



ED Flow Improvement

Breakthrough Objective

True North Domain	Breakthrough Objective	Executive Lead
Patient	Reduction in negative feedback where staff attitude is cited as an issue	Nicola Ranger (Chief Nursing Officer)
Sustainability	Achieve the Efficiency plan for 2017/18	Karen Geoghegan (Chief Financial Officer)
People	Staff believe that Care is the top priority for the organisation	Denise Farmer (Chief Workforce Officer)
Quality	Improvement in recognition and management of deteriorating patients	George Findlay (Chief Medical Officer)
Systems & Partnerships	Reduction in the numbers of patients waiting >4hrs in A&E who are not admitted	Pete Landstrom (Chief Delivery Officer)

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Focus for Flow Improvement

- Timely Decision Making Supported by Rapid Review and Access to Results
- Non-Admitted Breaches at RSCH
- Overall Performance at PRH
- In Day Flow including Discharge by Midday
- DToC Reduction

Delivery Through Engagement & Local Ownership

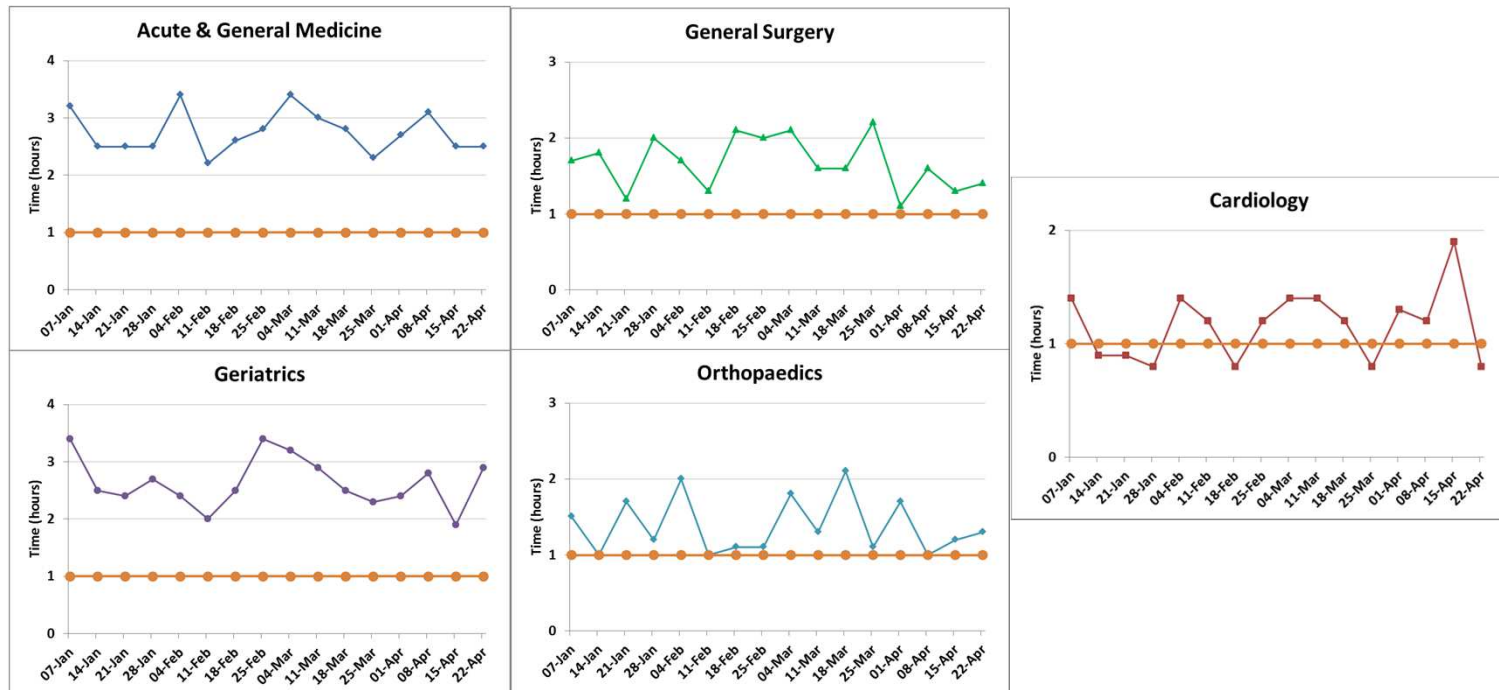
- Weekly Improvement Huddles with Executive support Focusing on:
 - Non-admitted breaches – multi-specialty / executive supported
 - 10 pilot wards for in day flow at RSCH



