The following extracts provide either one example of a Board’s readmissions improvement activity or a brief summary of a Board’s current and planned activities in readmissions; further details are available from their local programme manager. The aim of these summaries is to support ‘collaboration’ between Boards by enabling you to identify who else is working on something of interest to you and then make contact to share ideas.

NHS Ayrshire & Arran

- A number of process mapping events have taken place regarding admission & discharge pathways which involved in-patient and community based staff and service users & carers.
- To support this work a series of improvement methodology taster training events have been carried out with significant participation of in-patient and community based staff, and service users and carers.
- A training needs analysis was completed with further training to be provided in process mapping, PDSA and DCAQ to support sustainability.
- A co-ordinated structured approach has been employed to recruit & involve service users & carers in all improvement work and specific process/value stream mapping events. A public involvement officer is now in post to recruit new members to the network, update the database and ensure service users are fully engaged and supported in all improvement work.
- An outline “Service improvement plan” has recently been agreed which covers all identified ‘High Impact Change Areas’, and dovetails with the Acute in-patient forum’s revised priorities.
- A service user survey was recently undertaken and improvements identified were incorporated into the “Improvement plan”.
- A further live review of service users readmitted to acute in-patient services is planned.
- Data recording systems have been developed to capture a range of crisis team activity, and readmission activity is being scrutinised in order to establish improved reporting arrangements.
- A number of individual clinical disciplines and support staff in PCMHT and CMHT’s are participating in a pilot study of the Wiseman Workload Tool.
- A redesign of CMHTs is also being taken forward which will link in to the Service Improvement plan relating to in-patient services and the Readmissions workstream.

Further details are available from Anne.Gerard@aapct.scot.nhs.uk
**NHS Borders**

- Case-note review of all readmissions within 28 days of discharge in the past year and a discharge care planning audit in the acute admission units complete. Results currently being analysed which will inform further improvement activity. Following case review, a monthly feedback on all readmissions will be taking place.

- Borders Crisis team are involved in analysing their capacity and demand using the DCAQ tool. The tool has just been completed and a feedback session is being organised. The team will be undertaking a value stream mapping session (with relevant stakeholders) for each of their functions to give a more in depth understanding of the current state and to help plan future improvement. The service will also be considering available benchmarks and standards to assess quality and efficiency of service.

- Borders has also scoped all current work and recent good practice guidance around admission and discharge processes and will be pulling together one action plan to ensure no duplication of work across the service.

- Following completion of the first 3 core Releasing Time to Care Modules, the Acute Admissions Unit will be progressing to the Admission and Planned Discharge Module using this as a tool to improve admission and discharge processes.

Further details are available from Pauline Burns pauline.burns@borders.scot.nhs.uk

**NHS Dumfries & Galloway**

- Process mapping, PDSA & DCAQ training events have been carried out with several teams in relation to this target.

- Process mapping event arranged with Crisis Team & Nithsdale CMHT regarding referral & triage systems.

- SPARRA data has been reviewed in relations to actual vs. predicted readmissions by locality, and comparisons made re those on High level ICP, CTOs, etc.

- Plans to analyse data relating to Wigtownshire Crisis Response Service to identify improvement priorities.

- Continue Leading Change work with retrospective audit of discharge to CMHT follow up. This will inform areas for process mapping & analysis.

- Develop & test out questionnaire on patient experience using PDSA cycles with 2/3 questionnaires.

- Detailed analysis of referrals & admissions to Annandale & Eskdale to identify peak times/patterns & referrers to introduce a test of change with Crisis Teams.

- A workshop is planned in October to generate ideas from operational staff regarding a number of local "standard" applications of the data.

Further details are available from Linda.mckechnie@nhs.net
**NHS Fife**

- Predicted SPARRA data compared with actual data. SPARRA data broken down and distributed by consultant psychiatrist with proforma to collect information on the use of the Data.
- Admission survey piloted in three assessment wards & report completed. SSPC Readmission chart reported bi-monthly to mental health management team.
- Process mapping events carried out with day hospital and CPN team and improvement action plan developed

Further details are available from elizabethsparling@nhs.net

**NHS Forth Valley**

- SPARRA data broken down to CHP level & disseminated to CMHT’s to ascertain variances & or validity & pilot use of data. This is in conjunction with the planned pilot for an Advanced Care Plan for Borderline Personality Disorder patients.
- Process mapping of SMR04 process completed. Changes identified & PDSA of new process completed. Most recent data showed 100% data completeness 6 weeks after month close – an improvement from a low of 17% in Dec 08.
- Discharge care plan being developed for adult wards to enable consistency of discharge planning & support the relevant ICP standard.
- Current risk assessment & risk management approaches have been audited in the adult acute wards. This is informing ongoing work around ICP’s & discharge planning.
- RTC is being introduced in 1 adult & 1 older adult ward.

