Discharge Work Stream SLWG
(Surge and Flow and Beyond)
Terms of Reference

Purpose

The Discharge Work Stream SLWG has been instigated to deliver the outcomes relating to discharge as part of the Surge and Flow priority work stream of Operation Snowdrop. These immediate outcomes are:

- Establish a discharge lounge within Aberdeen Royal Infirmary to enable earlier release of beds and improve flow.
- Implement Traffic Lights System for Discharge.
- Develop Discharge Policy.
- Identify immediate improvements to cross system discharge/transfer pathways and processes.

In addition to this there are additional outcomes that will require to be continued after Operation Snowdrop due to their complexity. These are to:

- Agree 'flow plan' to facilitate transitions of care, home to and from hospital and hospital to and from care home.
- Review and enhance process for delayed discharges

Governance will be through the Surge and Flow Steering group.

Principles

The principles of Home First apply where multi-professional teams in hospitals and community partnerships work together to proactively plan a patient's discharge and agree a planned discharge date as soon as possible. This is linked to the Discharge to Assess approach where, unless unavoidable, assessment of longer term needs takes place in a person's normal residence. When this is not possible, a period of intermediate care in a step-down facility should be considered, for the individual to start rehabilitation and reablement.

Aims

The key aims of the group will be as follows:

- To have a shared understanding of the current discharge processes across the whole system through process mapping and data analysis.
- To develop a vision of an improved system for transfer and discharge and roadmap to achieve this.
- To identify and spread good practice and share learning.

- To identify blocks and barriers to smooth transfer and discharge and develop an improvement plan to address the issues.
- To enable access to information.

Membership

Chair: Jenny McNicol Acute Director of Nursing and Midwifery

Co-Chair: Cathy Young, Head of Transformation Acute

Administrative Support: Paula Brown, Project Officer

Core Members:

Fiona Robertson	Acute	Chief Nurse
Wendy Greenstreet	Acute	Lead AHP and Lead OT
Karen Richardson	Acute	Programme Manager Transformation
Fiona Abbott	Acute	Discharge Hub Manager
Alice Ritchie	Acute	Nurse Manager
Sandra MacLeod	Aberdeen City	Chief Officer
Beth Thomson	Aberdeen City	Lead OT
Susan Jamieson	Aberdeen City	OOH Community Nursing and Liaison Team Co-ordinator
Denise Johnson	Aberdeen City	Deputy Lead Nurse
Anna Mark	Aberdeen City	Service Manager OOH Nursing
Fiona Mitchellhill	Aberdeen City	Lead Nurse
Leigh Porter	Aberdeen City	Lead Podiatrist
Angie Wood	Aberdeenshire	Chief Officer

Shona Strachan	Aberdeenshire	
Valerie Reid	Aberdeenshire	Lead Dietician
Susan McKinnon	Aberdeenshire	Area Manager
Brydie Thatcher	Moray	Service Manager
Louise Pearson	Moray	Unit Operational Manager
Lesley Attridge	Moray	Area Manager and Discharge Lead
Audrey Steele-Chalmers	Moray	AHP Professional Lead
Hilary Thomson (NHS Grampian) <hilary.thomson2@nhs.scot>; Gary Cruden (NHS Grampian) <gary.cruden@nhs.scot>		

Other members who may be co-opted onto the group when relevant include:

Organisational Development
Public Involvement
Communications and Engagement
Staff Side
Health Intelligence

Roles and Responsibilities

The overall roles and responsibilities for the Acute Redesign and Transformation Group are as follows:

- Supporting the delivery of the redesign and transformation elements of the Acute Sector plan;
- Support and provide assurance to ALT that services are innovating and transforming to meet modern demands within the contact of the Clinical Strategy for NHS Grampian;
- Coordination and prioritisation of redesign and transformation programmes and projects;
- Identify programmes and projects that should be discontinued or re-prioritised due to changes in environment;

- Ensure consistency, compatibility and co-ordination between programmes and projects;
- Manage high-level interdependencies and risks associated with the transformation programme within the wider sector and organisational context;
- Remit matters of management of risk which require wider discussion to the Acute Leadership Team;
- Ensure programmes deliver against their outcomes, KPIs, budgets, timescales, quality measures and business benefits as defined in their business vases;
- Ensure an overarching Communications and Engagement strategy exists, including key messages for circulation to internal and external stakeholders;
- Monitor the impact of the transformation programme, including unintended consequences, and agree appropriate strategic response;
- Engage with key stakeholders and partner organisations as required, inviting their representation to attend ARTG meetings as appropriate;
- Ensure appropriate and adequate public and patient engagement is undertaken across the transformation programme.

