CELEBRATING PATIENT FLOW

SUCCESS

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Acute Medicine Model

Will Orr
Care Group Director – Urgent Care

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Medical Team Based In ED

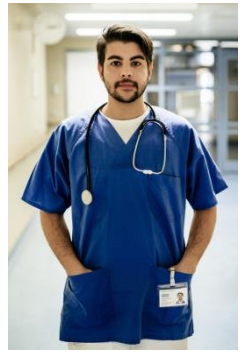
- Increased medical cover (Acute Medicine and Interface Geriatrics) provided to ensure adequate cover across all these areas and increased presence into ED (operating hours 8-5 Mon-Fri initially).

Traditional model of delivering medicine

Number of Investigations

Time

Senior Decision

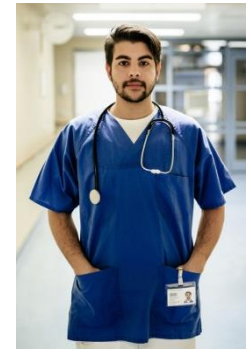


New model of delivering medicine

Number of Investigations

Time

Senior Decision



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- Closer working between Acute Physicians, ED team and POD/ECPOD to enable decision making earlier in patient pathways and to control/reduce the demand for overnight stays/IP beds, particularly in the evening and at weekends

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Easy Early Referral Process - STAT to Acute Med

- Face-to-face referrals to Acute Medicine (AM) (current system using bleeps & mobile phones etc can be unreliable & time inefficient), and start regular use of Instant Messaging to support this (eg Siilo).

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- Maximise the impact of the EPR “single clerking process” to effectively generate additional medical staff on the ground & facilitate early POD / ECPOD reviews.

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- Look again at opportunities for a limited suite of key Point-of-Care tests to be available at the front door, allowing earlier diagnosis & decision-making.

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Easy Access to AECU

- Improved electronic communication between APs and ED regarding medically-expected patients with ‘colour-coding’ of expected patients following GP discussion:

Green = straight to AECU

Orange = could be ambulatory/24hr turnaround but need brief assessment on arrival

Red = high probability of admission. Sound unwell and should be seen/assessed early

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- increased use of ambulatory pathways, next day follow-up or direction to ambulatory services & hot clinics including RACOP, falls clinic, jaundice hotline, IBD clinic, rheumatology flare clinic, ENT ARC, rapid access chest pain or heart failure clinic.

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Acute Medical Unit / Short Stay Unit support actions

- Reorganisation of Acute Medical Unit (AMU) and Short Stay Unit (SSU) in 3 stages:
    - SSU will move into new unit on 24th December
    - 9 closed beds on AMU will reopen 27th December
    - a further 16 beds will open 2nd January
    - includes the creation of an additional 2 HMU beds within AMU

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