

# Greater Manchester Mental Health Foundation Trust Best Care Every Day: Perfect Week Events Healthier Patient Pathways Transformation Programme

## Background

The Healthier Patient Pathways Transformation Programme was introduced in June 2021 to deliver improved systems, approaches and outcomes in relation to GMMH capacity, bed management and patient flow. Five workstreams were identified to drive a reduction in Out-of-Area (OAP) patients, improve ward efficiency and to identify a standardised way of working across the Trust.



Under the first Workstream- Best Care Everyday, Perfect Week events launched in June and concluded in September.

The Perfect Week aims to deliver a gold standard patient experience by focusing on quality and patient flow. The underpinning principle of the Perfect Week is that every minute of a patient’s life is precious. By providing best care every day, timely resolution of challenges and optimising staff skills and time, the key outcomes are to improve patient flow, create bed capacity and ultimately reduce OAPs and length of stay.

## Study Findings

A 3 week analysis was completed across different areas of the Trust, mainly focusing on the Patient Flow Service’s ability to control patient movement, whilst also monitoring key care indicators in the patient journey that add to an effective and efficient ward.

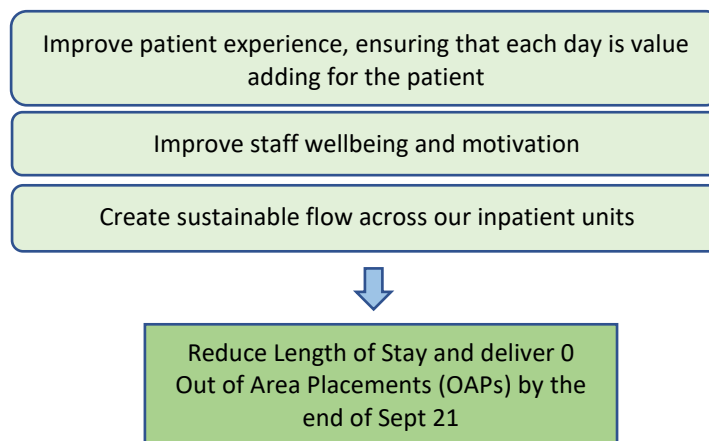
Meridian identified a potential improvement across the services which will see the length of stay reduce by up to 20% and additional resources (inc. bank & agency) be reduced, for equivalent volumes. This would result in the achievement of the zero reportable out of area placement target, as well as potentially a further reduction in some of the contracted acute bed capacity. Expressed in financial terms, this equates to a minimum annualised value of £1,885,000 (spot purchased bed capacity 2020-'21), but by adding improvements in PICU and some of the contracted acute beds, more likely close to £4 million—the weekly minimum improvement value is projected at £36,250 after the points of installation.

## Project

Each Division participated in two planning workshops prior to the actual Perfect Week that outlined the programme goals, the Bronze, Silver and Gold approach to escalation with each division identifying a lead who would support flow via established escalation routes. Key tools such as the Sit-Rep and the Discharge Countdown Tool, assisting with the review of the front door pressure, allocation and escalation of actions and review of barriers to discharge were agreed. During the workshops colleagues were introduced to the Lean Approach and participated in the identification of key change ideas from pre-admission to discharge, to be taken forward during the Perfect Week using QI methodology. Senior leaders and clinical colleagues from both inpatient, urgent care and community services, alongside key stakeholders such as Commissioners, colleagues from Acute Hospitals, Adult Social Care and other local services participated in the planning workshops and daily Bronze, Silver and Gold meetings.

The approach and progress of the Perfect Week was also reviewed at weekly Lead Consultant meetings.

