

Putting the principles into practice:

Principle 3 – Establish systems and processes for frail people and their families

Challenge

Like all Trusts, we need to avoid inappropriate admissions and ensure that admitted patients spend the minimum time in the hospital.

At South Warwickshire NHS Foundation Trust we had already introduced several new processes and approaches to help improve patient flow. These included extended working hours (including weekend working) and focusing on 'today's work today'. Our latest project focused on frailty.

Insight

We recognised that once patients living with frailty arrived at the hospital, they can all too easily end up staying there longer than beneficial to their wellbeing. Our frailty process needed to resolve this.

We also identified that although our data showed that peak attendance for over 75s at the hospital was between 8am and 8pm each day, our frailty team were only working until 5pm, therefore missing a good chunk of the evening peak.

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Solution

We put in place a process where patients suitable for same day emergency care and short (1-5 days) stays are identified immediately following ambulance drop off. Instead of being assessed in the Emergency Department (ED), they are transferred seamlessly to our specialist Frailty Assessment Unit (FAU). This frees up ED cubicles and releases the nurses to concentrate on other emergencies.

Once patients are in the FAU, we use a 'pit stop' approach where several multidisciplinary specialists assess them at the same time. This helps to speed up the time it takes to assess their needs, makes communication between the teams easier and encourages teamwork. Everything possible is done to facilitate same-day discharge.

For those needing admission, the paperwork is then completed, and a comprehensive management plan is put in place at the FAU before admission. The same team cares for them in the short stay ward until discharge, allowing for continuity of care. We give patients and their families leaflets to set expectations and encourage a home first mindset. Patients are also encouraged to stay in their own clothes and remain mobile. Following discharge, we have introduced follow-up calls from the community team for up to six visits.

We also ran a two-week pilot to see whether frailty staff working until 8pm (covered by staff goodwill for the duration of the pilot) would give a better outcome for patients.

Results

In spite of increasing attendances, the proportion of admissions are falling, the length of stay in over 75s has been reduced by 2 days and bed occupancy is falling, while the readmission rate is unchanged.

'We predicted we would have needed 24 more beds last winter (2018) if this project was not in place.'

Jyothi Nippani, Associate Medical Director for Service Improvement

Over to you

As healthcare professionals, we know that helping people living with frailty to return home as soon as possible plays a vital role in supporting them to maintain their own health for as long as possible. Implementing a well thought out frailty process that works for your Trust offers far-reaching benefits for everyone involved.



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