

Discharge case study - Nottingham University Hospital NHS Trust

Developing a 'Knowing How You Are Doing' Tool on Transfer: The Emergency Pathway Dashboard

Overview

Nottingham University Hospital (NUH) is one of the biggest employers in the region, with around 14,000 people working across Queen's Medical Centre, Nottingham City Hospital and Ropewalk House and in the community.

The NUH portfolio of specialist services includes major trauma, cancer, stroke, renal, neurosurgery, heart and spine. QMC is home to the Nottingham Children's Hospital, where 40,000 young patients from Nottinghamshire and beyond are cared for annually.

The Trust is at the forefront of many world-leading research programmes and new surgical procedures. In partnership with the University of Nottingham, they operate two National Institute for Health Research (NIHR) Biomedical Research Units - in hearing and digestive diseases. NUH also hosts the East Midlands Academic Health Science Network.

The Trust has an Emergency Department that sees between 450 – 550 patients daily, and maintaining flow to deliver the four hour ED standard is a key focus area.

Outside of the busy Emergency Ward areas, other hospital areas often do not appreciate how processes in their local area can contribute to flow, and to maintaining or exceeding this quality standard.

This led to the co-development and delivery of the Emergency Pathway Dashboard, which is now used by Directorate Management Teams, Ward Managers and Discharge Coordinators to understand the impact of flow in their local areas.

Background

Managers at the hospital had developed a communication process called 'Five a Day' to remind ward staff to take several key actions to promote flow. These were:

- Daily Board round
- Cut the Waits
- Use the Discharge Lounge early
- Focus on TTOs (To Take Out medication)

- Pull from Admission Areas

Weekly data which showed the key achievements against these standards was displayed on a performance board on the Trust's intranet. It became clear from the performance boards that there was an issue in local ownership of the 'Five a Day' communication, as there was no visible improvement over time. It was clear that a different approach was needed.

Understanding the problem

One Ward Manager fed back that 'I avoid looking at the report as it is not giving me meaningful information about my area, and all I see is a sea of red and I switch right off'.

In order to engage staff and to understand their issues over the current metrics, the project team asked them which standards they themselves would employ to give assurance that flow was happening on their wards.

It was clear that they wanted information that would enable them to track any changes to processes through any improvements made, and they wanted it in an accessible, easy to read format that would enable people to look at it from a Directorate Management level, through to a Specialty level through to individual ward level.

Solutions

The team worked closely with the Information Services Department to capture the wards that were 'in scope' and to source the best place to obtain the data that they asked for.

An initial dashboard was developed within three weeks. The dashboard captures data on the following:

- Pre-noon discharges against a target of 35%.
- The number of 'Predicted Date of Medically Safe' set on Medway PAS, against a standard of 95%.
- The number of patients who actually leave on the date of their 'predicted date of medically safe'.
- The number of TTOs started the day before discharge.
- % of weekend discharges, against a standard that it should be 80% of daily discharges.

To provide a more 'high level' perspective, it also shows the Emergency Department standard values for that week, and the total 'ins and outs' of hospital flow.

The project team worked with ward staff for between 2 to 3 weeks to fine tune the data for their areas, and to refine the Dashboard graph. It has now been successfully in place for several months.

Impact and outcomes

The Emergency Pathway Dashboard is used as the basis for weekly performance meetings between the Executive Director of the Emergency Pathway and Directorate Management Teams. It is used to chart performance over time, and to enable discussions over areas of strength and/or weakness.

The Dashboard is also being used widely by Ward Managers to share information with ward staff to either give positive feedback over performance, or to highlight areas of focus that they need to work towards.

Discharge Coordinators are using the Dashboard widely to track individual ward performance, or to compare themselves with other areas; this has led to visits to see what processes are in place in high performing areas.

Although it is almost impossible to attribute the contribution that some of these initiatives have made in helping NUH to achieve the 4 hour standard, NUH has gone from being the 6th worst performing Trust in England against the standard, to the 10th best within 4 months, and the team believe that this visibility and transparency in our internal performance has a part to play in that.

- **Patients**

The ward culture around patient transfer has transformed itself over the past year, so that there is real ownership by ward staff to ensure that patients leave hospital as early as possible in the day.

There is less 'tolerance' of delays that keep patients in hospital when they are medically safe to transfer, whether caused by internal or external factors. Ward staff will do more to ensure that the patient is safely and appropriately transferred.

- **Whole System**

Colleagues from Social Care have asked to have access to the dashboard, to help them to prioritise which wards may need further support and coaching in transfer practices.

The team works closely with their health and social care colleagues in managing 'transfers out' appropriately and safely, and they welcome the transparency around the performance at ward level.

Further Quality Improvements and Spread

The team are looking into developing this from a 'knowing how we are doing' model i.e. tracking performance over time, to a 'status at a glance' model i.e. real time data that can be used as a basis for immediate intervention or action.

Top Tips

- Staff engagement has got to be the key factor in promoting ownership; this takes time, but be as inclusive as possible.
- Allow time for several iterations of the Dashboard; the prototype was clunky and static, but feedback from stakeholders turned it into a sleek, accessible and digestible resource.
- Although the Dashboard is easy to use, staff were allowed time to absorb new ways of working and offered additional support as necessary.

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Themes

- Electronic systems and records
- Medicines reconciliation
- **Systems that ensure provision of high quality information**