

PERFORMANCE ACTION PLAN TEMPLATE

This template is to be completed for ALL measures showing **RED** status of non-compliance against the specified target reported.

INDICATOR OVERVIEW	
Indicator Title	Average monthly lost bed days due to delayed transfers of care per
	100,000
Strategic Director Lead	Claire Fish
Departmental Lead	Jacqui Evans
Target	65.1 (Jun '14) / 61.3 (Mar '15)

CURRENT SITUATION: Detail what the performance is for this measure and reason/s for non-		
compliance		
Performance this Period	74.4 + / - Target: -9.3 (-14.3%)	
Non-compliance reason	This measure is calculated based on a rolling 12 month period (ie.	
	July 13 - June 14). Comparing the total lost bed days in Q1 2013-	
	14 to the total for Q1 2014-15 shows a 61% increase.	
	The increased trajectory is predominantly due to delays	
	attributable solely to the NHS. Of the total lost beds days in Q1	
	(14-15); 54% are attributable solely to the NHS, the same period	
	in 2013-14 was 33%.	
	Further analysis of the data indicates the primary reason for NHS	
	delays is due to patients awaiting further non-acute treatment.	
	The main reason for delays attributable to DASS is delays in the	
	completion of assessments.	
	necessary or how to achieve a 'green' score. This way everyone is	
clear on what is required and when; knows the expected outcome and how to achieve it.		
What (is required)	In order to achieve a RAG rating of 'green' by March 2015 the	
	average number of lost bed days per month needs to be	
	approximately 143 for the rest of 2014-15.	
	The average for quarter 1 was 223 lost bed days per month.	
How (will it be achieved)	Before a detailed action plan can be drafted further analysis	
,	needs to be undertaken to understand the key reasons why	
	delayed discharges are occurring:	
	a) how delayed discharges are being categorised by acute	
	services;	
	b) the detailed reasons causing delayed discharges as the	
	summary data available does not allow further analysis	
	Once this work is completed this action plan will be updated to	
	outline the necessary interventions which will be jointly agreed	
	between DASS, Wirral Clinical Commissioning Group and Wirral University Teaching Hospital.	



Who (will be responsible)	Jacqui Evans (Head of Service – Transformation) Sarah Quinn (Commissioning Manager – Wirral CCG)
When (will results be realised)	Detailed analysis to be completed August 2014 which will inform discussions with Wirral CCG to identify remedial actions required
	with immediate implementation.