

2.6 NHSCT DSF Plan 2021/22

Issue	Action Required	By When	Owner	Progress Update	RAG Status
Mental Health Issues					
<p>Issue: Trust unable to meet demand for Mental Health inpatient beds</p> <p>Discussion at DSF meeting 16.6.21 Daily patient safety brief in place. Bed management escalation process in place within Trust. Issue further complicated by isolation requirements during covid. Bed pressures across all 5 Trusts. Trust have worked on covid restrictions with a view to improve flow. Trust engaged with Regional Bed Management Network (HSCB lead). Regional Bed Manager Coordinator in post. Trust looking at Crisis & HTT programme. Current EoI out for post. Trust undertaking a breakdown of referrals into ED/Crisis Response/CMHT to see where increase/pressures are coming from.</p>	<p>Actions:</p> <ul style="list-style-type: none"> Trust to provide Action Plan combining the actions above (31/07/21) to include: 	31/7/21	Diane Spence	<p>Update for Oct 2021 Mid-Year Report The Acute Care Reform Action Plan was shared with HSCB 03/08/2021. Complete</p> <p>The Acute Care Reform Action Plan set out actions to seek to reduce the demand for Mental Health inpatient beds. To include a review of the Crisis and Home Treatment function within the Crisis Response Home Treatment Service, a review of discharge pathways and Facilitated Early Discharge with Home Treatment. These reviews remain ongoing at present. Ongoing</p> <p>Update for Oct 2021 Mid-Year Report A Patient Flow Co-ordinator has been appointed. This person fulfils the role of Facilitated Early Discharge and has close working links</p>	<p>Green</p> <p>Amber</p>


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				with the Bed Capacity Network Co-ordinator, thus contributing to the Regional Bed Management Network- Complete	Green
	<ul style="list-style-type: none"> Outcome/progress of review into increase in pressure (period May 2021 and May 2019) 	30/06/21	Diane Spence	Update for Oct 2021 Mid-Year Report The Data in respect of increased bed pressures has been collated and shared with the HSCB. Complete	Green
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Learning Disability Issues					
<p>Issue: Resettlement of patients from Muckamore Abbey to bespoke placements in the community. The resettlement of patients from Muckamore Abbey remains a priority (8 patients)</p> <p>Discussion at DSF meeting 16.6.21 Trust advised they have 2 further patients in other units requiring discharge. Trust have met with 7 families to look at resettlement (Trust contacted 20 families in total). There are now only 2 individuals with no discharge plan. In-reach is now open.</p>	<p>Actions:</p> <ul style="list-style-type: none"> Trust to provide clarity on the discharge plans now in place for 6 patients (31/07/21). 		Gareth Farmer	<p>Of the 19 remaining NHSCT patients in Muckamore 1 has now been discharged to supported living, 1 is to be discharged in October to supported living, 2 more placements are waiting for some adaptations to be completed and will move by the end of this year. One patient awaiting discharge to Trust supported living within next 2 months</p> <p>One patient placement in BHCT supported living identified and is awaiting</p>	


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				<p>adaptations to be completed.</p> <p>One patient's supported living placement was considered not to meet his needs and consideration being given to alternative placement.</p> <p>Scheme in Mallusk. Further 4 patients identified to move to Mallusk scheme by summer of 2022.</p> <p>New scheme at Braefields identified for a further 4 patients with plans to commence discharge by summer 2022.</p> <p>One patient identified for proposed on site nursing home.</p> <p>2 patients remain without discharge plans at this point due to the complexities of their behaviours.</p>	
	<ul style="list-style-type: none"> The Trust to update HSCB as to progress of remaining 2 		Gareth Farmer	Patient in WHSCT unit – supported living placement	