- PRH Flow Improvement steering group with Multi Disciplinary reps
- Enhanced senior leadership presence at PRH
- Daily DToC calls with system partners to unblock flow

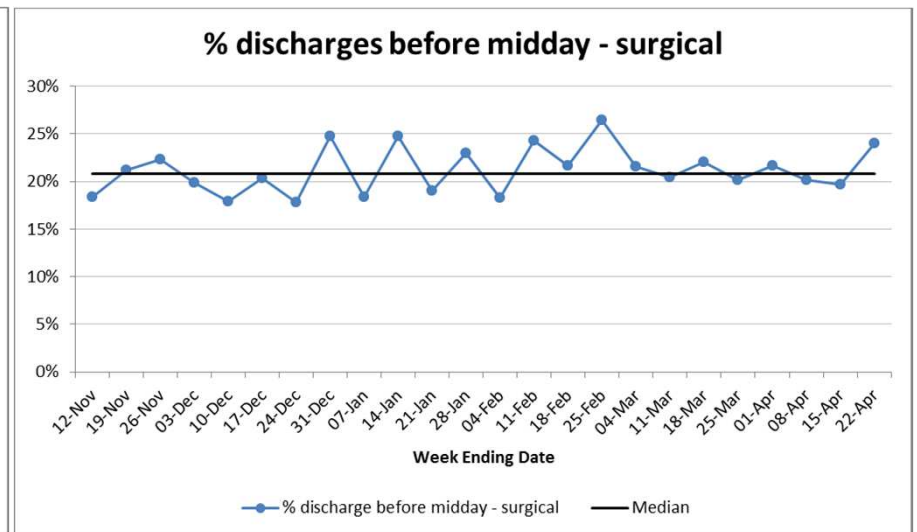
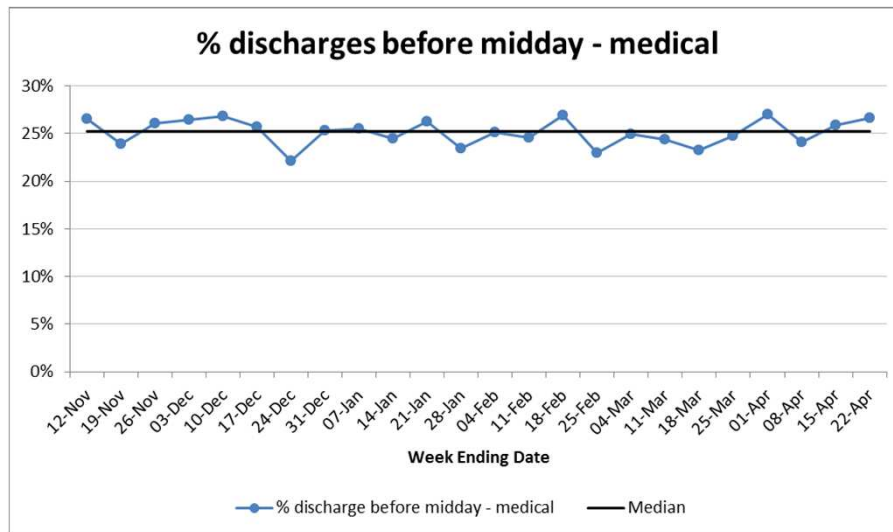
Breakthrough Objective Impacts

