South Eastern Health and Social Care Trust

SIF Level 4 Escalation Plan - May 2026

Flow Stage	Strategic Priority and Outcome Measure	Focus Area	Enabling Actions/Priorities	Owner	Director Sponsor	Implementation Date	Review Period	Action Process Metric	RAG Rating	Update
In	1.Maintain ambulance conveyance rates at pre-R2R levels. 2. Zero tolerance to >2 Hour Ambulance handovers (SPPG target). 3. 10% reduction in 12 hour Total in Department Time	Admission Avoidance & Alternatives to ED	Promote awareness of alternative pre-hospital pathways with all stakeholders & ensure up to date	Tony O'Connor	Veronica Cleland	01/01/2026	3 months	NA		Regular sharing of PT with ISP / GPs / internal teams
			Mental Health - - Maximising use of Hear and Treat as 1st step for MH emergency calls being raised at RCRP interagency group. - Recruitment near complete for HTT 24/7 for all adults, to improve MH alternatives to ED. Transfer of emergency referrals from MHAC to reduce number of avoidable ED attendances. - Colocating of Crisis Liaison: GAPLS/ OAPLS/ Substance Liaison Phase 1 to increase Liaison capacity to improve admission avoidance. - New early intervention psychosis pathway in development as alternative to ED. - Continue to work with region on crisis cafe network/ admission avoidance. - Expanding EUPD pathway DBT provision to build on Phone coaching OoH to prevent crisis presentations to ED. - Cohorting of Acute MH Wards to release resource for more upstream intervention to support admission avoidance such as DBOS/ACTOPS and HTT for older people	Kiera Lavery / Fiona Dagg/ Gail Walker	Rachel Gibbs	27/04/2026	1 month			
			Maximise capacity within community - eg Hospital at Home / Falls Service / DN / CHST to support admission avoidance / alternatives	Tony O'Connor / Julie Davidson / Joanne Shannon	Veronica Cleland	27/04/2026	1 month			
		Release to Rescue Delivery	Triggers identified for escalation for R2R. Esaclation process agreed with trigger points in Control Room Operational Policy.	Conor McCracken	Marc Neil	23/04/2026	1 week	0 Handovers over 2 hours. % handover < 60 minutes.		Provide Weekly update to HCF
			Review of any R2R breaches to identify lessons learned. Breach form for Site Co-ordinator / Control Room - to ensure thematic learning. Reviewed daily operationally and weekly at HCF	Conor McCracken	Marc Neil	27/04/2026	1 week	NA		Provide Weekly update to HCF
			Adherence to action cards in site coordination protocol - site coordinator / patient flow. Finalise all protocols in relation to flow	Conor McCracken / Kerrie McClure / Katharine Dane / Kieran Quinn / Robert McCormac	Marc Neil / Brian McFetridge	27/04/2026	3 months	NA		Escalation and Control Room Operational Policy for sign off
		Front Door Streaming & SDEC	Patients should only be admitted when alternatives have been explored including Hospital at Home, supported by Akeso (starting 26th May), other community alternatives and SDEC	Andrew Dobbin	Stephen Kirk	27/04/2026	1 month	Increase patients ED to SDEC. Reduction in ED to wards		Provide Weekly update to HCF. Relevant ADs to link with SDEC units re: ask / approach to support ED response
			All patients with a Decision to Admit (DTA) in ED to be verified by an ED Consultant	Andrew Dobbin	Stephen Kirk	27/04/2026	1 month	% Patients DTA review by SDM (ED audit in line with GIRFT Criteria to Admit)		Monthly vie EM CD to HCF (ED SETGAIN)
			ED Consultants hold admitting rights to Ulster, Lagan Valley and Downe Hospitals (with stated exceptions). Changes in place and shared with relevant teams for action.	Andrew Dobbin	Stephen Kirk	27/04/2026	3 months	NA		EM CD with relevant CD on issues
			All DTAs to be reviewed daily by Consultants and/or Frailty Team every weekday morning	Andrew Dobbin	Stephen Kirk	27/04/2026	1 week	% Patients DTA review by physician team (ED audit)		Monthly vie AM ACD to HCF (Medical Directorate)
			ED roster / workforce sustainability and escalation plans to address waiting times to be seen, impacting 12 hour performance	Andrew Dobbin	Stephen Kirk	27/04/2026	1 month	Reduction in 12 hour breaches relating to waiting times for assessment. 4 Hour performance improvement		EM CD / AD with MD and Director to provide / delivery of appropriate staffing levels.
