

CASE STUDY

Mental Health Community & Inpatient Services Improvement Programme

Background

Following a successful project within one of this major Trust's Locality Delivery Units (LDUs), the Executive Team decided to engage in a second programme beginning in July 2016. Meridian were invited to identify operating improvements within the remaining 5 LDUs, across both the community and inpatient services.

Study Findings

The purpose of the study was to understand the current processes in place and identify areas of potential improvement. The findings were:

Community Teams:

- Historic reported average face to face contacts per worked day of 2.07, with only 21.6% of time spent on direct clinical contact by staff;
- A need for appropriate management controls to measure performance and enhance the structure of care delivery/activity within the teams.
- No targets or expectations within the community teams regarding what represented a 'fair day's work'.
- A cultural way of working and inefficient use of resource including bank and agency hours not justified through work content.

Inpatient Services:

- Delays and variances were not consistently quantified nor attributed to actions required, both in and out of the wards' control.
- Discharge dates were not routinely set or known by clinicians in the care pathway.
- 'Out of trust' bed night usage of 31 beds per night on average.
- A lack of communication between the LDUs, causing delays transferring patients back to their home area, thus delaying discharge.

Project

The Trust embarked upon a 39-week long programme across 43 community teams (382.59 WTE's) and 23 inpatient wards. In addition to this, a programme within the secure services was also completed over a 10-week project, running concurrently.

Within the Community Mental Health Teams, Meridian supported the development of a range of pathways in terms of frequency and intensity of contact & support, including management controls to set targets and improve planning & allocation of work.

Work allocation methods were developed within Community teams to enable staff to plan home visits effectively across the area whilst freeing up resource for other clinical activity such as handovers, ward rounds and CPA reviews.

Meridian worked closely with the Trusts' Triumvirates for each LDU, merging together the developed practices to create a unified way of working across the trust, allowing for ease of comparison between LDUs for the first time.

Within the Inpatient Services, working with Matrons, Ward Managers and the Consultant body, Meridian developed a system of controls and processes focused on effective patient pathway planning and allocation of critical tasks to ensure the most appropriate length of stay for each patient on the ward. Front-line management practices and behaviours were challenged with a view to taking ownership over expectations on external parties to ensure the Trust effectively managed its barriers to discharge.

Meridian worked with front-line management, the Bed Admin Team and Community Team Management to establish a clear escalation process, minimising delays to discharge arising across the different services, with the outcome being a reduction in the Length of Stay, and Out of Trust bed night usage across the trust.



Results

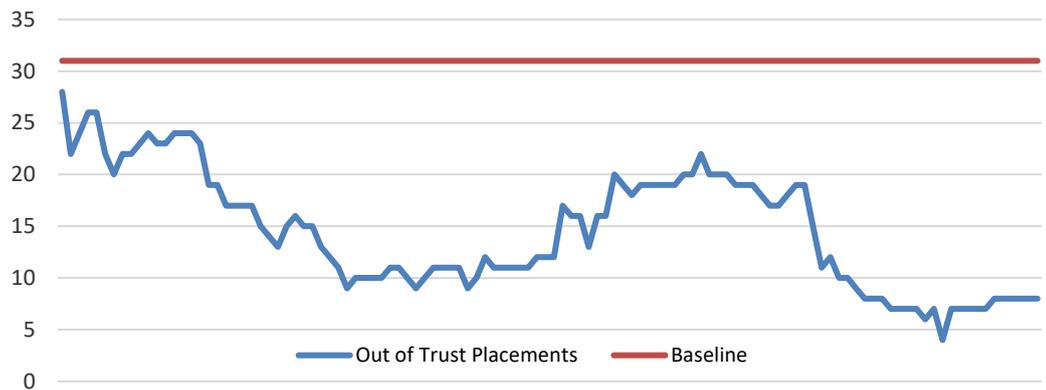
Community Mental Health Teams:

- A savings realisation plan of £3,258,099 with savings cashed through a combination of bank reduction, closure of agency posts, vacancy closure and attrition.
- A consolidated process of forecasting, planning, assigning & following-up across every community team, ensuring each team worked in the same way towards the organisational goals.
- Unity in terms of clinical activity targets across each service, providing equality for the clinicians regardless of which LDU they worked in.
- A clear reporting process through all levels of hierarchy, providing much greater transparency of performance of each LDU on a weekly basis.

Inpatients Services:

- A reduction in Out of Trust (OOT) bed usage of 174 bed nights per week, equating to an annualised reduction in spending of £5,241,600.
- A reduction in the Average Length of Stay of patients admitted within the life of the programme of 23 days against the base length of stay of 63.8 days.
- A level of zero OOT beds used within the largest LDU for the first time in over 3 years, with a historic average of 15 OOT beds being used each night.
- The generation of a Unique Intended Discharge Date (IDD) for every patient within the wards, visible to all staff, ensuring that the clinical team had an aligned goal, and were therefore proactively planning for discharge.

Out of Trust Placements over time



Contact Us

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Meridian Productivity was established 1996, and has been extensively involved in the Healthcare industry across the United Kingdom, Republic of Ireland, Holland, Belgium, Spain and the Czech Republic. Meridian assists clients across the Healthcare environment (private and public) in achieving improved operating efficiencies and performance, through the development of bespoke management and behavioural processes. These processes are all designed and implemented to ensure that our client organisation can be assured of returning the best performance on the resources applied.

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