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Bwrdd Iechyd Prifysgol
Abertawe Bro Morgannwg
University Health Board

Gynaecology Services Escalation Policy

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| Author: | Women & Child Health |
| Specialty: | Gynaecology |
| Date Approved: | 18 th September 2013 |
| Approved by: | W&CH Quality & Safety Committee |
| Date for Review: | August 2016 |

AIMS OF POLICY

The aim of this policy is to facilitate the provision of safe gynaecology services within the ABM University Health Board whilst appreciating the responsibility to ensure that the Health Board's bed management & escalation policies are adhered to particularly in time of high activity.

The policy will clearly outline the clinical and managerial processes to be followed in the event of increased activity or staff shortfall within the gynaecology services across the Health Board.

It is essential that early notification of escalation in activity or bed pressure is communicated to the Nursing and management team with the W & C Health Directorate in order to take prompt actions.

ESCALATION ALERT CATEGORIES

In situations where the gynaecology service in Singleton or Princess of Wales Hospital anticipates or is faced with high activity or staff shortages, the Ward Manager/shift leader or Senior Nurse initiates the following escalation alert categories.

These categories will be on clear display to all staff and will be utilised by gynaecology staff across the hospital sites within the HB.

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|--------------|---|
| GREEN | No problem with activity levels |
| AMBER | The capacity is significantly reduced |
| RED | Capacity for accepting further admissions is not available. |

GREEN

No cause for concern. Service levels maintained as normal with beds available to take both elective and emergency admissions. Ward staff to monitor medical/surgical outliers daily and ensure regular medical reviews are undertaken by the appropriate speciality. On a daily basis the ward sister is responsible for escalating patients who have stayed in longer than their planned expected date of discharge. The Nurses should ensure 'nurse led' discharges are undertaken in line with agreed criteria and if outside of the criteria ensure the patient from the gynaecology service is appropriately reviewed and plans including discharges are initiated. If there are patients from another speciality this must be escalated via the site bed management or trigger meetings by the directorate representative.

AMBER

Reaching full capacity with potential impact on taking both routine and emergency admissions.

- Lead nurse to assess and monitor bed situation to identify potential discharges. (To include any possible early discharges).
- "Nurse led" discharges should be undertaken for patients who meet the agreed local criteria in order to avoid delays.
- Identify any early pregnancy complications that could be transferred to maternity services from gynaecology to free a bed.

- Senior nurse/nurse-in-charge to identify outlying patients and initiate repatriation of same to appropriate speciality if the bed capacity allows, this will be done in conjunction with the hospital bed manager.
- Medical/nursing staff to identify any patients who are awaiting results and who could possibly go home in the interim or could be transferred to other areas to wait such as Short stay unit in Princess of Wales Hospital.
- Senior Nurse/Ward Manager will liaise with Directorate Manager and Consultant to determine if any elective work can be postponed or cancelled.
- Notify gynaecology SHO's and Gynaecology/Midwifery Practitioner of impending capacity issues which will impact on being able to receive direct referrals from GP's and therefore, patients will need to be directed to Accident and Emergency Department for assessment if we are unable to postpone the admission for a period of time.
- Senior Nurse/Ward Manager to inform Ambulance Control and "Out of Hours" GP Service of concerns as it may be necessary to transfer/admit patients directly to the other gynaecology ward within the Health Board
- Ward staff to maintain a record of women transferred to alternative unit (App *)
- Incident form (IR1) to be completed in the event of transfer/admission of women to alternative unit/sites.

NB: It is imperative that communication between gynaecology wards in the both sites is initiated and maintained to alert capacity issues and to identify available beds across the Health Board. The aim would be to ensure the availability of one acute gynaecology bed for an emergency.

RED

Last gynaecology bed in Health Board is utilized. No beds available.

