

## Briefing: Trust update

**Briefing for:** Lambeth, Southwark and Bromley Health Overview and Scrutiny Committees

**Date** January 2015

**Subject** Emergency Department performance and new enhanced recovery ward at Orpington Hospital

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## 1. Introduction

The performance of A&E departments across the country has been a notable feature within the press for a number of weeks. The latest figures undoubtedly reflect the immense pressure that A&E departments are under. Our position here at King's is not unique however we would like to share what the situation looks like for us.

We would also like to update you on a recent new development at Orpington Hospital that increases our capacity for neuro rehabilitation, and frees up beds at our Denmark Hill site and the Princess Royal University Hospital (PRUH).

## 2. Emergency Department performance

We continue to face record levels of demand for emergency care at both our Denmark Hill (DH) and Princess Royal University Hospital (PRUH) sites and this is reflected in our recent performance.

The data below is for the final quarter of 2014. It covers attendance at our Emergency Departments from arrival through to admission, transfer or discharge within four hours. Data is shown at Trust and site level.

**All type performance**

	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Q3</b>
<b>Trust</b>	89.90%	90.90%	84.39%	88.50%
	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Q3</b>
<b>PRUH</b>	82.74%	84.24%	75.91%	81.05%
<b>DH</b>	95.15%	95.84%	90.92%	94.07%

When comparing Emergency Admissions via our Emergency Departments for the same quarter with those seen the previous year, we have seen significant increases on both sites.

At the PRUH there were 5, 184 admissions in the last three months of the year compared to 4, 781 during this period in 2013. This reflects a 7.4% increase.

At DH there were 7, 674 admissions in the last three months of the year compared to 7, 496 during this period in 2013. This reflects a 2.4% increase.

The areas that have experienced the greatest impact overall are Geriatric Medicine and General Surgery.

This increases places further pressure capacity at King's that is impacting on the availability of beds in key areas such as those detailed above.

We are working hard to manage the pressure using the range of measures we have already put in place through programmes including:

- **demand management e.g.** emergency medical admissions avoidance through Acute Assessment Unit/ Medical Assessment Unit and King's Older Person Assessment Unit
- **productivity and quality improvements e.g.** Creation of protected beds for elective activity with an on-the-day admissions lounge for orthopaedics, surgery and neurosurgery. This frees up bed capacity as patients are not admitted the day before their procedures
- **utilisation and capitalisation of off-site care provision e.g.** Homeward - increased use of community care at home post discharge, use of other acute providers, both NHS and private for elective procedures (though at an extra cost to the Trust)

In addition to existing measures we are constantly reviewing options to support existing initiatives.

### 3. New enhanced recovery ward

The transformation of Orpington Hospital continues as we open new services and facilities on site. The most recent was in November last year when we opened a brand new facility for neurorehabilitation.

The Ontario ward offers an 'enhanced recovery service'. It has been specifically designed to provide care for patients who are medically stable after having neurosurgery or have a neurological condition, but would benefit from more time in a care setting with a suitable level of rehabilitation.

There are currently 10 beds on the ward, with plans to increase this to 20 in the coming months. Patients for this service live in Bromley, Bexley or further into Kent. No Lambeth or Southwark patients are transferred to this ward. Patients are referred to the ward following their neurological procedure at King's College Hospital in Denmark Hill or the Princess Royal University Hospital (PRUH).

Over 40 patients have already been referred to the ward and the feedback has been very positive, with patients praising staff and reporting a good experience.

Not only is the ward providing patients with a quiet and tranquil space for the final stage in their recovery it is helping to free up much needed capacity at Denmark Hill and the PRUH.