

Agenda Item	Grove Discharge Unit, Clatterbridge Hospital
Title of Report	Progress Briefing
Date of Meeting	January 2020
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Accountable Executive	Anthony Middleton
BAF References	
StrategicObjectiveKey MeasurePrincipal Risk	
Level of AssurancePositiveGap(s)	Positive
Purpose of the Paper Discussion Approval To Note	For Noting
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FOI status	Document may be disclosed in full
Equality Analysis completed Yes/No	No
If yes, please attach completed form.	





1. Executive Summary

The purpose of this report is to provide a progress update in respect of the 30-bedded Transfer to Assess (T2A) facility, Grove Discharge Unit (GDU), which came into operation at the end of November 2018, operating on the Clatterbridge site. This report will focus specifically on performance within the Unit for the 6-month period from July to mid December 2019.

2. Background

As outlined in the previous report presented to the September meeting, GDU operates under the direction of Tamaris-Four Seasons Healthcare and fulfils the purpose of providing a sub-acute model of care. The contract is a 2-year tenure with the mutually agreed option of a 2-year extension.

The principle drivers for the partnership with Tamaris-Four Seasons in November 2018 were high bed occupancy in the acute trust (98% against the recommended 85%), the need for additional beds during winter and recognition of the challenges in recruiting trained nurses to staff additional beds (approx. 92 vacancies in trained nursing posts with Medicine and Acute Division).

3. Functionality of the Unit

The 30-bedded Nurse-led Unit continues to support flow in the acute setting by enabling the transfer of medically optimised patients, thus freeing up valuable capacity on the Arrowe Park site for patients requiring general and specialist acute care.

Aiming to promote independence and self-care, encouraging patients to take greater responsibility for their own physical and mental health and live independently as part of their communities, the Unit provides short-term support whilst health and social assessments are undertaken, aiming to reduce permanent admissions to Care Homes. The intended maximum length of stay is 4.2 weeks, including weekend and Bank Holidays.

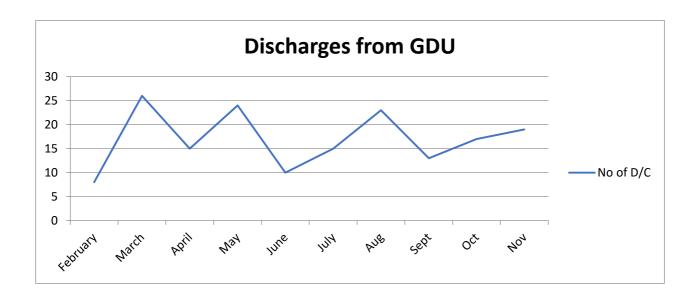
4. Admission and Discharge Activity Data

During the period of July to mid December 2019 a total of 101 people were transferred to the unit.

Monthly discharges from the Unit remain variable which is consistent with other T2A providers on Wirral. The ability to support early discharge for patients is entirely reliant on consistent Social Worker support and also the availability of domiciliary/reablement services to support those patients returning to their own home.







5. Patient Outcomes

Analysis of the discharge destination for the 101 patients discharged from GDU during July to mid-December has revealed the following:

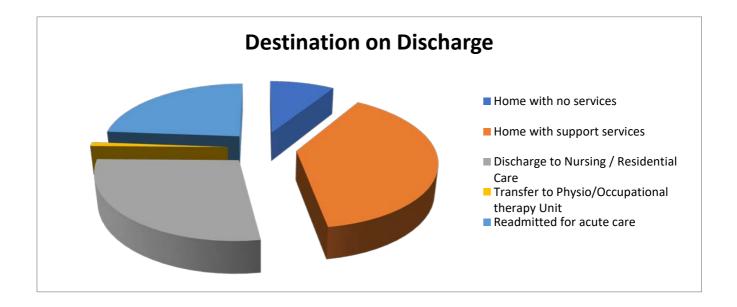
Discharge Outcome	No of patients
Home with no services	9
Home with support services	39
Discharge to Nursing / Residential Care	28
Transfer to Physio/Occupational therapy Unit	1
Readmitted for acute care	24
Total	101

5.1 Discharge Destination

It is extremely positive that following their stay on GDU approximately 50% of the patients discharged were able to return to their own home.