Further details are available from graham.mclaren@fvpc.scot.nhs.uk

**NHS Grampian**

- Visioning and process mapping of admission and discharge processes.
- Create SPARRA reports for each CMHT and ascertain validity and/or variances.
- Implement Service Manager “walk – rounds” to discuss PDSAs and support frontline staff to identify and implement change.
- Process map out of hours service.

Further details are available from william.cowling@nhs.net
NHS Greater Glasgow & Clyde

- Process Mapping & DCAQ training events have taken place with Acute Planning & Implementation groups. Follow up work is planned to link this into Organisational Development training plan.
- A proposal is out for consultation to capture the User & Carer experience relating to re-admissions.
- Information governance protocol developed to ensure identifiable data within SPARRA is shared with appropriate personnel. Heads of Mental health to ensure specific mechanisms are in place for their localities.
- Six wards identified to participate in Releasing Time to Care (RTC) programme, with staff currently progressing through the national RRC training programme.

Further details are available from Joan.Blackwood@ggc.scot.nhs.uk

NHS Highland

- To conduct a clinical audit to establish reasons for admission – including discussion with ward staff, managers & CMHT’s where appropriate.
- Update process map of admission/discharge process to complete SMR04 data - to identify variations and associated changes.
- Examine reasons for long stay and use information to vision gold standard pathway.
- Explore variations in CHP resources to identify potential correlations with variations in length of stay.
- SMR04 process mapping scheduled for October 09.
- In-patient process mapping to examine the patient experience and identify areas for improvement.

Further details are available from lynda.forrest@nhs.net

NHS Lanarkshire

- The Releasing Time to Care programme (RTC) commenced on the 24th June within six acute adult admission wards. All wards have now completed their three foundation modules obtaining their baseline information using improvement methodologies such as PDSA, data analysis, process/value stream mapping and activity tracking. Each ward is now working on one of the following process modules Admission and Planned Discharge or Therapeutic Interventions. The change management activity of the programme links with the agenda of acute inpatient forums and the outcome of the admission and discharge process/value stream mapping will inform the next version of the Admission and Discharge ICP.
• SPARRA data has been assembled for each Locality and a Clinical Folder has been created on the IT Shared Drive to host the information. Named individuals from each locality have been given permission to access the folder, we are presently developing a procedure for disseminating the data and evaluation of its use.

Further details are available from: Karen.Spiers@lanarkshire.scot.nhs.uk

**NHS Lothian**

• The Releasing Time to Care (RTC) programme is being implemented in 5 Acute Adult wards.
• Ongoing support of the implementation of the ICP standards using improvement methodologies, particularly focussing on discharge planning processes.

Further details are available from: Kerrie.Buhagiar@nhslothian.scot.nhs.uk

**NHS Orkney**

• Ideal and current admission and discharge pathways have been mapped and compared. Changes to current pathways identified and PDSAs established to test identified changes.
• Information on readmissions and on high risk patients made available to teams routinely where the patient is known and active to the CMHT.
• Audit of volume, content and timing of crisis demand over period of one year July 09/July 10 (crisis can be defined as a hospital admission or a demand for service that could not have waited for a routine appointment)

Further details are available from John.trainor@nhs.net

**NHS Shetland**

• Process map current pathway for a Mental Health unplanned care response in Shetland. Visioning, value stream mapping and PDSAs in partnership with Grampian to improve admission and discharge processes.
• Visioning, value stream mapping and PDSAs for mental health unplanned care response, the aim being to define an ICP for mental health unplanned care response in Shetland.

Further details are available from elai@nhs.net
**NHS Tayside**

- Case note snap shot of readmissions to provide a baseline for improvement work & to develop an effective audit tool through PDSA.
- Patient facing time to be calculated by individual CMHT’s.
- Consider all readmissions to identify patients at risk of readmission.

Further details are available from lesleyannebrown@nhs.net

**NHS Western Isles**

- Audit to identify reasons for readmissions when substance misuse is involved and the percentage of referrals that result in admission.
- Comparison of predicted and actual length of stay and correlation with information/data on delayed discharge.
- Visioning, process mapping and value streaming of admission and discharge processes including discharge care planning, community pick up times and the quality of the patient experience.
- Establish system for routine consideration of SPARRA information by community teams
- Completion and submission of SMR04 process mapped and PDSAs running. Most recent data showed 100% data completeness 6 weeks after month close – an improvement from a low of 27% in Dec 08.

Further details are available from anne.hutchison2@nhs.net