Bwrdd Iechyd Prifysgol Hywel Dda University Health Board

**CYFARFOD BWRDD PRIFYSGOL IECHYD**
**UNIVERSITY HEALTH BOARD MEETING**

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| **DYDDIAD Y CYFARFOD:**<br>**DATE OF MEETING:** | 26 January 2023 |
| **TEITL YR ADRODDIAD:**<br>**TITLE OF REPORT:** | Real Time Demand & Capacity (RTDC) Roll Out Plan |
| **CYFARWYDDWR ARWEINIOL:**<br>**LEAD DIRECTOR:** | Mandy Rayani, Director of Nursing, Quality & Patient Experience |
| **SWYDDOG ADRODD:**<br>**REPORTING OFFICER:** | Mandy Davies, Assistant Director of Nursing & Quality Improvement |

| **Pwrpas yr Adroddiad** (dewiswch fel yn addas)<br>**Purpose of the Report** (select as appropriate) |
|---|
| Er Sicrwydd/For Assurance |

**ADRODDIAD SCAA**
**SBAR REPORT**

## Sefyllfa / Situation

This report provides an update on the plan to roll out the Real Time Demand and Capacity process across the Health Board's Acute Sites, following the process being piloted and embedded at Glangwili General Hospital (GGH).The roll out is also being progressed in response to the enhanced monitoring action advised by Welsh Government and in recognition of the contribution this process will have on the implementation of the Transforming Urgent and Emergency Care Policy Goal 5, which was launched in December 2022.

## Cefndir / Background

**The RTDC Approach**

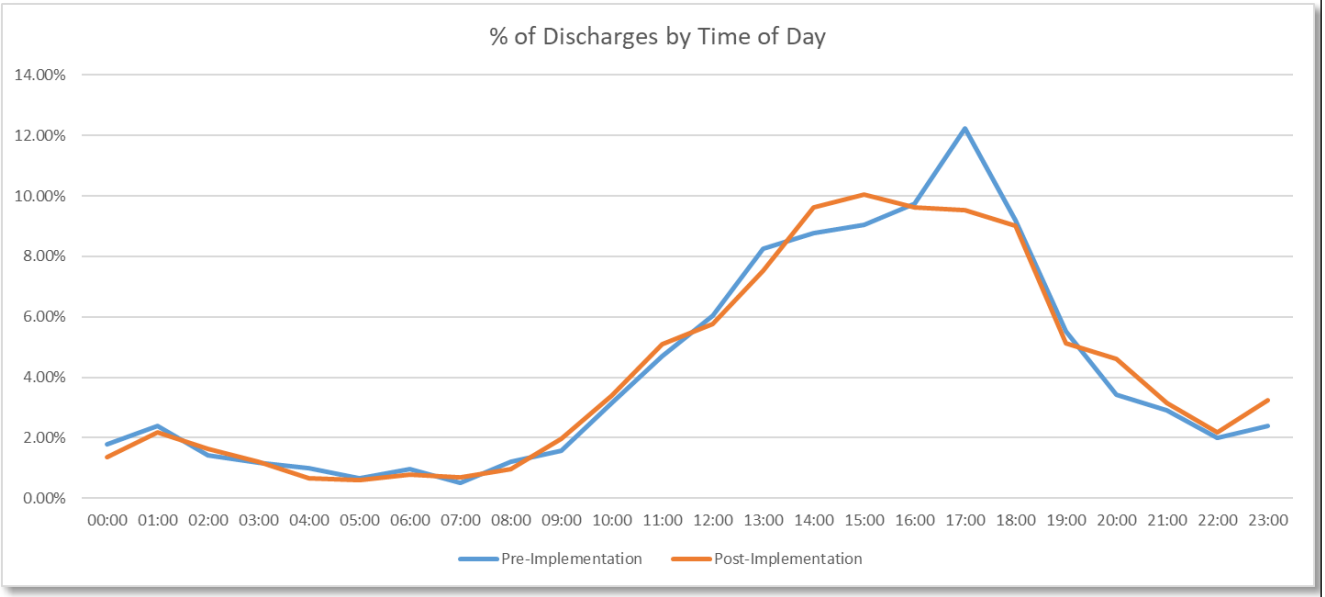
'The Real Time Demand Capacity (RTDC) approach, developed with the support of the Institute for Healthcare Improvement, creates a means to build the infrastructure to improve the key outcomes of hospital-wide patient flow. It also creates a robust tool to identify key barriers to flow that can become part of an organization's portfolio of improvement projects. By identifying key barriers, the RTDC approach can continuously and in a clearly articulated fashion allow a hospital to respond to changes in the external and internal environment that affect flow.' ( RTDC Faculty 2018)

The approach follows 4 sequential steps:
1. Predict Capacity
2. Predict Demand
3. Develop a Plan
4. Evaluate the Plan (and predictions)

Information on steps 1,2 & 3 is documented by each in-patient area in terms of predicted discharges and admissions, and the actions which will be needed to maximise capacity to meet the demand. These plans are then monitored and evaluated at twice daily flow meetings, actions are escalated, barriers and outcome limiters defined and improvement opportunities identified and planned.

## Implementation

GGH became one of the two Improvement Cymru pilot sites in Wales to test the implementation of RTDC from March 2022. The process is now embedded at GGH and has resulted in a shift in the time of day discharges occur, as demonstrated in the chart below:




## Learning from Pilot

The pilot also provided additional learning which is being used to inform the plan to support roll out to other sites. This includes:

- Medical and whole Multi-Disciplinary Team (MDT) engagement needed
- Site-based leadership and ownership
- RTDC needs to fit into the existing system - not “another initiative”
- Amalgamate flow and safety work streams
- Embed a whole hospital approach - not wards alone
- Senior Nurse Manager’s & Manager of the Day ownership of implementation is vital for sustainability

## Connection with National Objectives and Initiatives

### Enhanced Monitoring

The roll out of RTDC was included in the Health Board’s Enhanced Monitoring Escalation plan in October 2022.