5.1.1 Readmission for acute care

For the reporting period July to mid-December there were 24 readmissions for acute care. This is a 28% reduction when compared to the first 6 months of GDU activity data. Further analysis of this cohort of patients has revealed that all were appropriate admissions to GDU and the timeframe and reason for readmission for acute care is variable, as detailed below:

Time on GDU	No of	Comment
	readmissions	
0-7	6	3 of these relate to one patient with a complex
		medical history requiring short periods of
		readmission for acute care before returning to
		GDU for discharge planning
8-14	5	Only 1 of the 5 patients returned to GDU following
		their readmission for acute care
15-21+	13	Readmission for acute care was appropriate as
		medical condition had deteriorated

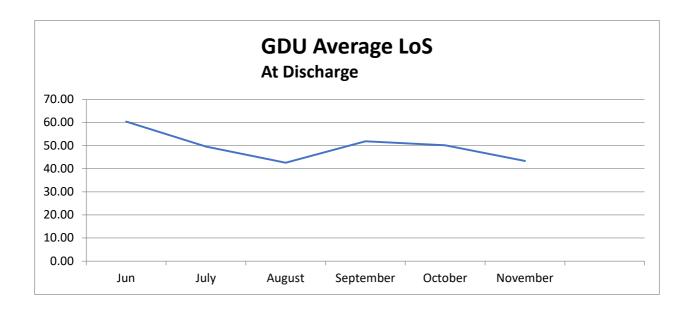
6. Length of Stay (LoS) Data

Reducing the overall length of stay for patient in GDU remains a significant challenge for patients with highly complex care needs. Availability of large scale domiciliary/reablement care has had a significant impact upon the number of delayed discharges. However, since September there has

been a steady downward trend in the average length of stay:







In December with consistent Social Work support and the availability of domiciliary/reablement care, we have successfully discharged 4 of the longest stay patients, each with a LoS of >140 days, which will have had a significant impact upon the monthly average figure for the Unit, increasing it to 64 days. However, the Unit average excluding these 4 patients is 32 days which is closely aligned to the target of 4.2 weeks.

Month of Discharge	Length of stay on GDU	Discharge Destination
December	142 days	Supported Housing
	145 days	Home with short-term reablement
	150 days	Home with short-term reablement
	194 days	Out of Area Placement

7. Quality Assurance and Patient Experience

The quality assurance system operated by Tamaris-Four Seasons is known as Quality of Life ("QOL"). Tablet (iPad) technology is used in the home to capture data. There are a number of strands to QOL, including:

(i) Daily walk-around and monthly medication short audits:





	Monthly Medication					IC TRaCA (admissions, progress and discharge)					Daily Walkabout			
Freq.	ı. Monthly						As required					Daily		
Month	Volume	Score	Actions raised	Average days to resolve	*Outstanding Actions	Volume	Score	Actions raised	Average days to resolve	*Outstanding Actions	Volume	Score	*Outstanding Actions	
Jan-19	1	91.7	10	4	0	63	98.3	31	2	0	33	94.8	0	
Feb-19	1	96.6	5	1	0	54	96.7	70	3	0	29	92.8	0	
Mar-19	1	99.2	3	4	0	74	96.4	81	3	0	33	96.1	0	
Apr-19	1	97.0	6	3	0	62	98.4	38	2	0	35	97.1	0	
May-19	2	97.1	8	8	0	64	98.0	41	3	0	31	99.0	0	
Jun-19	1	93.3	8	3	0	46	96.1	67	4	0	32	99.1	0	
Jul-19	1	93.9	8	1	0	57	98.8	22	1	0	35	99.7	0	
Aug-19	1	91.2	10	2	0	66	98.3	43	4	0	33	99.7	0	
Sep-19	1	97.7	3	1	0	42	99.2	20	3	0	28	100	0	
Oct-19	1	97.7	3	2	0	53	97.6	60	5	0	33	100	0	
Nov-19	1	99.2	1	1	0	59	98.3	38	2	0	30	100	0	
Dec-19	2	99.2	2	7	1	52	98.4	34	3	0	31	100	0	

(ii) Monthly food, dining and housekeeping quality audit data:

	Food Safety					Dining Experience				Housekeeping					
Month	Volume	Score	Actions raised	Average days to resolve	Outstanding Actions*	Volume	Score	Actions raised	Average days to resolve	Outstanding Actions*	Volume	Score	Actions raised	Average days to resolve	Outstanding Actions*
Jan-19	1	100	0	0	0	1	100	0	0	0	1	100	0	0	0
Feb-19	1	100	0	0	0	1	100	0	0	0	1	100	0	0	0
Mar-19	1	100	0	0	0	1	100	0	0	0	1	100	0	0	0
Apr-19	2	100	0	0	0	2	100	0	0	0	1	100	0	0	0
May-19	3	100	0	0	0	3	100	0	0	0	2	100	0	0	0
Jun-19	3	97.9	2	6	0	3	100	0	0	0	3	100	0	0	0
Jul-19	1	100	0	0	0	1	100	1	1	0	1	100	0	0	0
Aug-19	1	100	0	0	0	1	100	0	0	0	1	100	0	0	0
Sep-19	1	100	0	0	0	1	100	0	0	0	1	100	0	0	0
Oct-19	1	100	0	0	0	1	100	0	0	0	1	100	0	0	0
Nov-19	1	100	0	0	0	1	100	0	0	0	1	100	0	0	0
Dec-19	1	100	0	0	0	1	100	0	0	0	1	100	0	0	0