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	patients without discharge plan (Ongoing)			identified with plans to move by summer 2022 Patient in NHSCT adult mental health unit – placement had been identified and discharge plan commenced and placement then withdrawn by the provider. Ongoing efforts to secure another placement for her.	
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Older People & Adults Issues					
<p>Issue: Domiciliary Care Capacity and Demand Due to demographic growth challenges in meeting demand in all areas of the Trust</p> <p>251 service users do not have a package or a partial package of care. These are spread across all adult services.</p> <p>Discussion at DSF meeting 16.6.21 Reset-rebuild/reform agenda has Doc Care as a main focus. The Trust are developing a new model of delivery. Further developments include review of eligibility criteria to ensure equity across the system. Risk mitigation steps in place to review unmet need.</p>	<p>Actions:</p> <ul style="list-style-type: none"> Trust to share outcome of review of fair access criteria (31/07/21) 	31/07/21	Melanie Phillips / Lee Wilson	<p>NHSCT will share review paper with HSCB Programme Manager outlining the new process established to ensure consistent application of the fair access criteria.</p>  <p>Final_EGC_DOM_1.3.docx</p>	Green-Review paper attached and now fully implemented across all adult services teams within NHSCT
	<ul style="list-style-type: none"> Trust to update HSCB on actions coming from review (ongoing) 	13/09/21	Melanie Phillips / Lee Wilson	NHSCT will share action log and outcomes following implementation of new consistent process across adult services divisions.	Green - Unmet need improve ment

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Reviewed daily. HSCB satisfied with risk management processes in place in relation to care packages and meeting unmet need.							 Risk Mitigation Template_Unsourcer Action plan attached	action plan inserted. Risk Mitigation Tool attached Figures at 08.10.21 Total service users waiting Domiciliary Care with no existing services = 420 this figure captures service user from Mental Health, Learning Disability, Elder Care and Physical / Sensory Disability.
1	A	B	C	D	E	F		
2	Ref	Objective	Actions Required	Responsible	By When	Status		
3	1	Establish Meetings Schedule to review existing unmet need	Divisonal meetings established with team leads on fortnightly basis to review all unmet need and review actions in place. Meetings are chaired by Assistant Director	Melanie Phillips	Aug-21	G		
4								
5	2	Provide training on management of unmet need and application of criteria within review paper	Team leaders have received training on use of Unmet Need List.	Lee Wilson	Aug-21	G		
6			Team leaders have received refresher training on the application of the fair access criteria					
7	3	Implement monitoring exercise for unmet need	Longest waiters reviewed fortnightly	Melanie Phillips / Lee Wilson	Sep-21	G		
8			Unmet need escalation now takes place within localities					
9			Numbers have significantly reduced as targeted approach each fortnight has been effective .					
10			Regular reporting to SMT in place					
11	4	Implement risk mitigation tool for unmet domiciliary care	Risk tool devised with SW leads	Lee Wilson	Aug-21	G		
12			Risk tool implemented. Evaluated and audited 3 months after it was established. The tool is in place for all domiciliary care waiters.					
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Physical Disability and Sensory Impairment Issues					
Issue: No issues Discussion at DSF meeting 16.6.21	Actions:				
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Acute Issues					
Issue: Delayed Discharge <ul style="list-style-type: none"> • Acquired Brain Injury - Obtaining suitable placements for patients with acquired brain injury continues to be a challenge (5 patients in Antrim Area and 3 patients in Causeway) Discussion at DSF meeting 16.6.21 ABI - There is a challenge in meeting Trusts' statutory functions in relation to securing placements. Trust have monitoring process in place with Discharge Group (meet monthly) and intermediate care pathway. No dedicated bed based service in NT. Trust therefore identify commissioned provision on a case by case basis.	Actions: <ul style="list-style-type: none"> • Trust to provide plan in to outline mitigation process in managing delayed discharge (31/07/21) 	31/07/21	Lee Wilson / Anita White	The requirement for placements are discussed at the Trust Discharge Group. At present each case is considered on an individual basis with significant support from Community Teams to secure the most appropriate placement.	

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RAG Rating	
Completed/Confident of Delivery on Actions	Green
Work in progress and on track for completion within agreed timescales	Yellow
Not Complete/ Not on track for completion within agreed timescales	Red

The above action plan will be reviewed at interface meetings with HSCB and Trusts (minimum 3 times yearly). Progress updates will be completed after each interface meeting and reviewed by Senior Operational Management Team, HSCB.