- Senior Nurse/Ward Manager to request the bed manager or out of hours practitioner to identify other wards within the hospital who could receive gynaecology emergencies or take a post operative patient . If there are no suitable beds within the Health Board the bed management team/ out of hour manager must contact hospitals along the M4 corridor to establish which unit could receive emergency admissions.
- The executive team will be kept informed of the situation via the locality bed meetings during working hours and out of hours the 'On call manger' will notify the Executive "on-call"
- Gynaecology intake to be stopped. Ensure GP's are alerted of the situation however it make be necessary to triage the women in the emergency department and establish if the woman can go home to return, a bed is needed, or the patient's condition needs immediate treatment and this will need to take place in theatre.
- It may be necessary in times of high activity and pressure across the south Wales area to facilitate opening additional beds or initiating the Pre emptive transfer policy. This will be a corporate decision and specialist nurses will be required to assist in staffing these areas in line with the INC (Increased Nursing capacity) policy.

- There will be a requirement for the senior nurse/midwife or general directorate manager to be available for the conference calls in line with the Escalation Policy for the Health Board.

TERMINATION OF PREGNANCY SERVICE

Those women who have commenced treatment must be ensured a bed on a gynaecology ward in the same unit.

There is an obligation to ensure that the treatment is completed.

**CHECKLIST FOR MANAGING CAPACITY ISSUES REGARDING ESCALATION
OF GYNAECOLOGY ACTIVITY**

Ward :

Date :

Time :

- Undertake a full assessment of all inpatient numbers and risk
- Identify patients suitable for discharge home
- Identify outlying patients and repatriate to other wards
- Assess patients suitable to go to other Hospitals within ABMU Health Board
- Notify Ambulance Control and Out of Hours GP Service

Completed by :

Designation :

RECORD OF WOMEN REQUIRING TRANSFER TO ANOTHER GYNAECOLOGY UNIT / HOSPITAL

Date Ward Closed:

Date Ward Re-opened:

Time Ward Closed:

Time Ward Re-opened:

| Date | Woman's Name | Hospital Number | Reason for Transfer | Transferred to: (Hosp / Ward) | Ambulance arranged |
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Nurse in charge :

| NAME OF HOSPITAL | Date and time of phone call | Ward Status | Comments (please indicate person spoke to at other hospital) |
|--|-----------------------------|-------------|--|
| Swansea: Singleton Hospital Telephone: 01792 205666 | | | |
| Bridgend: Princess of Wales Hospital Telephone: 01656 752752 | | | |
| Llantrisant: Royal Glamorgan Hospital Telephone: 01443 443443 | | | |
| Cardiff: University Hospital of Wales Telephone: 02920 747747 | | | |
| Abergavenny: Neville Hall Hospital Telephone: 01873 732732 | | | |
| Newport: Royal Gwent Hospital Telephone: 01633 234234 | | | |
| Carmarthen: Cwm Gwilli Hospital Telephone: 01267 235151 | | | |
| Haverford West: Withybush Hospital Telephone: 01437 764545 | | | |
| Aberystwyth: Bronglais Hospital Telephone: 01970 523131 | | | |
| Merthyr Tydfil: Prince Charles Hospital Telephone: 01685 721721 | | | |

Directorate of Women & Child Health

**Checklist for Clinical Guidelines being Submitted for Approval
by Quality & Safety Group**

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|--|---|
| Title of Guideline: | Escalation Policy – Gynaecology Service |
| Name(s) of Author: | Jane Phillips |
| Chair of Group or Committee supporting submission: | Gynaecology Forum |
| Issue / Version No: | 2 |
| Next Review / Guideline Expiry: | August 2016 |
| Details of persons included in consultation process: | Gynaecology Forum |
| Brief outline giving reasons for document being submitted for ratification | Updated Escalation policy to take into account service changes. |
| Name of Pharmacist (mandatory if drugs involved): | N/A |
| Please list any policies/guidelines this document will supercede: | |
| Keywords linked to document: | Escalation, gynaecology, |
| Date approved by Directorate Quality & Safety Group: | 18 th September 2013 |
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* To be completed by Author and submitted with document for ratification to Clinical Governance Facilitator