- Increased consistency of PAT / slowly improving specialty referral times
- 93% of all blood tests now returned within an hour / 15% to 2% haemolysed
- Average reduction of 1hr for all Radiology Led Discharge patients
- Further Improvement Focus on timely speciality review



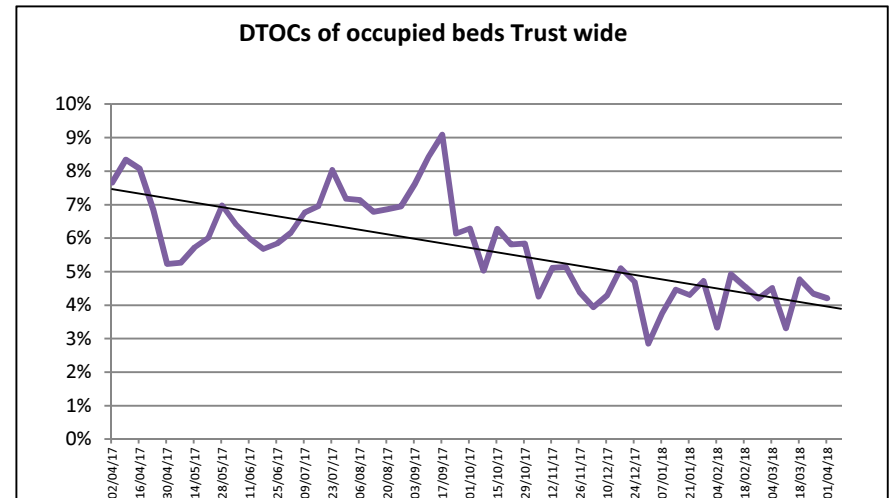
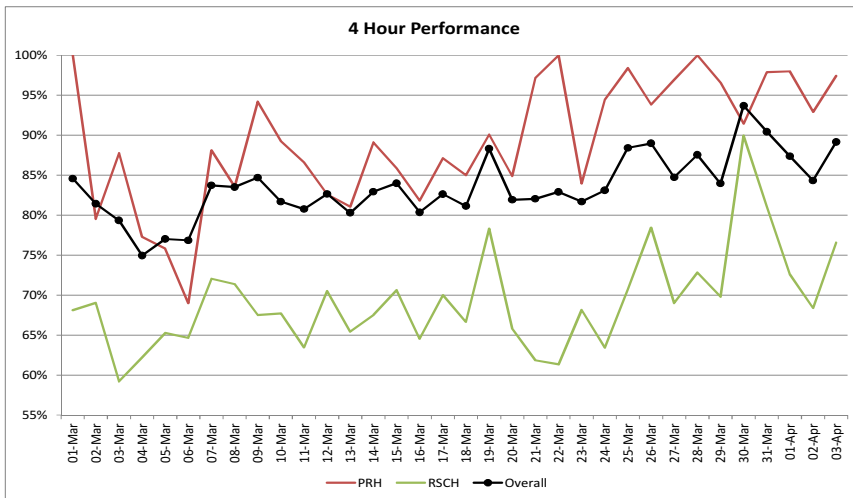
Breakthrough Objective Impacts (2)

- Trust wide discharges by midday in the region of 25%.
- Stretch target of 33% has been set.

