

Date:	19 th September 2019	J
Item:	19.114	



Report to:	Board of Directors
Meeting date:	19 th September 2019
Title of report:	Inappropriate Out of Area Placements
Action sought:	For Assurance
Estimated time:	10 minutes
Author:	Stuart Richardson, Chief Operating Officer
Director:	Stuart Richardson, Chief Operating Officer

Executive Summary:

NSFT has consistently used inpatient beds out of the area and out of trust for a number of years. The impact of this has meant long distances for patients, families and carers, along with long length of stays in private hospitals.

Since April 2019 a new Patient Flow group has been tasked with reducing the number of inappropriate out of area placements. The focus has been on a range of funded projects identified by NSFT and stakeholders to help reduce the out of area bed usage and provide more positive outcomes for patients and families.

Since the start of this financial year (2018/19), August 2019 resulted in the lowest number of individual placements along with the lowest number of total bed days.

At the time of writing this report (6th September 2019), the position for September 2019 shows continued improvement with (19 placements out of trust and 4 placements in NSFT beds but not the home county). Of the 19 out of trust placements, 16 are in a private bed in Norfolk (Southern Hill).

Of the total 23 placements, 21 (91%) are Norfolk and Waveney patients and 2 (9%) are Suffolk patients.

The purpose of this paper is to provide the Board of NSFT background to this current position, further plans funded and in place to improve the position further and to highlight the risks to sustaining the position and ultimately reducing the position completely.

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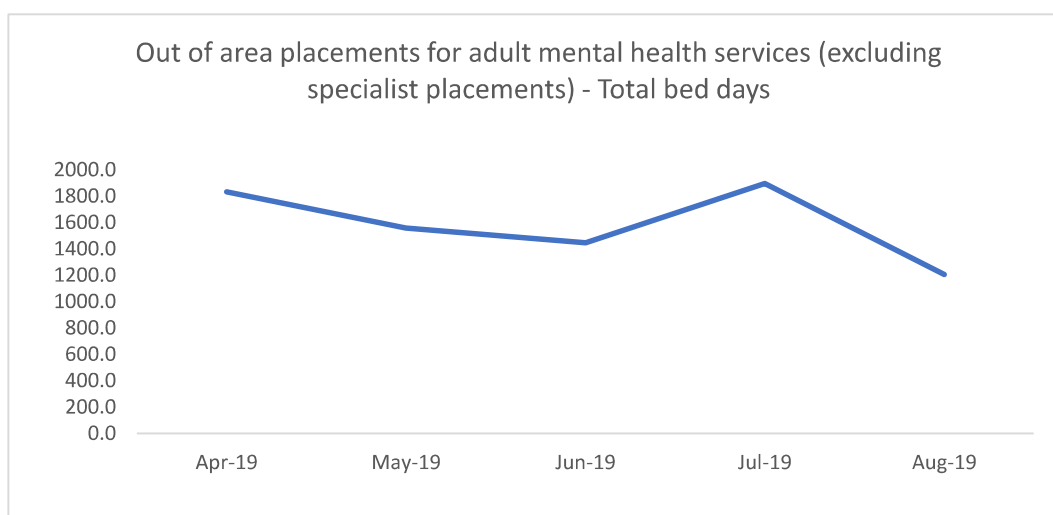
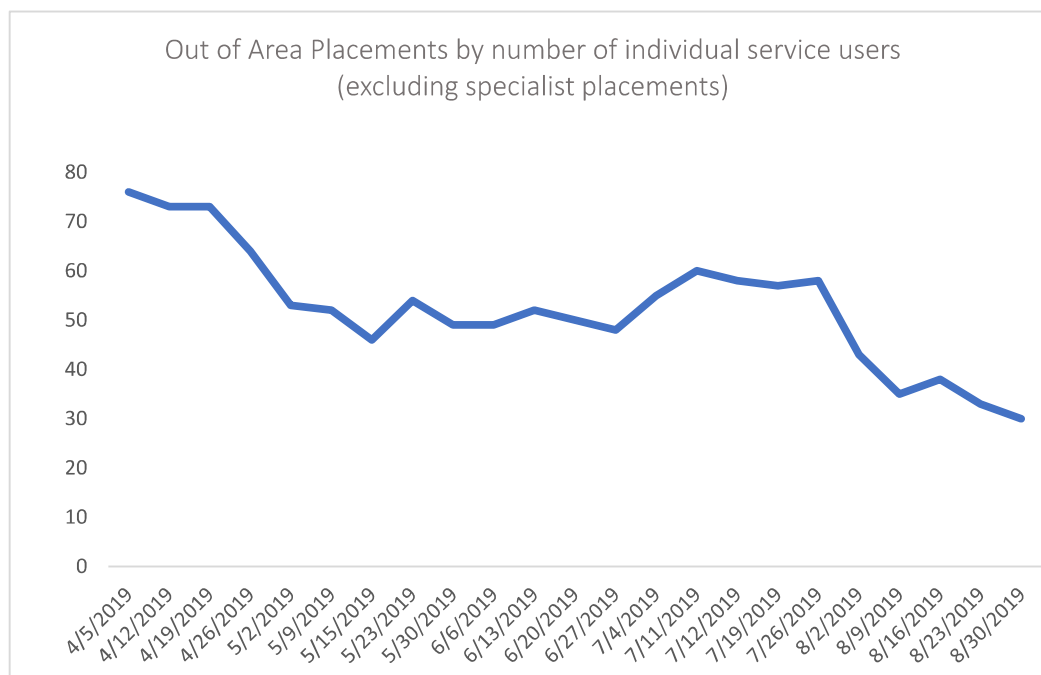
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1.0 Financial implications (including workforce effects)

