Capacity and Flow Matrons

Theme | UEC Campaign

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SaTH Improvement Hub

The Shrewsbury and Telford Hospital NHS Trust

REASON WHY?

A prolonged Length Of Stay (LOS) can lead to an increased risk of falling, sleep deprivation, hospital acquired infections and physical and mental deconditioning – especially for those who are elderly and frail.

SMART AIM

S SPECIFIC | M MEASUREABLE | A ACHIEVABLE | R RELEVANT | T TIME-BOUND

For the month of March to reduce the LOS by 1 day across medicine wards
(wards 26, 27, 28, 7, 9, 11 and 36)

PLAN

Throughout the month of March, capacity and flow matrons are to visit medicine wards to complete a line-by-line review of patients with criteria to reside.

- Monday/Thursday wards 26 and 7
- Tuesday/Friday wards 27 and 9
- Wednesday wards 28 and 11

In addition to this, the rhythm of the day (ROTD) will be revisited for the medicine flow coordinators, with a focus of reducing the NF3 – awaiting diagnostic or specialist review reason for delay codes.

DO

WC: 2nd March Matrons visited wards 26, 7, 27, 9, 28 and 11.

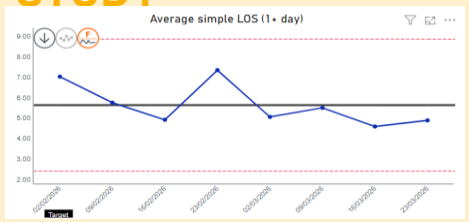
During this week it was identified that Ward 11 was performing well and had little room for improvement within their ward processes, therefore the focus was redirected to ward 36.

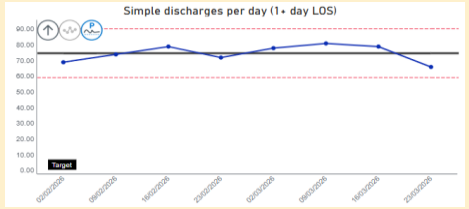
Ward 7 was identified as an area of focus and from WC: 9th March the ward was visited twice daily, twice a week. Additionally, from the 16th March, visits were increased to three times a day to wrap support around board round, midday feedback and afternoon huddles to ensure robust plans were in place and followed through.

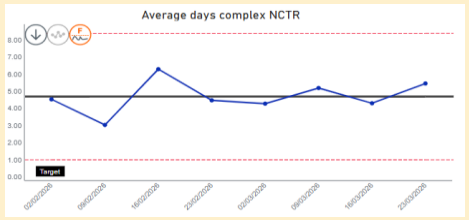
From 16th March the ward with the lowest discharge profile was targeted weekly on a Wednesday.

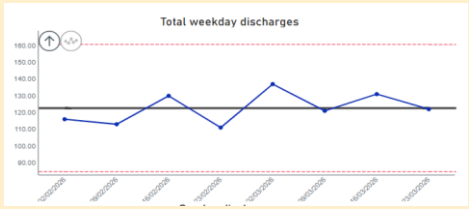
ROTD was revisited and the flow coordinators worked closely with the matrons and attended a twice daily huddle to escalate any delays in patient journey.

STUDY

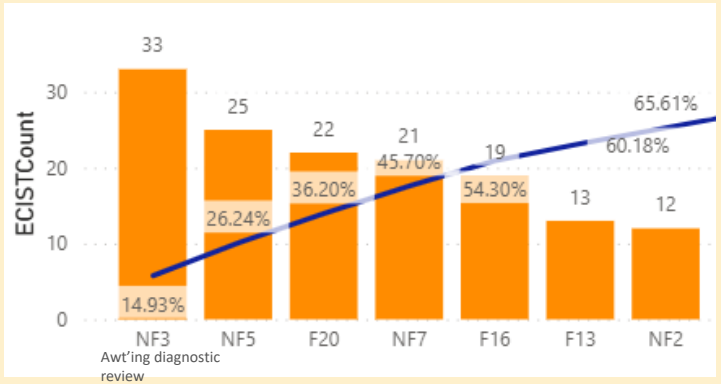








The average simple LOS reduced throughout the month of March, with 4 consecutive weeks under average recovering to levels last seen at the start of December. Simple discharges also saw a rise to above average for 3 weeks, with weekday discharges also seeing a 4-week above average improvement.
There was a concern that LOS from NCTR to discharge would rise however, this was unaffected by the process. The NF3 code remains the top reason for patients remaining in hospital, however, there are no patients delayed by more than 48 hours.



ACT

Discussions are ongoing as to whether the capacity and flow matrons will continue the line-by-line reviews.

The regular touchpoints between the medicine flow coordinators and matrons will be adopted.