

REASON WHY?

There are currently concerns around the quality of care of patients within the fit to sit area within the Emergency Department (ED). Patients who are "fit to sit" receive an initial assessment and then move into the fit to sit waiting area. They will then receive further investigations and see the doctor where required. The team wished to review the current space for Fit to Sit to improve flow.

PLAN

Currently the fit to sit area is split across two corridors which can impact on the flow of the department. The current process is that patients should spend no longer than 8 hours (480 Minutes) in fit to sit but due to capacity issues within the main hospital patients aren't able to be moved from fit to sit to the appropriate location.

Additionally, if the fit to sit area is full, it can be difficult to accommodate immunocompromised patients. Patients are allocated to a side room if one is available but if they are blocked they are required to wait in the main fit to sit area.

The plan was to locate all fit to sit patients within one area to improve patient experience, overall leadership of the area and maintain control.

Prior to the test of change, patients spent an average of 621 minutes in the Fit to Sit Area (10 hours and 21 minutes).

DO

The team reviewed the current wastes within the process. Colleagues felt that there was insufficient space to see patients which resulted in a delay to the care provided.

The footprint of the department was reviewed and it was agreed to move all Fit to Sit patients to be located in one area. The corridors were flipped and the Fit to Sit patients located in one area.

The team worked closely with the estates department to ensure that all rooms and areas had the required equipment (such as call bells in newly created side rooms).

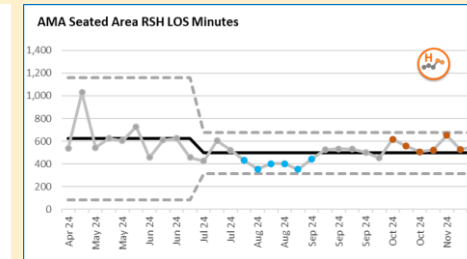
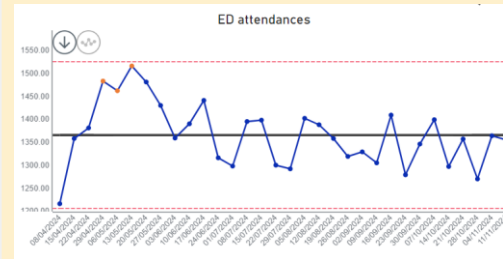
A ring fenced area was created.



To reduce the time that patients spend in Fit to Sit, improving flow across the department by October 2024.

STUDY

The change was trialed at the end of June and resulted in a statistically significant improvement in the length of stay within the department. Attendances to ED had normal variation during this time. Data shows that from the 1st of July- 17th November that the average time spent in Fit to Sit had reduced to 496 Minutes (8 hours and 16 Minutes). Whilst the time spent in Fit to Sit has reduced to almost the recommended limit, there are still further improvements to be made.



Colleague feedback has been positive with team members stating that they feel more in control of the department and there are suitable places to see and treat patients. Patients are now within a dedicated space, providing the team with greater oversight.

Statistically there has been a decline in performance in LOS since October. This is due to the challenged site position and reduced flow across the trust.

ACT

This process has been ADOPTED as it enables greater oversight of patients.

Colleagues feel that the department is safer.

Additional work will be carried out to scope further improvement opportunities within the fit to sit area.