accident and Emergency Reporting Portal

Home Audit Childrens Detailed Investigations Performance RTAs SLAM Statutory Returns Summaries

Performance Reports Menu

- Performance: 4 Hour Targets
- Performance: Investigations Analysis
- Performance: Investigations Summary

Four Hour Target Performance Report
Last Updated: 10/09/2008 04:08:48

Quarter Performance by Day

Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
July	97.7	99.5	97.7	98.5	98.5	100	96.2	97.4	97.6	98.8	99	100	99.1	99.6	97.6	99.5	100	98.1	97.4	97.4	97.8	97.8	95.6	100	99.1	98.6	93.8	95.5	97.7	98.1	97.2
August	99.5	99	99.1	98.6	98.6	98.9	98.5	100	99	99	98.3	98.1	98.3	100	100	99.4	98.4	99.2	97.5	98.3	97.2	97.8	98.9	97.7	99	98.7	98.9	98.2	97.8	98.6	97.9
September	96.1	98.5	98.5	98.9	99.5	97.7	98.5	98	100	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	

A daily breach meeting takes place to verify all breaches and amend any incorrect records on PAS. This can cause previous figures to change slightly when the report is refreshed.

Performance Summary		Financial Year Performance
Quarter 1	18221 / 18449	98.58%
Quarter 2	14621 / 14867	

Patient Flow Management

Salford Royal 
NHS Foundation Trust

University Teaching Hospital

safe • clean • personal

Questions?