The overarching programme goals of the Perfect Week:



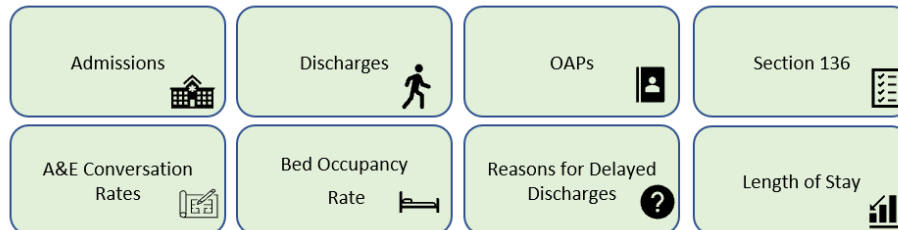
Specific discharge targets were set for each Division, with a vision to have zero reportable OAPs during the perfect week and an attempt to repatriate OAPs wherever possible depending on bed capacity. The baseline period for setting a weekly discharge target was February- April 2021, taking into account the average weekly CCG Admissions for each locality (including OAPs) and adding 5% on top (introducing a stretch target) for each Division to cater for optimal flow:

Division	Bed Base	Average Weekly Discharges (Feb-Apr 21)	% of baseline discharges on bed base	Weekly Discharge Target based on Feb-Apr 21 CCG Admissions
Bolton	48	12.42	25.9%	13
Salford	67	12.5	18.7%	16
North Manchester	59	10.3	17.5%	11
Central Manchester	67	8.1	12.1%	12
South Manchester	39	6.92	17.8%	8
Trafford	49	6.13	12.5%	8
Wigan	48	11.26	23.5%	16

Although Central Manchester did not have a specific bed base leading to the Perfect Week, it was agreed in consultation with the Heads of Operations to split Park House wards to North and Central Manchester. The

above targets for North and Central Manchester were calculated on bed base. Following completion of their Perfect Week, discharge targets were re-set based on admissions by GP postcode.

During the Perfect Week Divisions were monitoring the following key metrics relating to Patient Flow:



During the planning events, colleagues were invited to think about the perfect ‘Gold Standard’ patient experience that provides maximum patient support and significantly enhances patient flow and identify key change that could make a difference. Under four working groups (first contact, admission to inpatient ward, inpatient care episode and discharge pathway) a total of 42 changes ideas were generated across all Divisions. Most of the ideas were tested during the Perfect Week following a Plan-So-Study-Act cycle approach and certain ideas requiring longer term planning were saved for consideration in the future. Key themes from the change ideas were:

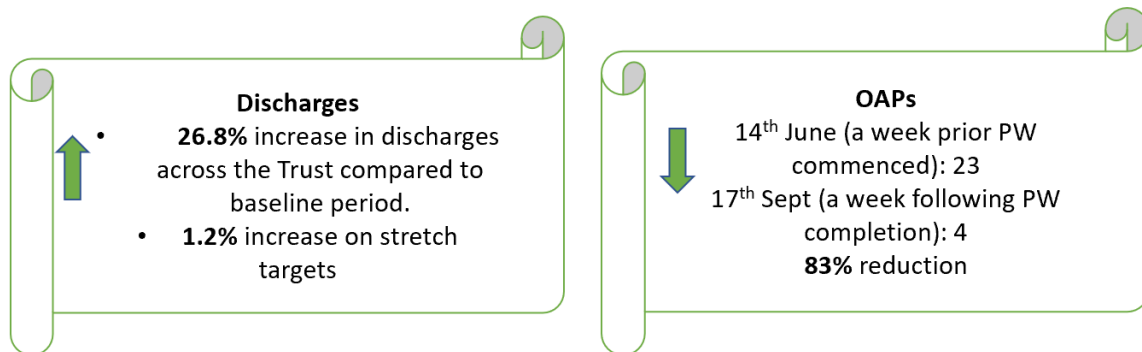
Implement a Discharge Countdown Tool to support discharge processes via a red and green approach
Consistency in recording the purpose of admission and handover to the wards
Patient engagement in Care Planning from the beginning of admission and document to be forwarded at 1 <sup>st</sup> MDT
MDT Review within 48 hours of admission with care coordinator and carer involvement
Criteria Led Discharges – supporting non Consultant led discharges at weekends
Improved function of the Board Round and establishing these

In order to replicate the benefits of escalation procedures through the Bronze, Silver, Gold Meetings, an Escalation Process Flowchart was created to be tested by Divisions following the completion of the Perfect Week. The purpose of the flowchart is to provide a structure escalation process to ensure that any barriers are addressed promptly, avoiding unnecessary delays.