(iii) Staff and Patient Feedback:

Tamaris/Four Seasons are very proactive in obtaining regular staff and patient feedback which is then utilized to drive quality improvement within the Unit.

All staff working on GDU are required to complete a questionnaire (Appendix 1) detailing their experience as an employee. This is undertaken randomly 3 times per week. The questions are

focussed on a range of aspects including values and behavior, teamwork and leadership.





In addition, all patients in receipt of care on GDU are invited to provide feedback on their experience by completing a questionnaire (Appendix 2). The questions are focused on patient and carer involvement in goal setting and decision making, communication, quality of care and discharge planning.

		Colleagu	ue feedback	Customer feedback				
Freq.		3 pe	er week		10% effective beds per week			
Month	Volume	Score	Outstanding Actions*	Volume	Score	Outstanding Actions*		
Jan-19	16	88.2	0	35	98.0	0		
Feb-19	13	95.9	0	26	94.3	0		
Mar-19	15	88.3	0	34	98.1	0		
Apr-19	12	93.8	0	33	92.6	0		
May-19	19	87.6	0	36	97.8	0		
Jun-19	21	90.3	0	34	97.4	0		
Jul-19	18	86.3	0	31	98.5	0		
Aug-19	20	75.6	0	44	98.3	0		
Sep-19	18	90.3	0	44	99.1	0		
Oct-19	12	89.9	0	36	96.9	0		
Nov-19	14	95.2 0		36	97.8	0		
Dec-19	15	88.8	0	46	98.7	0		

8. Future Sustainability

Despite previous concerns about the future financial stability of Tamaris-Four Seasons, the Trust have again been given assurance that there will be no closure of homes and that the priority remains to ensure continuity of care for residents and patients.

9. Further Opportunities to Optimise Care

In order to improve the flow of patients and avoid undue delay for patients requiring a period of rehabilitation, WUTH is currently exploring a model whereby GDU would support the 40-bedded Rehabilitation Unit, M1, at CBH by facilitating the stepdown of patients who have achieved their rehabilitation goals but are awaiting discharge with domiciliary/reablement care. This would release sought-after therapy capacity on M1 to facilitate the timely transfer of patients from APH, thus supporting the philosophy of right care in the right place at the right time.

10. Summary





The overall performance of GDU as a step-down Unit remains good, particularly in relation to the quality of care provided to patients. The outcome of care for patients remains extremely positive with almost 50% of patients being able to return home on discharge. We continue to work with our Health and Social Care partners to address the issues of delayed discharge, particularly in relation to domiciliary and reablement care for the most complex patients.





Appendix 1 – Staff Questionnaire

Export from the Meridian Desktop - Page: HR >> Colleague Engagement >> Questionnaire Search

Colleague Engagement survey

Your questionnaire can be viewed below. Please scroll to the bottom to see a breakdown of scores and summary information relating to this questionnaire.

General Information								
Questionnaire ID	4082465							
Home	(CLA) Clatterbridge							
Completion Date	06/01/2020							
Day of the week	Monday							

Col	league Engagement Survey						
1	I feel part of a team?	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A
		✓					
2	I have the knowledge and tools I need to do a good job?	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A
		✓					
3	I trust my manager to do the best for me and the home?	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A
		~					
		Manager is p	roactive in lool	king after the u	nit		
4	I plan to continue my career here?	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A
		✓					
5	I would recommend my home to a friend or colleague?	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A
		✓					
6	I understand how my work contributes to our success?	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A
		✓					
7	I am clear about what I am expected to do in my job?	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A

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Export from the Meridian Desktop - Page: HR >> Colleague Engagement >> Questionnaire Search

Sections	Score	Result
Colleague Engagement Survey	700.00	100.00%
Overall Section Ratings	700	100.00%

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Intermediate Care Patients Feedback

Your questionnaire can be viewed below. Please scroll to the bottom to see a breakdown of scores and summary information relating to this questionnaire.

