

RSH Perfect Week Paeds- Initial Assessment

Theme | ECTP Produced by | Abi Kelly Case Study Date | 24/09/2024



REASON WHY? As part of the Emergency Care Transformation Project, it has been identified that patients are not meeting the initial assessment from arrival to assessment of 15 minutes. This results in a backlog of patients who are delayed in being seen by a Clinician. This delay can result in harm to patients, particularly if they do not receive additional tests, or leave the department without being seen. This also meant that the Key Performance Indicator of being seen within 15mins of arrival was not being met.



To improve the number of children reaching initial assessment times of 15 minutes of arrival to RSH Emergency Department by 24th September 2024.

Test of Change

PLAN

Improvements have been made to the initial assessment process, however, it was felt that there were further opportunities for improvements within the initial assessment process.

The team engaged with colleagues to understand what the current process was and develop ideas for testing.

The two elements of focus were the addition of a third twilight nurse and a review of the current safeguarding process.

A whatsapp group was utilised to share information around the test of change and magic paper placed on the wall to gather feedback. Also a poster was created to raise awareness and shared across staff internal communication pathways. Additionally, the test of change was briefed at the start of daily shift huddles.

DO

The test of change was carried out the week commencing the 16th of September until the 23rd of September with an additional staff member being allocated to cover the twilight shift 16:00-22:00. A second triage room was created for initial assessment.

An additional member of staff was allocated to each shift. Staffing the twilight shifts proved to be a challenge and as a result an additional team member was allocated 5 out of the 7 days.

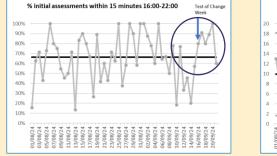
The review of the safeguarding element of the process required further discussion with the wider teams and as a result was marked out of scope for the week. However, during the week, the team were able to utilise the 5S principles to review the information currently completed as part of the assessment.

STUDY

Initial results of the additional team member showed an improvement to the number of patients receiving an initial assessment within 15 minutes.

The number of patients seen within the 15 minutes was above average. Whilst the number of patients seen within 15 minutes has been reported to be 100% in the past, this tends to correlate with lower patient numbers. During the week the teams had a higher throughput of patients and an increase in the percentage of patients seen within the 15 minute target, suggesting that the introduction of an additional nurse has a positive overall impact on the initial assessment time.

Number of patients



Additionally, colleagues felt patient flow was improved and there was a greater oversight within the department when patient numbers increased, resulting in an improvement in patient and colleague experience. This ultimately led to a much safer CYPU for children in the dept. It is worth noting that a number of "unexpected" conditions occurred within the week which were possible to manage with the additional staff. Also worth adding due to unexpected staff sickness CYPU was not always staffed with regular staff which held some inconsistencies in the process.

ACT

The addition of a third triage nurse has shown to improve the overall number of patients seen within the 15 minute target, however, this test of change week is not sustainable with the current staffing template.

There are continued challenges in managing activity/demand around a small workforce, particularly around emergencies/ colleagues taking their breaks. This has a negative impact on both colleagues and for patients.

There is currently only one room suitable for initial assessment, the second room created was not fit for purpose. Further exploration of this will be required.

The safeguarding process will be reviewed in line with the November update to Careflow.

ACKNOWLEDGEMENTS & REFERENCES |

