Weekend Planning – PRH Wards 7, 9, 11, 17 and 36

SaTH Improvement Hub

Theme | Safe and Timely UEC Campaign

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NHS The Shrewsbury and Telford Hospital NHS Trust

REASON WHY? | To ensure levels of harm caused by extended hospital stays is minimised as a 7-day working week, actions are required to increase the profile of patients that receive a Senior Consult review over weekends and reduce unnecessary hospital stays on Saturdays and Sundays.

SMART AIM | Increase the number of patients that receive a Senior Consultant review within Medical Wards on Saturdays and Sundays

PLAN

To reduce LOS, improve quality of care through weekend continuity and increase the discharge profile, the plan was to implement consultant weekend ward rounds across the wards.

Consultants were asked to fulfil the rounds on a voluntary basis.

To support the above, ward teams were asked to hold a Friday huddle to identify any potential discharges for review over the weekend and ward managers supported by patient journey facilitators were asked to identify these using the F14 reason for delay code on patient flow.

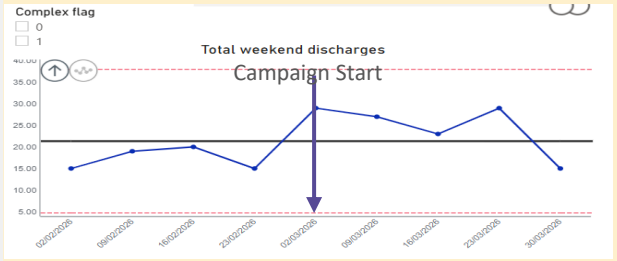
To bolster the plan further, the B7 clinical flow manager volunteered to work some weekends to support the follow through of weekend discharges and to de-escalate any challenges.

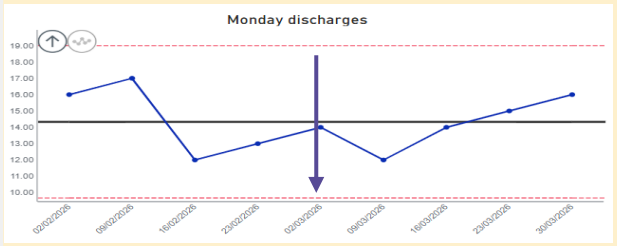
DO

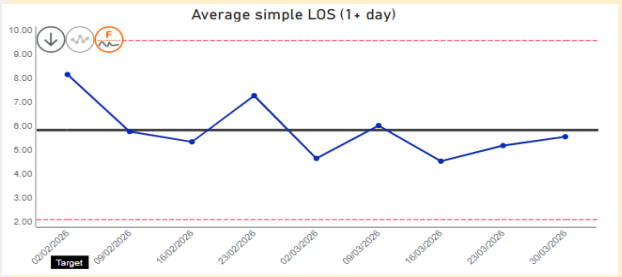
Out of 40 weekend ward rounds, 14 of these were filled.

The B7 flow manager worked alternate weekend days at PRH however, they only captured 1 data set to audit the F14 process. On this 1 data capture it showed that 44% of the discharges were identified by Friday teams and the rest were either identified via weekend discharge round or newly implemented ward rounds.

Study

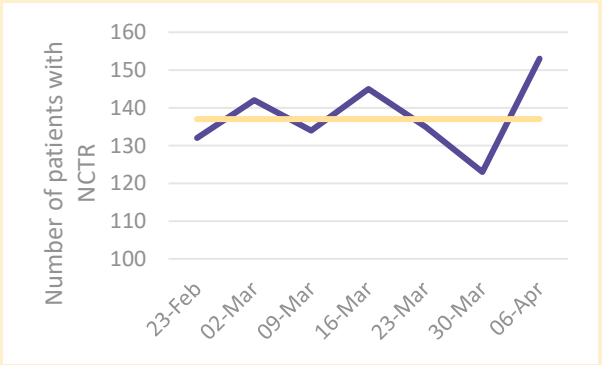






Since the start of the campaign, there has been an increase in the total weekend discharges, performing above average for 4 weeks compared to the previous month. There has also been a 3-week increase in discharges on a Monday, which suggests a continuity of care by senior clinicians over the weekend leads to a reduced length of stay.

As a balancing measure, the number of patients with no criteria to reside was monitored, however, the new process did not affect this



ACT

There are ongoing conversations within the division to discuss whether consultant ward rounds are a process to adopt moving forward, with cost implications and availability having to be considered.