General Information								
Questionnaire ID	3967176							
Home	(CLA) Clatterbridge							
Completion Date	14/11/2019							
Day of the week	Thursday							

We	would like you to think abou	ut your recent e	xperiences	of our	servic	e.							
1	How likely are you to recommend our Service to friends and family if they needed similar care or	Extremely likely	Likely	like	ther ly or kely	Unlikely		xtremely unlikely	Don't know				
	treatment?	V											
Inte	Intermediate Care Patients Feedback												
2	The staff that cared for me had been given all the necessary information about my illness or condition from the person that referred me.	Yes ⊻	No				Don't know						
3	I was given enough information about my condition and rehabilitation plan.	The right a	mount		Too much			Not enough					
4	Staff explained to me what we were aiming to achieve with my rehabilitation plan e.g. to	Yes		No				No	t sure				
	be mobile at home, to be independent at home, to be able to go out shopping, to understand and managed my health better.	✓											
5	I was involved in setting these aims.	Yes, alwa	ays	Υ	Yes, sometimes			No 🗆					
6	I was involved in discussions and decisions about my care, support and treatment as I wanted to be.	Yes, defi ✓	nitely	Yes, to some extent			nt No						
7	My family, carer or friend were also involved in these decisions as much as I wanted them to be.	Yes, definitely	Yes, to se exten				There was I did not no family, want my carer or family, carer						

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							avail	able	involved	
		✓			[]		
8	When I had important questions to ask, staff were	Yes, always	Yes, always Yes, sometimes				No	11	had no need to ask	
	available to listen and reassure me.	✓								
9	I had confidence and trust in the staff treating and		Yes, always			Yes, sometimes			No	
	supporting me.	✓								
10	I always knew who was coordinating my care.	Yes		No, I coordinated my own care and support			I don't know / not sure			
		✓								
11	decision about my discharge and the agreed discharge date.	Yes, definitel	у	Yes, to some extent		No		- 10	I didn't want to be involved	
		✓								
12	Staff took into account my family and home life when planning my discharge.	Yes, completely	s	Yes, to N some extent			No It was n		Don't know	
		✓								
13	Staff gave to my family, carer or friend all the information required to care for me at home.	Yes, definitely				family or fr		was no , carer iend able.	I didn't want my family, carer or friend to be involved	
		✓								
14	Overall I felt I was treated with respect and dignity	Yes, alwa	ys	Yes, so			metimes		No	
	whilst I was receiving care from this service.	✓								
15	Since having received care from this service, my ability to maintain social contacts	Yes	Ye	Yes, to some extent		No I am		not concerned about this		
	has improved.	✓								
16	I have been sufficiently informed about the other services that are available to people in similar	Strongly agree	Agree	Neither agree nor disagree		_		ongly agree	N/A - I didn't need any information	
	circumstances including supporting organisations.	✓								
17	Do you feel that there is something that could have made your experience of the service better?		Yes					No ✓		

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18 If yes, could you detail here.

Sections	Score	Result
We would like you to think about your recent experiences of our service.	100.00	100.00%
Intermediate Care Patients Feedback	1600.00	100.00%
Overall Section Ratings	1700	100.00%









Intermediate Care Patients Feedback

Your questionnaire can be viewed below. Please scroll to the bottom to see a breakdown of scores and summary information relating to this questionnaire.

General Information	3967176 (CLA) Clatterbridge	
Questionnaire ID	3967176	
Home	(CLA) Clatterbridge	
Completion Date	14/11/2019	
Day of the week	Thursday	

We	would like you to think abou	ut your recent e	xperience	s of ou	r servic	e.				
1	How likely are you to recommend our Service to friends and family if they needed similar care or treatment?	Extremely likely	Likely	lik	Neither Unlikely likely or unlikely		Extrem unlike	•	_	
		✓								
Inte	ermediate Care Patients Feed	dback								
2	The staff that cared for me had been given all the necessary information about my illness or condition from the person that referred me.	Yes			No 🗆			Don't know		
3	I was given enough information about my condition and rehabilitation plan.	The right amount ✓			Too much			Not enough		
4	Staff explained to me what we were aiming to achieve with my									
	rehabilitation plan e.g. to be mobile at home, to be	Yes		No			Not sure			
	independent at home, to be able to go out shopping, to	✓								
	understand and managed my health better.									
5	I was involved in setting	Yes, always			Yes, sometimes			No		
	triese aims.	✓								
	I was involved in discussions	Yes, definitely		Y	Yes, to some extent			No		
	about my care, support and treatment as I wanted to be.	✓								
7	My family, carer or friend were also involved in these decisions as much as I	Yes, definitely	Yes, to exte		N	lo	There was I did no family, wan carer or family,		y rer	

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