Meeting Frequency

- Frequency: 8 weekly
- Duration: 2 hours
- Location: Teams

Governance Structure
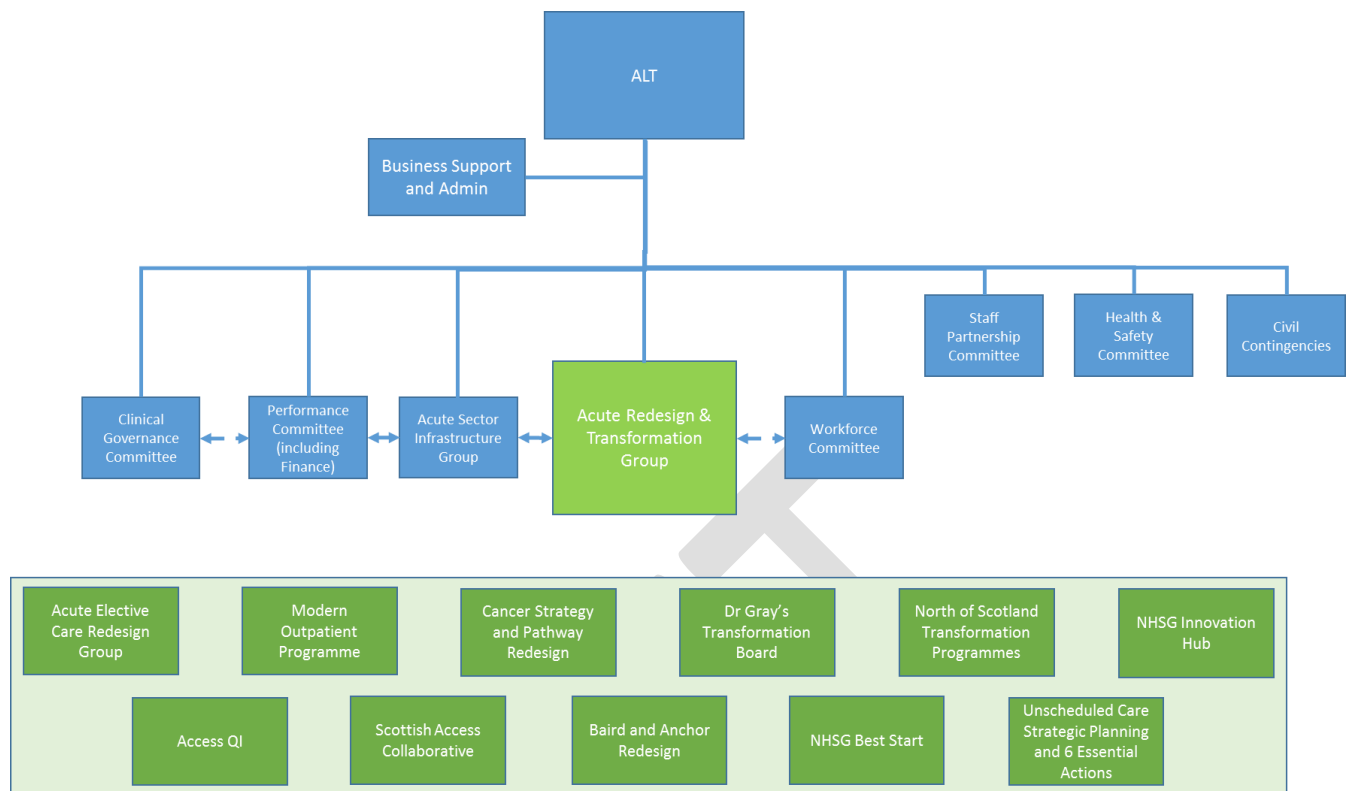
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Key Reporting/Assurance/Planning Work Streams:

Needs thought…

- QI Flow Academy – WTIP
- Scottish Access Collaborative
- Acute Infrastructure and Asset Management Group
- Acute Improvement Team
- Elective Care Redesign Group(s)
- Modernising Outpatients
- Cancer Strategy and Pathway Redesign
- North of Scotland Programme
- Unscheduled Care and Delegated Strategic Planning
- Digital Health and Social Care
- NHSG Innovation Hub