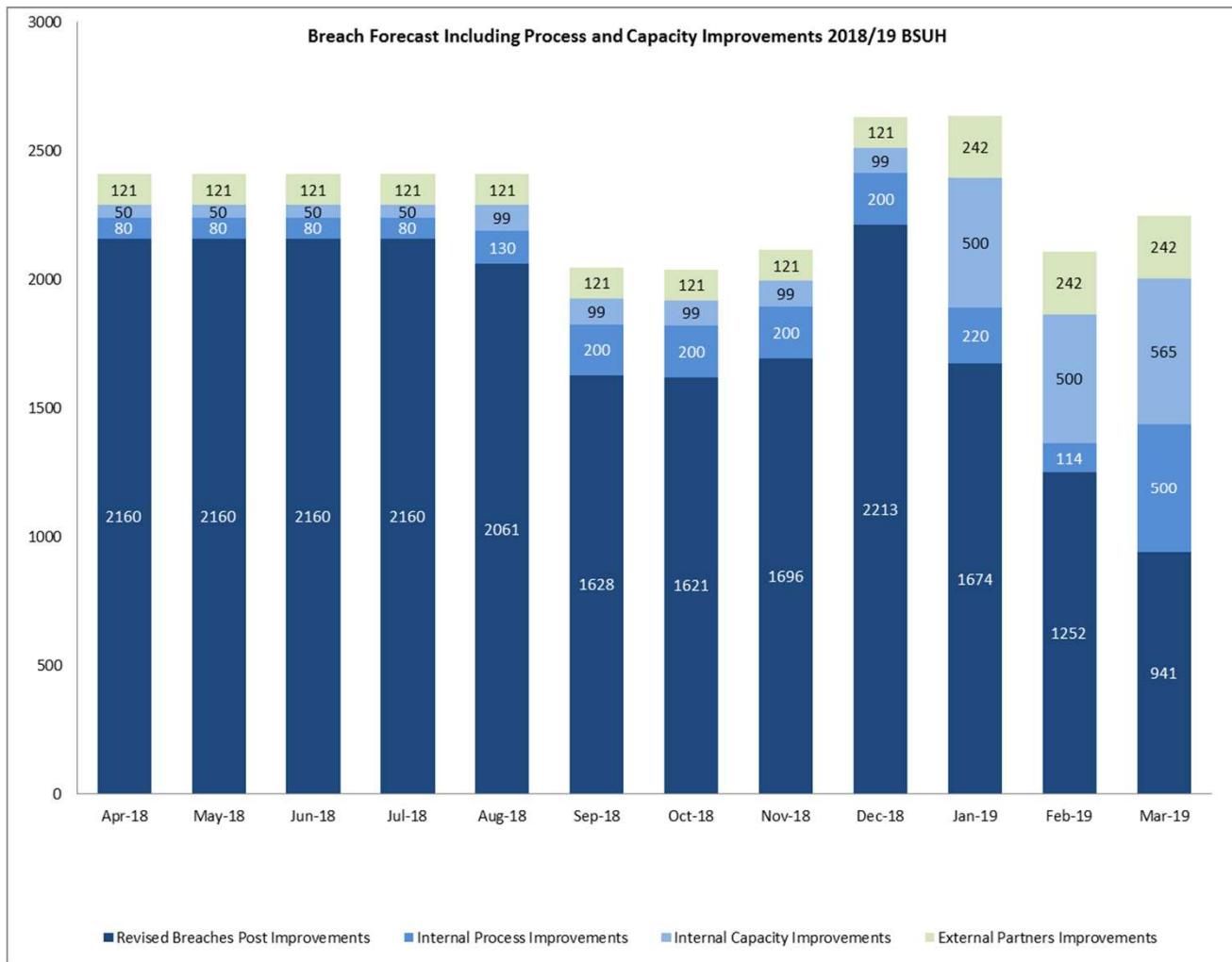


Performance Improvements

- 3-5% improvement in A&E performance compared to last year
- Overall March performance 83.3% and 1.3% improvement from February 2018
- A&E attendances up 3% on March last year with high acuity and ICU pressures
- April performance to date 84.7% (Incl WiC) –
- DToC's reduced although more to do..



Breach Reduction Improvement 2018/19



Governance and Assurance

- Operational Delivery
 - Feed into Emergency Care delivery group
 - Governance through to Operational Delivery steering group and into TEC / Board
 - Mirrors best practice GGI governance structures – launch April 2018
- Breakthrough Objective Weekly Huddle
 - Reporting on progress against each of the 16 improvement projects
 - Coordinate specialty efforts to ensure appropriate focus and support
 - Executive input to unlock problems
- PFIS in ED / Divisional SDR process
 - Huddle metrics forming part of ED PFIS driver metrics
 - Key metrics contained within divisional scorecard
 - Business rules for escalation to countermeasure summary
 - Functions as performance management, problem solving and coaching