1.1 Prior to the start of this financial year NSFT and Norfolk CCGs agreed a risk share budget to fund inappropriate out of area placements and specialist placements for the Norfolk and Waveney patients in 2018/19.

1.2 The highest point this financial year was the start of April 2019 at 71 out of trust placements plus 5 out of county but in NSFT beds. Following a sustained level of activity and changes to process the Trust was at its lowest position at the end of August 2019 with 22 out of trust placements and 8 out of county but in NSFT beds. Of the 22 out of trust placements, 17 of them were in a private hospital in Norfolk (Southern Hill).

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2.0 Quality implications

2.1 In April 2019 a Patient Flow oversight group was established. The purpose of the group is to oversee a number of projects and initiatives to help improve the flow of patients in and

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out of our acute pathways. The group consists of NSFT clinical and operational leads, CCG leads and is supported by NHSE/I representatives.

- 2.2 Projects overseen by the group have been established to help reduce the out of area position. These include:
- 2.3 **Opening of 16 adult acute beds (Yare Ward)** – these beds are due to open end of September 2019. Yare Ward will be 10 female beds and 6 male beds.
- 2.4 **Enhanced crisis services** – the Trust has recently secured recurrent funding in crisis services across Norfolk and Suffolk.
- 2.5 **Crisis house** – in addition to the crisis funding, the Trust will also open a first crisis house in Central Norfolk in partnership with third sector partners.
- 2.6 **Personality disorder pathway pilot** – a pilot in Central Norfolk has been established with new funding.
- 2.7 **Additional investment in Out of Area team** – three band 6 staff are in place to manage the current out of area patient group.
- 2.8 In addition to the investments secured this financial year, NSFT has also made pathway changes to help improve the OOA position. These include:
- 2.9 **Executive visits** – every private hospital used by NSFT in recent months has been visited by the Chief Nurse or Chief Operating Officer to assess the environment and quality of services delivered. Each patient and family have been written to personally by Executives to apologise for the placement.
- 2.10 **Red 2 Green (R2G)** – rolled out to the majority of adult and older people wards in Norfolk and Suffolk. Following a successful pilot project in late 2018 the R2G model promotes purposeful admission, monitors daily progress of patient journeys and encourages effective discharge planning.
- 2.11 **Monday review meetings** – every Monday all wards in Central Norfolk review new admissions and patients with length of stay longer than 21 days with the Chief Nurse, Chief Operating Officer and Medical Director. Issues or barriers identified through R2G processes are escalating in this meeting.
- 2.12 **Delayed Transfer of Care (DToC) improvements** – new DToC processes are in development between NSFT, NCC and commissioners to highlight patients who are

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medically fit for discharge from inpatient wards but barriers such as housing or social care requirements/placements are preventing discharge.

2.13 **Face to face gatekeeping** – bed requests in Central Norfolk are now gatekept face to face by the crisis team to review the purpose for admission and ensure alternatives to admission have been reviewed.

2.14 **Addition of Duty Nurse roles** – to support the gatekeeping changes Duty Nurse roles have been introduced to each adult ward.

3.0 Equality implications

3.1 There are no specific equality implications identified in this report.

4.0 Risks / mitigation in relation to the Trust objectives

4.1 Sustaining the reduction in out of area placements is a significant risk and historically the Trust has been here before. Current changes and further planned projects will reduce this risk. The weekly oversight of the position now enables the Trust to react much quicker to any sustained increase.

4.2 With an emphasis on efficient inpatient journeys and effective discharge there is a risk re-admissions will rise as a result. A review of re-admissions for the last 12 months for a baseline has been established. Re-admissions will be monitored by the Patient Flow group and via the operational performance dashboard at Board level.

5.0 Recommendations

5.1 The Board is asked to note the contents of this report and in particular the progress this financial year and further projects to be completed.

5.2 The Board is also asked to advise on any further steps it requires to be assured that the risks are being managed effectively.

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