

CASE STUDY

Inpatient Wards

Background

In the summer of 2014 Meridian carried out an analysis of 7 Inpatient Wards for a large Healthcare Trust. The inpatient services employs 6 consultants, 5 psychologists, 22 occupational therapists and 116 WTEs of nurses. For the past two years the inpatient directorate had been unable to produce CIP savings. We invited Meridian Productivity in to conduct an Analysis of the Inpatient Wards to identify if any potential opportunity was available. There has been no structured planning and follow up process for the daily delivery of patient care. Before the start of the project, average length of stay was 47 days for adult acute patients and ward occupancy was 102%.

Study Findings

The analysis was a three week long study, where a total of 23 resource days were used. There were a total of 7 wards, out of which 4 were in one location and the other operating units were at another site. The Trust wanted to identify any potential areas for improvement including reviewing the number of beds in use. The study carried out by the Meridian Productivity had shown that there was no clear link between staffing hours rostered and staffing hours required on the wards, there was a lack of management control over bed management due to a lack of appointed decision makers, there was no visibility or assignment of the volume of work needed on a daily and shift-by-shift basis and there was a lack of cohesion in the way of working across the 7 inpatient wards. The programme sold was an 18-week-long Project designed to reduce length of stay and occupancy.

Project

Meridian worked with the Directorate Management team, ward managers, Clinical Leads & Consultants within the Inpatient Directorate over 18 weeks through a series of meetings, workshops and daily engagements. During these various sessions a new management control system was designed to ensure effective running of Inpatient Services by forecasting, assigning and following-up on all aspects of patient care with the input of all levels of management and specialities. The reinforcement of these new management controls was achieved through intensive engagement with all departments within the inpatient services. Meridian coordinated the

workshops with the representatives of these groups to manage the views and opinions of each of the staff groups.

The Trust is now in a position to assess the current capacity surplus or deficit in each discipline versus the demand using factual information. With the use of the Staffing Capability & Capacity tool the management team can review the hours needed of all nurses against the staffed hours and take appropriate actions to meet demand and the patient treatment goals. The Inpatient Services daily allocation / follow-up meetings are also in place which enables the proactive planning of patient care on a daily rather than weekly basis. These processes allow the correct alignment of staff to ensure that patient . The senior management team meets at the Bed Management Meeting weekly to plan for future discharges, admissions and to review any issues over the delivery of patient care which has caused a noticeable change in behaviour. Daily meetings occur across all wards to assign jobs specifically linked to patient's recovery goals whilst follow up meetings occur to ensure tasks are sufficiently completed on a daily basis.

Results

The processes introduced and implemented delivered a common daily way of working over all wards ensuring the standards of care were similar across all inpatient wards.

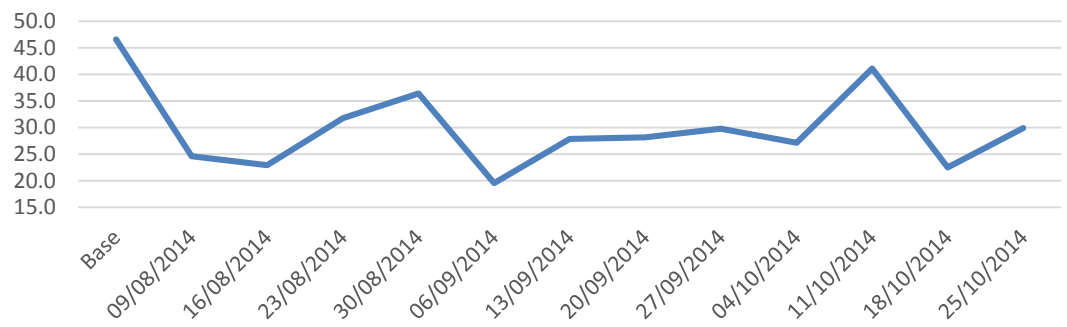
- A reduction in Average Length of Stay of Adult Acute Patients from 47 days to under 30 days (please see graph below)
- A proxy annualised financial cumulative gain of £3,435,316 due to the reduction in bed days used and the reduction of 4 Older Adult beds
- The lowest recorded Bed Occupancies levels on record three times over the 18 weeks (please see appendix 2). Average occupancy was consistently under 90% week on week and went as low as 82%. This is a reduction of 20% from 102% before the project started.
- The constant availability for emergency admissions or community beds due to low occupancy
- A self-perpetuating management control system which uses actual



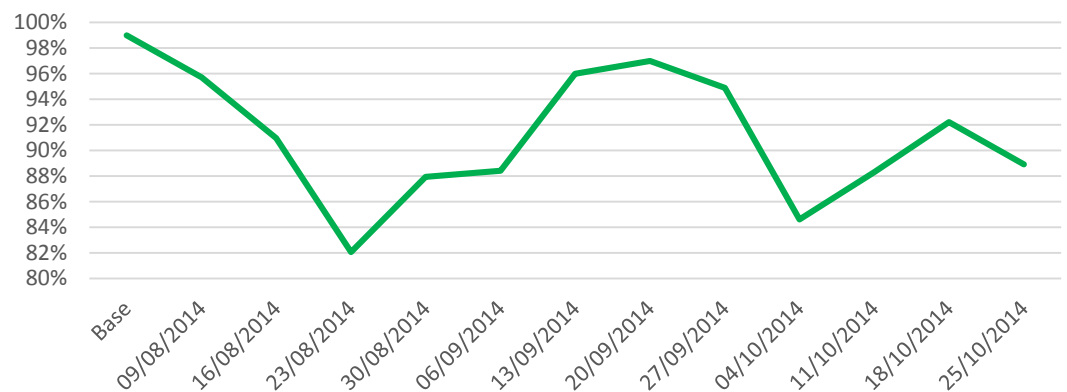
outputs and data to inform the future plan

- Daily Planning and Review meetings allowing an informed planning and allocation of work that is reactive to patient needs and changes.
- Perpetuated behavioural change in department managers and staff
- The installation of a forecasting and reviewing tool quantifying staff capability to delivery on patient care. Using real nurse captured data that measures the variance between nursing hours needed and nursing hours available on the wards.
- The introduction of bespoke management tools for OTs, Psychologists & Nursing staff to schedule, allocate and review staff.
- Improvements made to Bed Management meeting making it an adept forecasting and reviewing tool by solving barriers to discharges and holding staff to account over expected discharge dates

Adult Inpatient Wards - Length of Stay



Adult Inpatient Wards - Bed Occupancy %



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.

We work with about 20 to 25 organisations a year, both in the public and private sectors, helping them to reduce their operating costs, improve their productivity and provide value for money.

Find out how Meridian can benefit your organisation.

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