Front Door Clinician PRH: Safe and Timely Urgent and Emergency Care Campaign

SaTH Improvement Hub

Theme | MECTP

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Case Study Date | 23/3/26

The Shrewsbury and Telford Hospital NHS Trust

REASON WHY?

Improving 4-hour performance is critical to enhancing patient safety, ensuring timely clinical care, and reducing avoidable harm. Delays in this key metrics increases clinical risk, compromises care quality, and contribute to overcrowding, which strains resources and staff. Improving this performance directly supports safer patient flow, reduces adverse outcomes, and aligns with national standards for emergency care delivery.

SMART AIM

- To increase 4-hour performance during March 2026 to 60%.

PLAN

Plan to implement a Front Door Clinician (FDC) at PRH ED daily 1100hrs – 1900hrs to ensure that patients are assessed promptly by a senior decision maker, to initiate early investigations and treatment, re-direct patients to alternative pathways and make early disposition decisions, to increase 4-hour performance.

The FDC SOP was written by the Consultant Team and signed off by the SMT.

Funding was agreed and a roster was created to cover 1100hrs – 1900hrs for 2 weeks from 2/3/26.

DO

To test the FDC model it was agreed to carry out two weeks of testing at PRH ED commencing 2nd March 2026.

This was communicated via meetings held with the nursing teams in ED prior to commencement of the FDC model to ensure the initial assessment teams were aware of the model.

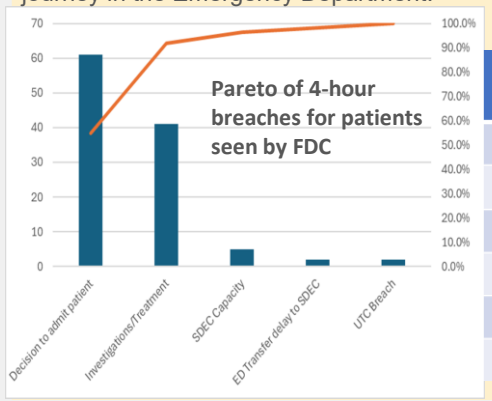
Regular feedback meetings were held during the trail period to look at metrics and discuss the model

Feedback during the first 2 weeks was positive, so the FDC model was increased by a further week covering w/c 16th March 2026.

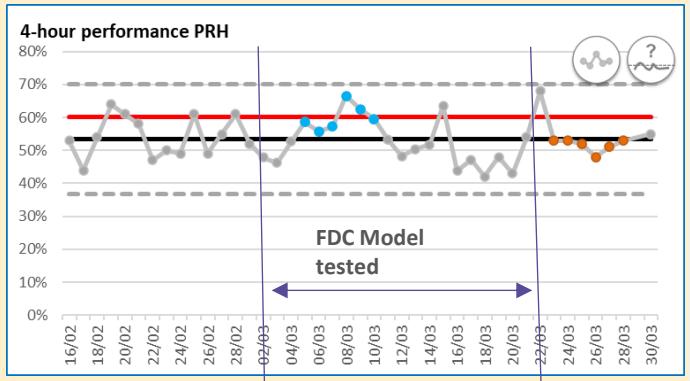
STUDY

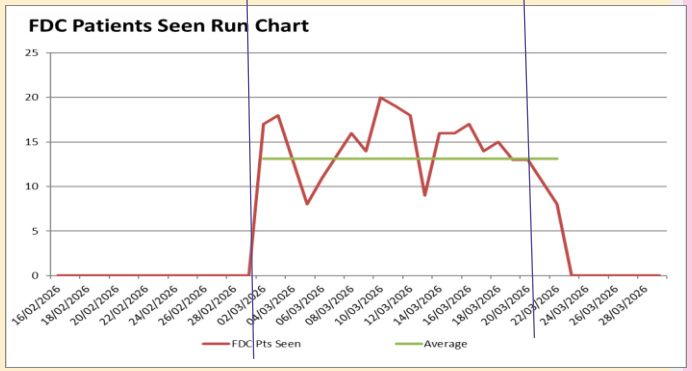
Following the FDC implementation there was statistically significant improvement to performance against the 4-hour target, w/c 12/3/26 performance reverted to common cause variation. Immediately following the end of the trial, performance shows special cause variation. The front door clinician saw 275 patients, an average of 14.5 patients per day and discharged 164 of those within 4 hours.

Feedback received during the 3 weeks trial was positive, the Friends and Family Test feedback from patients showed an increase in patient satisfaction, the nursing teams working alongside the FDC felt supported at the front door, they worked together with the FDC to ensure appropriate investigations were commenced. The average time in the department for a patient reviewed and discharged by the FDC was 160 minutes giving them a more positive patient journey in the Emergency Department.



Disposition	Number patients	Percentage
Discharged home	128	46.5%
Referred to ED	70	25.5%
Referred to Specialities	35	12.3%
Referred to SDEC	24	8.7%
Streamed to UTC	14	5.0%
Streamed to Minors	4	1.4%





ACT

The FDC model will be tested at RSH ED for one week w/c 23/3/26, and then will be reviewed by the Division to decide whether the FDC process will be adopted.

ACKNOWLEDGEMENTS & REFERENCES | Consultant and Nursing Teams in PRH ED.