Through	1. Reduction in Trust Length of Stay 2. Reduction in non-designated bed use and corridor care	Escalation and Bed Use	Very few exceptions for admission to additional (corridor) beds; exceptions documented in the patient record by ED medical staff. The Ward manager will manage the flow in their beds with the patients they have. This will allow earlier filling of all beds. This will include admissions / discharge activity by ward.	Kerrie McClure	Marc Neil	27/04/2026	1 week	Discharges per ward (inc DC Lounge / Transition Ward use). Reduction in moves overnight from ED		Provide Weekly update to HCF
			Maximising use of beds across all 3 sites including MFFD to move from LVH / DH if no suitable NMFFD. Actions managed to maximise front door admission to Downe and LVH.	Conor McCracken	Marc Neil	27/04/2026	1 week	Occupancy rate on all 3 sites. Increase in direct admissions to Downe / LVH via UCC or otherwise.		1. Local patient - Direct Admission to site 2. Local patient - Move from ED or ward when identified 3. Out of local are patient from ED or ward 4. Local Patient - Medically fit Provide Weekly update to HCF
		ED & AMU Flow	Minimum 10 patients to be transferred to Base/Speciality wards by 0900hrs daily. This is a clinically led approach to ensure patients are getting to the right ward.	Conor McCracken	Marc Neil	27/04/2026	1 week	Number of moves from ED by 10AM; 12 MD.		Provide Weekly update to HCF
			AMU Team to carry out a 2nd Post Take Ward Round (PTWR) in ED, Monday–Friday.	Conor McCracken	Marc Neil	27/04/2026	1 week			To be in place from June, sporadic cover until then. Recruitment / returning staff
			AMU Consultant to work every weekend	Kerrie McClure	Marc Neil	27/04/2026	1 week			All weekends covered to end July 26 (next rota not complete)
		Timely Clinical Input & Speciality Flow	Referrals to another specialty should be seen face to face, including mental health referrals	Conor McCracken / Kerrie McClure / Katharine Dane / Kieran Quinn / Robert McCormac / Kiera Lavery	Marc Neil / Brian McFetridge / Rachel Gibbs	27/04/2026	1 month			
			All inpatients waiting more than 24 hours for USS/CT/MR will be reviewed daily and prioritised	Kieran Quinn	Brian McFetridge	27/04/2026	1 week	Number of patients waiting > 24 hours for radiological investigations (recognising exceptions for imaging with procedure)		Provide Weekly update to HCF
			Board rounds and in-person attendance by all relevant professionals, Dr, Nurse, Social Work and AHPs	Joanna Burns, Joanne Shannon, Kerrie McClure	Veonica Cleland / Marc Neil	27/04/2026	1 week	Number of wards with full MDT approach. Qualitative feedback from MDT		Provide Weekly update to HCF
			Process to be agreed for daily review of inpatients with LOS >15 days who have not been medically optimised.	Kerrie McClure	Marc Neil	27/04/2026	1 week	Reduction in number of patient waiting over 15 days. Overall reduction in LoS		Assurance provided through LoS position.
