



Stroke Big Room – Action Plan Progress Report: updated 08/10/2018

hospital LOS Deliverable 6: To implement ASU care that is compliant with national standards and demonstrable processes and practices to optimise patient flow and reduce

No.	Milestone (Description)	Timeline to		Progress against Timeline	_	Owner
6.1	Stroke ESD: In collaboration with Stroke ESD determine		•	Comprehensive to	e transition plan in	e transition plan in
i.	opportunities to support earlier discharges including at the weekends regardless of patient home location – for East Dorset and Dorset (as point where DCH patients come to HASII at the weekend)	31/3/19	1 11	place to align and services	bring together	and bring together HH/LI
6.2	Review current stroke bed occupancy specifically relating to those patients who become stranded in hospital past	30/6/18	• •	Complete Identified ove	ancy	rview of bed occupancy CS/DB
	Feb — outputs to be reviewed			ind high leve	and high level reasons for delays	reasons for delays
6.3	To ensure optimal processes and procedures in place to optimise flow and minimise delays to discharge	31/3/19	•	Stroke Discharge working group es	Stroke Discharge Processes and Flow working group established in Sept	rge Processes and Flow p established in Sept
	throughout Stroke pathways		•	VBR most di	Dorset SS Team to attend RBH SU WBR most days, and to offer general	am to attend RBH SU ays, and to offer general
				dvice to he	advice to help guide/direct the team regardless of their SS team = 09/18	lp guide/direct the team f their SS team = 09/18
			•	Vith QI tea	With QI team to review 4-6/52 of RBH	m to review 4-6/52 of RBH
				U strande	SU stranded patients @ weekly	d patients @ weekly
				tranded p	stranded patient meetings - 09/18	patient meetings - 09/18
			•	o undert	To undertake a number of Patient	ake a number of Patient
	THE RESERVE THE PROPERTY OF THE PARTY OF THE	National Property of the Party		ase Revie	Case Reviews for those patients with	ews for those patients with
			J.	nulti agen lischarge (multi agency involvement on discharge (including ESD) – 10/18	cy involvement on including ESD) – 10/18
6.4	Dr Becky Jupp to escalate concern to Dorset CCG following Wessex ESD Forum re. level of stroke specialist	31/8/18				BJ



1 how on Monday 15/10/18



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hospit	hospital LOS		54			
Na.	Milestone (Description)	Timeline to completion	Progress against Timeline (inc. impact on patients)	Owner	RAG	Risks / Issues
6.5	To develop a combined, standardised process for establishing EDD for Stroke	31/10/18		NM/KL EC/NR		
			 To trial each approach @ PH/RBH for 1 month and then develop a joint RBH/PH process for further trial 			
6.6	Review current rate of discharges at the weekend; specifically work towards increasing our weekend discharge rates to align with our weekend admission rates	30/09/18	 Monday am audit undertaken to determine patients not d/c @ w/end who could have been to establish themes – completed in 06/18 and extended for 07-08/18 	CR/NM SW KL		
6.7	Develop robust working practices/documentation to ensure minimise repetition and ensure ongoing optimal patient care	31/03/19				
6.8	Social Services — ensure robust processes/procedures in place for early Social Services assessment/intervention to support direct discharge from HASU regardless of patient home location — include options for dedicated Social Workers	31/03/19				
6.9	Establish robust inter-hospital transfer and communication systems/processes to enable timely and seamless patient transfer between HASU/ASU	31/03/19				
6.10	Interim Care: In collaboration with Stroke ESD determine opportunities to support earlier discharges including at the weekends	31/03/19				