### Transforming Urgent and Emergency Care (TUEC)

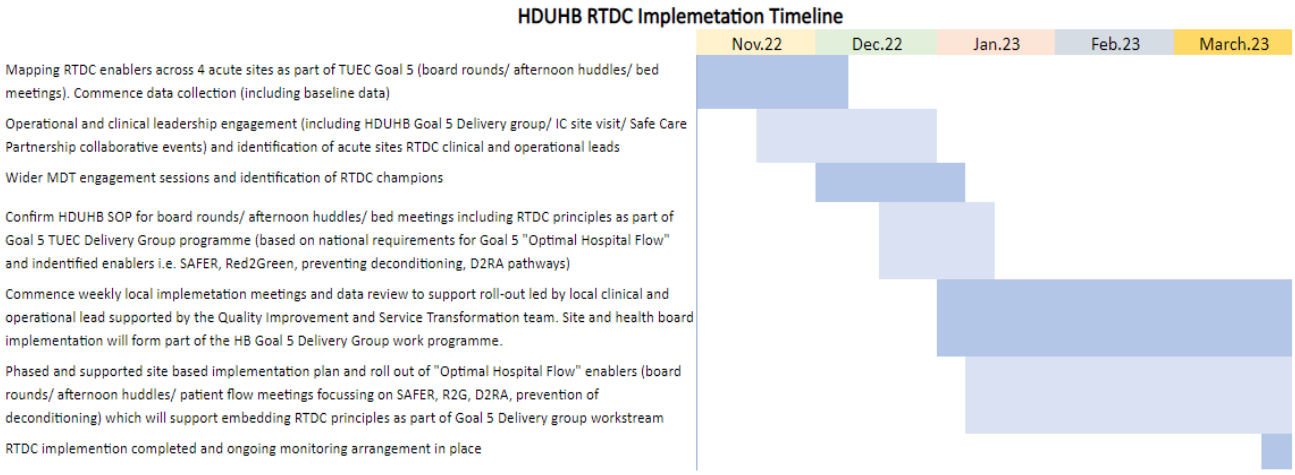
The outcomes from the pilot in GGH demonstrated that RTDC needs to be implemented alongside wider optimal hospital flow workstreams to deliver system benefits, and therefore needs to be aligned with TUEC Goal 5 “Optimal Hospital Patient Flow” delivery. This policy goal was formally launched in December 2022.

### Safe Care Collaborative

The Health Board has committed to engagement in the Improvement Cymru Safe Care Collaborative which has a focus on patient deterioration. Improvement activities, as part of the collaborative, are being aligned locally to the TUEC policy goals and the significant clinical engagement will be used to facilitate the roll out of RTDC.

## Asesiad / Assessment

A roll out plan is in place as detailed in the Gantt chart below:




The Quality Improvement and Service Transformation team (QIST) will support implementation at Prince Philip Hospital. Support has been requested and is anticipated from Improvement Cymru for implementation at Withybush General Hospital and Bronglais General Hospital. Implementation across all acute sites will be completed by the end of March 2023.

The current operational and workforce pressures being experienced by the sites need to be considered in relation to the implementation of this plan; and so recognition of the impact of RTDC as part of the implementation of the actions relating to TUEC Policy Goal 5 on current operational pressures needs to be promoted and prioritised with operational teams.

## Argymhelliad / Recommendation

The Board is asked to **TAKE ASSURANCE** that a plan is in place to implement the Real Time Demand and Capacity (RTDC) process.

| **Amcanion: (rhaid cwblhau)<br>Objectives: (must be completed)** | |
|---|---|
| Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol:<br>Datix Risk Register Reference and Score: | N/A |
| Safon(au) Gofal ac Iechyd:<br>Health and Care Standard(s): | 2. Safe Care<br>3. Effective Care<br>4. Dignified Care<br>6. Individual care |
| Amcanion Strategol y BIP:<br>UHB Strategic Objectives: | 1. Putting people at the heart of everything we do<br>2. Working together to be the best we can be<br>3. Striving to deliver and develop excellent services<br>5. Safe sustainable, accessible and kind care |
| Amcanion Cynllunio<br>Planning Objectives | 1A NHS Delivery Framework targets |

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|---|---|
| Amcanion Llesiant BIP:<br>UHB Well-being Objectives:<br>Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019 | 4. Improve Population Health through prevention and early intervention, supporting people to live happy and healthy lives |

| **Gwybodaeth Ychwanegol:<br>Further Information:** | |
|---|---|
| Ar sail tystiolaeth:<br>Evidence Base: | Findings from implementation pilot in Glangwili General Hospital 2022 |
| Rhestr Termau:<br>Glossary of Terms: | Included in Paper |
| Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol:<br>Parties / Committees consulted prior to University Health Board: | Not applicable |

| **Effaith: (rhaid cwblhau)<br>Impact: (must be completed)** | |
|---|---|
| **Ariannol / Gwerth am Arian:<br>Financial / Service:** | None |
| **Ansawdd / Gofal Claf:<br>Quality / Patient Care:** | None |
| **Gweithlu:<br>Workforce:** | None |
| **Risg:<br>Risk:** | There is a risk that the current operational and work force pressures may impact on the implementation plan timeframes. |
| **Cyfreithiol:<br>Legal:** | None |
| **Enw Da:<br>Reputational:** | None |
| **Gyfrinachedd:<br>Privacy:** | None |
| **Cydraddoldeb:<br>Equality:** | None |