		Senior Decision Making & Leadership	Consultant ward rounds to take place in every ward, starting before 9am, Monday–Friday		Stephen Kirk	27/04/2026	1 week			
			When a Consultant determines a patient is 'Fit for discharge', any proposed changes to this Discharge Plan must be discussed with the relevant consultant. This has been shared with all relevant teams.		Stephen Kirk	27/04/2026	1 month			

OUT	1. Improvement in early discharges and discharge lounge utilisation. 2. Reduction in Discharge Delays 3. Reduction in total time in ED for DTA patients	Complex Medically Optimised Patients	Regular review of all complex medically optimised patients delayed >7 days (from pathway identification) to ensure pathway remains relevant. All patients are reviewed daily, twice a day.	Jo Burns	Veronica Cleland	27/04/2026	1 week		Provide Weekly update to HCF
			Work towards a target number of complex medically optimised per site which should be <12% of General and Acute bed capacity	Jo Burns / Kerrie McClure / Katharine Dane		27/04/2026	1 week		Provide Weekly update to HCF
			Analysis of failed discharges with view to reduction of same	Jo Burns / Kerrie McClure / Katharine Dane		27/04/2026	1 week	Reduction of failed discharges	
		Discharge Readiness	Discharge prescriptions should be sent to pharmacy by 1pm	Jill Macintyre	Marc Neil	27/04/2026	1 week	increase in % on discharge scripts to pharmacy by 1pm from current baseline	Provide Weekly update to HCF
			All IHAPs identified by 9am to be completed by 12MD and 4pm for any actions identified in the 11:30am / 2:30pm control room meetings, and site coordinator to hold responsibility for completion	Conor McCracken	Marc Neil	27/04/2026	1 week	Daily Review in Control Room. Monthly review of reasons for discharge delays	Provide Weekly update to HCF
			All aids/equipment to be ordered as early as possible in the patient journey (cancel later if not required)	? Nursing AD	Marc Neil	27/04/2026	1 week	Reduction in complex delays relating to equipment	Provide Weekly update to HCF
			Ensure consistent discharge transport arrangements - to include work with NIAS on prebooking discharge ambulances	Conor McCracken	Marc Neil	27/04/2026	1 week	Reduction in failed discharges relating to transport	Provide Weekly update to HCF and fortnightly RCC / NIAS meeting
			Very few exceptions for the Discharge Lounge and Transition Ward; exceptions clearly documented by ward nursing staff	Conor McCracken	Marc Neil	27/04/2026	1 week	Increase in use of Discharge Lounge and Transition Ward by ward	Provide Weekly update to HCF
		Intermediate Care & Community Capacity	Maximise flow through bed-based Intermediate Care through continued focus on Intermediate Care bed delays with support of Community Care and Mental Health colleagues	Tony O'Connor / Julie Davidson / Joanne Shannon / Jo Burns	Veronica Cleland	27/04/2026	1 month		
			MH HTT inreach to inpatient wards to expedite discharge/better continuity of care once fully recruited. Phase 1 of single Crisis Liaison service -to improve admission avoidance and earlier discharge-colocating of GAPLS/ OAPLS/ Substance Liaison to increase Crisis Liaison capacity Expanding EUPD pathway provision by 1.5 Band 7and Band 5 support to build on the 90% reduction in bed days for this patient group already achieved via existing DBT and EMDR work in 2024/25	Kiera Lavery/ Fiona Dagg/ Gail Walker	Rachel Gibbs	27/04/2026	1 month		
			Continue to evidence Early Review Team and outcomes	Jo Burns	Veronica Cleland	01/04/2025	1 month		
			Integration of Feebris Remote Monitoring for Hospital At Home Service	Amanda Crawford/ Ruth Gray	Veronica Cleland	27/04/2026	1 month	No of pts utilising remote monitoring / reduction in unscheduled admissions	Provide Weekly update to HCF
			Leverage of Technology Enabled Care to support discharge and care at home	Ruth Gray	Helen Moore	01/10/2025	1 month	Increase in integrated discharge plans including tech enabled care.	Provide Weekly update to HCF