Transformation of Critical Care Services at UHNPM

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Overview

• Background
• Drivers for Change
• Formation of Programme
• Transformation Workstreams
• Key Performance Improvements
• What next?
UHNMM NHS Trust

Royal Stoke University Hospital

County Hospital
Critical Care Services

- County – 4 x L2 beds
- RSUH – General
- 36 beds – dep 30
- MTC
- Admissions circa 1,400
- > 95% emergency
- >60% ventilated
Background

• Rapid expansion of services - MTC
• Merger with Stafford Hospital – November 2014
• Peer review by CCN – February 2015
• EPAS – March 2015
• CQC – April 2015
Drivers for Change

• CQC report – April 2015
• ICNARC – 95% Emergency admissions
• Up to 38 patients per month in PACU
• Outreach withdrawn 50% of time
• Poor staff retention with a 26% vacancy factor
• Senior team all new to post
How did we do it?

- Recognised need for radical change
- Core board identified → TPG
- Discussions around main areas for development
- Senior support at executive level - COO
Formation of Programme

• Vision
• Full review of structure – to include physical facilities & staffing
• Review of patient pathways
• Activity of service to include disease management & prevention
Formation of Programme

• Operational delivery networks – CCDG & CCSD
• Resilience planning – review of operational policy
• Review of outstanding CQC reports UHB.
Transformation workstreams

1. **Critical Care Without Walls**
   Review of all services that have interaction with critically ill patients external to the unit.

2. **Building Critical Care**
   Comprehensive review of care provided to critically ill adults, in all areas, inclusive of process and equipment.
Transformation workstreams

3. To a Better Recovery
   Implementation of a robust rehabilitation strategy commencing in critical care & beyond.

4. Patient Data Management System (PDMS)
   To assist in the provision of focussed quality care, improved safety & live data capture.
Methods Utilised

• Gap analysis
• Process mapping
• Review of similar services
• Networking – BRI
• Patient forum
• LIA events
Business Cases

• £1.5 million investment into Critical Care services at UHN

• 2 x successful business cases realised:
  Rehabilitation - funded service from critical care & beyond
  PDMS – to support quality & live data capture.
Key Performance Improvements

• Additional beds commissioned – providing ability to flex bed base to accommodate fluctuating dependencies.
• 50% improvement in cancelled ops data.
• LOS efficiencies without need to create extra capacity.
• Reduced LOS for unit survivors >10 days ↓8.3
Key Performance Improvements

- Increase in admissions from 817 in 2014/2015 to 1,385 in 2016/2017 - ↑25%
- Outreach active >95% of time
- < 5 patients in PACU per month
- Robust recruitment & retention plans – vacancy factor ↓ 4%
- Access to 7 day physio, plus additional OT, dietetics, SALT & psychological support.
What Next?

• Embed performance – KPI’s monitored by division
• Undertaking capacity review
• Strengthen relationships
• Gains – LOS - rehabilitation
• Utilisation of PDMS
• Adopt a ‘just culture’
• Transformation of SSCU services
Thank you
Thank you for listening
Any Questions