Transfer Team PRH ED: Safe and Timely Urgent and Emergency Care Campaign

SaTH Improvement Hub

Theme | MECTP

Produced by | Deb Archer/Laura Wild

Case Study Date | 01/04/26

The Shrewsbury and Telford Hospital NHS Trust

REASON WHY?

Improving patient flow through the Emergency Department is critical to enhancing patient safety, ensuring timely clinical care, and reducing avoidable harm. Delays 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 transfer 100% of patients out of the Emergency Department within 30 minutes of bed being declared during March 2026.
- Mean ambulance handover <2 hours during March 2026.

PLAN

Plan to implement a transfer team at PRH consisting of 2 x HCA's 1200hrs – 2000hrs daily, to assist with the transfer of patients out of the Emergency Department within 30 minutes of beds being declared, or to assist with transfers on the acute floor to create capacity in ED.

Funding was agreed and 2 x HCA shifts were sent out to bank from 3/3/26.

DO

A trial of the transfer team was undertaken between 3/3/26 and 30/3/26. Shifts were approved and sent to bank for fulfilment. Shifts were successfully filled on 20 days within the trial period.

To support effective communication a dedicated mobile telephone was sourced for the transfer team. The number was shared with the ED Nurse in Charge and the Acute Floor team, enabling direct contact with the transfer team when patient transfers were required.

Each shift the transfer team was given a data collection form to complete, to capture the number of patient transfers undertaken.

STUDY

Following commencement of the trial, the transfer team carried out transfers on 20 shifts, data was collected on 8 of those shifts.

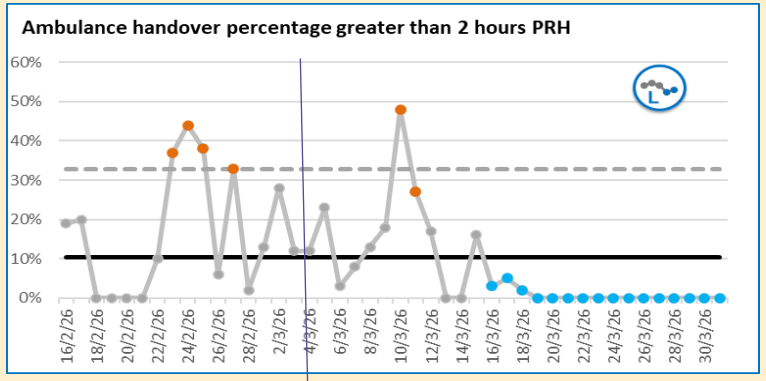
93 transfers were carried out during 8 shifts, an average of 11.6 transfers per shift. **93% of those transfers were completed within 30 minutes of bed being declared**. Prior to the trial, it is likely that a high proportion of the 93 transfers would have been delayed over 30 minutes as the transfers carried out supported the porters who were already carrying out transfers to wards and other portering duties in ED.

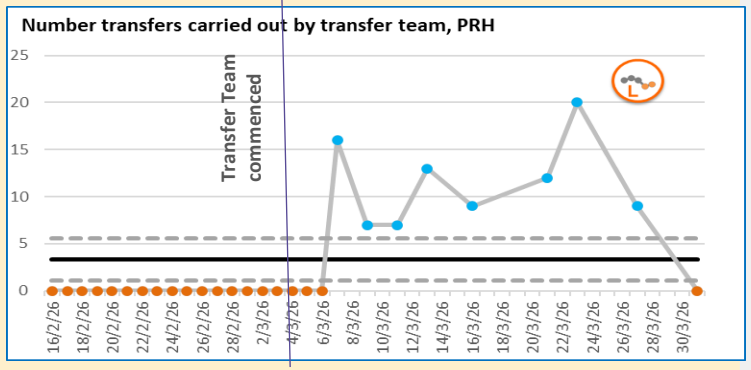
Although there have been number of improvement projects during March, there has been significant statistical improvement to ambulance handover performance whilst the transfer team model has been trialled.

Feedback from the team was positive, the Emergency Department was able to successfully transfer patients out of the department when capacity allowed in a timely manner, enabling them to manage surges in ambulance arrivals.

The transfer team also assisted in transfers from the acute floor and internal moves within the Emergency Department, creating capacity and assisting with patient transfers to radiology further improving flow and capacity.

Transfer Team	
Shifts carried out	20
Number shifts data collected	**8**
Number transfers during 8 shifts	93
Number transfers within 30 minutes	87





ACT

The Transfer Team model has been tested at PRH ED. It will be reviewed by the Division to decide whether the model will be adopted.

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