Following the completion of Perfect Week events, a ‘Change Package’ based on the key themes has been developed and will be introduced to all Divisions for monitoring and implementation via weekly Sustainment meetings. Furthermore, as part of the Care Process Excellence Workstream, key change ideas are incorporated in the Admission, Treatment and Discharge Standards following consultation with front line staff, clinicians and senior leaders.

## Results

Following the completion of all the 'Perfect Week' events, the responsibility for patient flow is now allocated to the Divisions, allowing the Patient Flow Service to plan more proactively. There is a greater focus on determining value adding actions such as utilising the Discharge Countdown Tool to improve the knowledge of patient barriers. The 'Daily/Weekly Operating Report' measures the variance in discharge performance of all Divisions against the agreed target with the goal of creating capacity. A bi-weekly meeting with the Heads of Operations chaired by Associate Directors allow for effective follow up on the rationale behind variances and support is offered where needed.



The table below demonstrates performance against the baseline and discharge targets for each Division:

Division	Bed Base	Base: Avg Weekly Discharges (Feb-Apr 21)	Weekly Discharge Target	Actual Perfect Week Discharges	Perfect Week performance % against the base	Perfect Week performance % against target	% of Perfect Week discharges based on bed base
Bolton	48	12.46	13	12	-3.7% ↓	-7.7% ↓	25% ↓
Salford	67	12.5	16	18	44% ↑	12.5% ↑	26.9% ↑
North Manchester	59	10.3	11	13	26.2% ↑	18.2% ↑	22% ↑
Central Manchester	67	8.1	12	13	60.5% ↑	8.4% ↑	19.4% ↑
Wigan	48	11.26	16	15	33.2% ↑	-6.3% ↓	31.3% ↑
South Manchester	39	6.29	8	11	74.9% ↑	37.5% ↑	28.2% ↑
Trafford	48	6.13	8	3	-51.1% ↓	-62.5% ↓	6.3% ↓

Improvements were also noted on A&E conversion rates during the Perfect Week compared to the week before, highlighting that joint working during the Perfect Week facilitated identifying least restrictive alternatives to admission:

Division	Perfect Week Referrals from A&E	Perfect Week Admissions via A&E	Perfect Week A&E Conversion Rate	Week prior PW A&E Conversion Rate	Performance Comparison for A&E Conversion Rates
Bolton	84	7	8.33%	9.61%	1.28% ↓
Salford	90	7	7.77%	11.34%	3.57% ↓

North Manchester	30	1	3.33%	15.24%	11.92% ↓
Central Manchester	51	6	10.91%	13%	2.09% ↓
Wigan	46	1	2.17%	5.1%	2.93% ↓
South Manchester & Trafford <sup>1</sup>	73	4	5.5%	7.05%	1.55% ↓

In regards to Length of Stay (Discharged) a comparison is made between the baseline period (Feb-Apr 21) and the last three months (Jun-Aug 21). Although the data below mainly suggest a decrease in Length of Stay, it is expected that for the next few months, monthly averages will increase as a result of discharging patients with extensive Length of Stay:

Division	LoS Discharged baseline period (Feb-Apr 21)	LoS Discharged last 3 months (Jun-Aug 21)	Performance Comparison
Bolton	26.6	24.7	7.14% ↓
Salford	31.35	31.03	1.02% ↓
North Manchester	56.06	43.36	22.65% ↓
Central Manchester	59.19	56.73	4.15% ↓
Wigan	25.32	27.42	-8.29% ↑
South Manchester	59.9	36.4	39.23% ↓
Trafford	58.5	47.1	19.48% ↓

