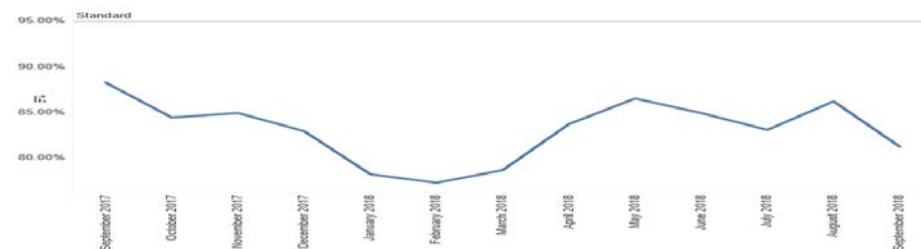


Trust Name				Bradford Teaching Hospitals NHS Foundation Trust						
	YTD Performance	Last 6 Weeks Average Performance	Avg. Winter 17/18*	Week Commencing						
				Organisation	20/08/2018	27/08/2018	03/09/2018	10/09/2018	17/09/2018	24/09/2018
Performance	84.31%	84.76%	80.44%	Bradford Teaching Hospitals NHS Foundation Trust	85.98%	89.73%	83.52%	80.65%	80.72%	87.96%
Headlines from October; what areas/challenges have effected performance throughout the month?	The trust has continued to see high non elective attendances over the summer months in line with other WY trusts. The system has no alternatives to A&E other than primary care. High minors activity causes congestion in ED which is exacerbated by peaks in ambulance arrivals in the early evening. The trust has struggled to recruit substantively to ED posts, especially middle grade posts in both the ED and ambulatory care units which has an effect on the efficiency of the department. The system has had capacity constraints especially in the domicilliary care market									
What are the five main interventions being implemented to support the management of winter 2018/19 and address the above challenges? e.g. 2 new A&E consultants starting at end of October, primary care streaming online from mid-November	GP Access: Additional primary care will be provided on all bank holidays and weekends over the festive period. Additional support will also be offered to primary care to increase staffing in the days following the bank holiday. Out of Hours GP Access: The system will continue to commission additional capacity on a Saturday at Eccleshill Community Hospital from 1st December to 31st May and during holiday periods.									Timescale for Delivery
	A co-located GP and Minors unit is being developed within the A&E footprint to improve flow and decrease congestion in ED. Operational procedures underpinning the effective implementation of more robust streaming are currently being developed and tested.									Out of hours 1/12-31/05 and during holiday periods
	Emergency Ambulatory Care Unit – The trust is implementing an assess to admit model with early assessment of all patients who attend ED. The trust will develop a unit for default to ambulatory pathways for all patients who attend ED and require medical assessment.. Whilst implementation of the new unit will be longer term and require additional capitol expenditure, changes in procedures will be implemented over this winter.									Early December 2018
	Workforce: The trust is recruiting 2 extra ED consultants and additional acute physicians in ambulatory care. YAS will second in 3 paramedics over the winter period									December 2018
	Supporting discharges - Additional domiciliary care capacity is being commissioned over the winter period and the MAID team is being strengthened with additional therapists to help support timely discharge.									ENPs - Nov 18 Consultants - Dec 18 October 2018
DID/DCO Assessment of Quality & Deliverability of Monthly Plan	The system has demonstrated significant learning from last year and has implemented more proactive 'look forward' system infrastructure to help support early identification and problem solving of risk. The lack of alternatives to ED (except primary care) means that the hospital is still expected to face significant pressures due to congestion and, whilst plans are in place to recruit, staffing remains an issue. The extra social care funding is being used to strengthen out of hospital admission avoidance / rapid discharge. The co-located minors unit has the potential to make a significant impact through de-congesting ED but this model is as yet untested in this locality and relies on a cultural shift underpinning new streaming processes.									
Level of Assurance (Assured, Partly Assured Not Assured)	Partially Assured									
Ambulance Hand Over				Support Offer						
Approach to Managing Ambulance Handover 2018/19	The trust is intending to Pilot the use of a HALO within AED to improve the handover and develop a longer term, sustainable solution for managing within AED.The trust is reviewing respiratory pathways to enable direct admission, where appropriate, through ACU in collaboration with YAS.									The has commissioned GE Finnmore to help review their hospital flow and escalation procedures in preparation for launching their new digital command centre.
	Attendances (July - Sept)	2017/18	2018/19	Variance						
	Admissions (July - Sept)	2017/18	2018/19	Variance						
	DTOC % September	Overall	NHS	Social Care						
	Non-Admitted Breaches	Jul-18	Aug-18	Sep-18						
	21	10	15							
Length of Stay	Ambition	Current Performance	Variance							
	24%	-24%	48%							
				Winter Capital Monies Received						
				West Yorkshire Accelerator Zone (WYAZ) funding: £638k Winter capital funding: £760k						

**A&E Performance - Region: All
Subregion: All - Provider: Bradford Teaching Hospitals NHS Foundation Trust**



**Region: All - Subregion: All
Provider: Bradford Teaching Hospitals NHS Foundation Trust**

	September 2018	August 2018	September 2017
Performance	81.27%	86.24%	88.30%
Attendances	11,255	10,622	12,241
Breaches	2,108	1,489	1,432
4-12 hour Trolley Waits	229	194	137
12 hour Trolley Waits	0	0	0
Emergency Admissions	4,664	4,669	4,184