

CASE STUDY

Adult Mental Health Services

Background

Meridian has engaged with the Trust on 2 previous occasions working within the Physical Health directorate. Following on from the success of these projects, Meridian were commissioned to undertake a further analysis across the entire organisation.

As part of the project, Meridian were tasked with looking at supporting the Trust to achieve a CIP saving of £580k across the Adult Mental Health Service. This included Local Mental Health (LMHT), Crisis Resolution (CRHT), and Inpatient services.

Study Findings

Meridian conducted an initial analysis during the first few weeks of the project, and found the following:

- A lack of clear definition of service provision and management control across the different community services,
- Poor communication between teams regarding capacity and demand, resulting in a mismatch of workload.
- Significant waiting lists and delayed discharges across all services.
- Low productivity across the community teams, ranging from 1.2 to 2.3 contacts per WTE day.
- Barriers to discharge from inpatient wards caused by a lack of capacity within community teams resulting in extended length of stay.
- A lack of robust discharge planning from all services.

Based upon the findings, Meridian began an improvement programme to;

- Implement a new way of working based upon clear expectations across all services.
- Install controls for clinical activity and patient management, calculating staff workloads and highlighting issues with patient pathways.
- Increase communication and engagement between different services and improve patient flow in and out of each service.

Project

Meridian embarked on a 26-week project with the Trust, across 9 LMHT's (236 WTE), 4 CRHT's (80.2 WTE) and 9 Inpatient wards (169 beds).

Within both the LMHTs and CRHT's, Meridian supported the development of a range of management controls to improve planning & allocation of work. These allowed easy monitoring of pathways in terms of frequency and intensity of contact & support and supported the achievement of agreed targets.

Management behavioural workshops were held with the different service supervisors and leaders to provide the necessary skills and coaching to help embed the new system. Subsequent technical installation sessions were also delivered to maximise understanding of the benefits of the new controls. This ensured that all developed controls were able to be fully utilised by services and deliver the maximum benefit.

Work allocation methods were developed within both sets of Community teams to enable staff to plan home visits effectively across the area. Improved planning thus freed up resource for other clinical activity including handovers, ward rounds and CPA reviews.

Meridian worked closely with the Trust's managers for each separate locality. By identifying areas of best practice, they were able to pull together the most appropriate elements and create a unified way of working – a first for the Trust. This parity also allowed ease of comparison between the teams' performance.

Daily and weekly review meetings were installed across the Community and Inpatient services to improve communication and consequently patient flow between all three services, LMHT, CRHT and Inpatients. This helped reduce delayed discharges from the Inpatient wards and also the transfer of patients from the CRHT's back to the LMHT's.

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. This was designed to ensure delivery of the most appropriate length of stay for each patient on the ward.



Front-line management practices were challenged to encourage escalation of issues where barriers to discharge existed. Key individuals were required to take ownership over delays and place expectations on external parties to ensure the Trust effectively managed its delayed discharges.

Meridian worked with front-line supervisors, the Bed Management Team and Community Team Managers to establish a clear escalation process. The outcome of this new process was a reduction in Length of Stay thus ensuring that patients are now treated in the most appropriate environment for their mental state.

Results

Following the successful installation of the controls and behaviours within the Adult Mental Health Directorate, the results are as follows:

- A reduction of 24% in average length of stay across Acute wards, from a base figure of 50 bed nights to 38.5, which equates to a reduction of over 10,000 bed nights which would have otherwise been required by the discharged patients.
- An indicative productivity saving of £3.8m, based on the reduction in required bed nights across the acute wards.
- A Cashed saving of £164k through the closure of vacancies within the CRHT service, representing 28% of the CIP saving for AMH.
- A productivity increase of 69% from 2.3 contacts per WTE day to 3.9 contacts per WTE day, against a target of 4 contacts per WTE day.
- A reduction in spend on Bank, Agency and Overtime of £59k relative to previous year's spend.
- A reduction in length of stay within the CRHT service of 24% against base.
- Reduction in patients staying over 6-week target of 41%, from 81 to 34 patients
- A reduction in the caseload size of the City team from 110 to 64, which was the team having the most significant challenges.
- A cashed saving of £273k through the closure of vacancies within the LMHT service, representing 45% of the CIP saving for AMH
- An additional identified saving opportunity of £602k within the LMHT's, which the Trust is formulating a plan to realise in the coming year.
- A reduction in spend on Bank, Agency and Overtime of £71k relative to last year's spend.
- A productivity increase of 33% from 2.1 contacts per WTE day to 2.8 Contacts per WTE day.
- Clearly established targets across each of the community teams, ensuring all staff are working towards the same goal with equitable workloads.

- Patients now have a clear intended discharge date in each service from Inpatients to LMHT.
- A clear reporting process throughout all services, ensuring any issues are quickly identified and dealt with.
- An escalation process across the services, to provide a more cohesive working practice to prevent delays across services.

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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