Key achievements for each Division are outlined below:

<p><b>BOLTON</b></p> <ul style="list-style-type: none"> <li>• DTOC patient with 263 LoS has placement agreed by the CCG via the Gold Escalation.</li> <li>• DTOC patient transferred to Rehab 2 weeks earlier following Gold Escalation.</li> </ul>	<p><b>SALFORD</b></p> <ul style="list-style-type: none"> <li>• Long LoS PICU patients identified for transfer, two over 600 days.</li> <li>• Patient directly moved to nursing home avoiding inpatient admission.</li> </ul>	<p><b>NORTH &amp; CENTRAL MANCHESTER</b></p> <p>Discharged 6 patients with a total combined LoS 1700 (4.7 years) and average 282 days each.</p>
<p><b>WIGAN</b></p> <ul style="list-style-type: none"> <li>• 15 discharges with a total LoS of 546</li> <li>• OAPs remained at 0 during the week despite admissions typically being 32% more than discharges.</li> </ul>	<p><b>TRAFFORD</b></p> <p>2 Manchester patients with combined LoS of 431 seen outside of panel by the CCG via escalation procedures.</p>	<p><b>SOUTH MANCHESTER</b></p> <ul style="list-style-type: none"> <li>• 863 (2.4 years) LoS patient discharged</li> <li>• 38% patient flow on Blake Ward (PICU) during the week.</li> </ul>

### Key Learnings

The Perfect Week was an excellent opportunity to strengthen system wide collaboration and highlighted that every minute of a patient’s journey from point of admission should add value towards a safe and timely discharge. It also emphasised the requirement for shared responsibility regarding patient flow and the importance of understanding admission pressures and increased focus on finding the least restrictive alternatives to admission. Furthermore, the Trust has developed a Perfect Week formula for sustaining and delivering patient flow going forwards. Divisions reflected on their Perfect Week and key learnings are summarised below:

Criteria led discharges are proving effective in freeing up consultant time and progressing discharges notably at weekends	Multiple processes can run in parallel rather than consecutively and rapid escalation of barriers can provide timely resolution.	Effective MDT working and improved alignment on decision making process between MDT and consultants can assist with patient flow.
Input from wider system partners such as commissioners, social workers, housing colleagues, is invaluable and can speed up safe discharge processes.	Resolution of staffing issues especially in the community and availability of Care Coordinators is paramount for good patient flow.	Improved Board Round function with all the right people in attendance can contribute to timely review and escalation of barriers to discharge.
Good teamwork at divisional level can assist with goal setting, shifting paradigms and can achieve meaningful change.	Consultant buy-in and involvement in improving patient flow is key in sustaining positive change.	Effective flow supports PICU wards to step down patients, enabling operation within bed capacity and making the service more responsive

### Patient, Staff and Carer Feedback

Divisions were asked to gather feedback from patient, carer and staff perspective on the Perfect Week. Below are some quotes taken from the Patient Service User Feedback Surveys, but also from direct conversations with our patients and carers:

<p style="text-align: center;"><b>Service User Feedback</b></p> <p style="text-align: center;">“It has been a great experience on the ward”.</p> <p>“Overall been good, should be a way for staff to have extra time during the day to help patients i.e. go to the shop. Staff always busy taking physical observations”.</p> <p>“I am overjoyed at moving to a nursing home this week; I have been waiting a long time and I am extremely frustrated that it was all due to funding.”</p> <p style="text-align: center;">“Felt groups on ward are very good”.</p>	<p style="text-align: center;"><b>Carer Feedback</b></p> <p>“Thank you very much for taking the time to update me, no one has done this before after a ward round it really means a lot”.</p> <p>“I have been given the opportunity to attend ward round next week which is very good”.</p> <p>“When you have a family member in hospital it’s always nice to be updated on how they are”.</p> <p style="text-align: center;">“I feel more involved in discharge planning”.</p>
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GMMH staff found the overall experience very productive and rewarding; teamwork, collaboration with external partners, overcoming barriers and working on solutions were some of the key highlights. Some staff also voiced their confusion about what was expected of them prior to the Perfect Week events and the need for more time to plan ahead.

