

# UEC WS2-+14 day Length of Stay

Theme | UEC/ Flow Produced by | Madeleine Oliver/ Kirstie Sloan/ Shelby Fenton-Cook/ Karen Evans (SRO) Case Study Date | 06/06/2023 The Shrewsbury and Telford Hospital NHS Trust

#### REASON WHY?

'Prolonged stays in hospital are bad for patients, especially for those who are frail and elderly. Spending a long time in hospital can lead to an increased risk of falling, sleep deprivation, catching infections and sometimes mental and physical deconditioning. Despite this, nearly 350,000 patient spend more than three weeks in acute hospitals each year. ' (NHS England)



To Reduce the number of patients residing over 14 days by 25% by 26<sup>th</sup> May 2023 as part of the 6 week 'new way of working trial'

### PLAN

Following the successful trial of introducing +21 day reviews the plan was to extend this further to patients residing over 14 days in the Shrewsbury & Telford Hospital NHS Trust.

The plan was to continue using the model of improvement to make informed changes to the processes currently in place for supporting patients who have resided in the Trust for over 14 days.

To prepare for this, a stakeholder analysis was conducted to form a working group as part of the SaTH UEC Improvement Programme. This consisted of internal and external colleagues who play a role within discharging/ transfer of care of patients. The initial aim date was then extended to incorporate the 6 week trial of the discharge management tool (DMT) and the 'new way of working' PDSAs that took place from the 17<sup>th</sup> April 2023 to the 26<sup>th</sup> May 2023.

#### DO

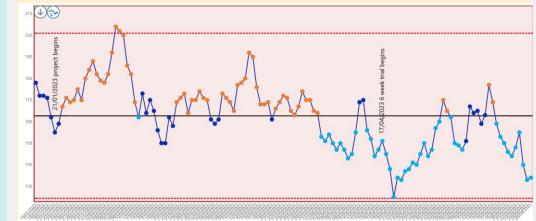
Through the workstream meetings it was agreed that the +21 day review would be extended to include +14 day patients on the tracker and that long Length of Stay Meetings would be reintroduced.

Through PDSA cycles this changed to a weekly Grand Check Chase Challenge held with the ward and weekly LoS meetings with each Local Authority Shropshire, Telford & Wrekin and Powys to ensure clarity on the next critical step to support this patient home.

The Discharge Management Tool was also changed following feedback from the divisional flow coordinators and complex discharge hub to allow for clearer understanding of the cause of delay to discharge e.g. Covid Status

#### STUDY

The SPC chart below shows the total number of patients residing over 14 days Monday to Sunday from the 16<sup>th</sup> January 2023 to the 26<sup>th</sup> May 2023 in Medicine and Surgery core ward base across both sites (further breakdown of data is available upon request). As we can see there has been a statistical improvement in the numbers of patients residing over 14 days and this has been largely maintained below the control limit of 163, since the 1<sup>st</sup> April 2023. **This has resulted in a 25% decrease between the start and end date.** 



Surgical Flow Coordinators said 'we don't want to go back to the old way of working' and the ward teams fed back that they felt they had more time to focus on patient care. It has been recognised that further improvements are required to the long length of stay meetings with our external providers

## ACT

To develop the new rhythm of the day model further and to incorporate it into business as usual.

Continue to work with system partners to reduce number of patients residing 14 days or more further.

To work with the virtual ward to identify patients whose care can be transferred to the team who will support clinical monitoring and interventions in the comfort of a patient's own home.

ACKNOWLEDGEMENTS & REFERENCES | NHS England