#### Staff Feedback

"Marvellous what we've been able to achieve together. The combination of looking at how we support those presenting in A&E and those requiring discharge has been a right treat. All involved have been positive, pragmatic, and engaged. It's been a really positive experience."

"It was refreshing to see so many teams work together to formulate a plan that upheld the values of being least-restrictive and person-centred".

"Would I do it again? Yes. It works really well".

"We've really needed it. We've had patients stuck here for weeks and weeks and weeks. Now, we only have acute patients."

"Excellent opportunity to instigate change ideas. Brilliant way of involving all the staff. Would do more planning the week before".

"Thank you to everyone it's been teamwork! I have done these perfect events before and this one was definitely well organised and structured!".

"The Perfect Week moves things along more quickly which is beneficial to the patients/service users experience of health services"

"Staff have found it so fruitful to be supported, it's in our gift to make it happen. Now we need to continue to escalate quickly."

Positive feedback was also received from our wider partners:

#### Wider Partners Feedback

"There has been some amazing work this week!"

"Absolutely wonderful- well done to you all!"

"Thank you, some really fantastic achievements this week! Looking at this from the outside, I must say staff have been relentlessly focused on trying to move people on. Well done to all!"

## Sustainability

Sustaining the changes implemented during the Perfect Week events has been a key priority from the beginning of this programme and one of the biggest challenges. Sustaining positive outcomes from the Perfect Week will also be supported from work undertaken through the other HPP Workstreams. Following the NHS Sustainability Model, work around the 10 factors relating to process, staff and organisational issues is under continuous development. A consultation session with Trust Innovation Group from Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust, an exemplar leader in QI in Mental Health, supported the use of the NHS Sustainability Model in order to sustain and spread positive changes.

The Sustainability Model, suggests closely working with the following 10 factors in order to sustain change:



It is acknowledged that Divisions need to continue testing and adapting key change ideas according to their needs, whilst monitoring performance against the outlined targets and supported by weekly sustainment meetings.

A 'Perfect Week' Change Package is being developed following the Perfect Week events. Most importantly, continuous work on demonstrating the benefits of managing Patient Flow following improved ways of working is a priority to ensure engagement and commitment from our senior leaders, consultants and frontline staff.

Business Intelligence and IM&T are closely collaborating with the Healthier Patient Pathways Group in order to assist with innovative reporting and recording mechanisms. Furthermore, discharge targets for each Division will be reviewed in quarterly basis, in order to reflect CCG demands for inpatient admissions, and at the same time the aim still remains to have zero reportable OAPs and Length of Stay below the 32 national average.

## Summary

The Perfect Week provided an opportunity to trial new ideas and also learn about the challenges that affect patient flow. It also demonstrated how bringing people together and engaging with the wider system can achieve great things.

An overall increase of 26.8% on discharges against the baseline period and an 83% reduction on reportable OAPs was achieved across the Trust. Sustainability is key in maintaining positive changes on patient flow and Divisions are closely collaborating with the Healthier Patient Pathways Group, Business Intelligence and IM&T in order to provide a robust framework for continuation of successful outcomes.

The GMMH COVID Recovery Board are asked to note the outcome of this very successful project, and support, where required the next steps, associated with sustaining the gains from the GMMH Perfect Week and outcomes and potential development of further 'mini perfect events' that help to sustain patient flow, excellence in care and support and further the Trust's improvement.



## 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.

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