# Influence of Patient Flow on Quality Care







# What does this mean?

The aim of MUH is to get the right patient into the right bed for the right care. The numbers of patients waiting on a trolley for an inpatient bed is affected by the number of patients who are ready to be discharged to home with support or to a non-acute bed e.g. a nursing home or district hospital.

If a patient represents to MUH in an unplanned unexpected fashion within 30 days a review of the reasons will take place. MUH's aim is to prevent all avoidable re-admissions.

Please Note: Bed Days Lost as a result of delayed discharges was adversely affected as a result of the knock-on effects of Storm Emma in March.

## **Updated November 2018**

# Influence of Patient Flow on Quality Care





### Number of Patients Cancelled by Hospital due to bed availability



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## What does this mean?

Early Discharges before 11 am means we can allocate beds to those waiting overnight.

Weekend Discharges help with Patient Flow on Monday and prevent Electives being cancelled.

Please note: The majority of hospital cancellations in March were due to Storm Emma.

### **Reducing Clostridium Difficile infections in Mayo University**

Hospital Updated November 2018





## MUH Commitment to Quality Care through Hand Hygiene and Environmental





### What does this mean?

- Appropriate Antibiotic Prescribing -
  - Pharmacists regularly audit use of antibiotics to ensure if the antibiotic is necessary, the correct type of antibiotic by the correct route ( IV or Oral ) for the correct duration.
  - Benefits include reduction of C.diff rates and line infections, reduced length of stay and Cost savings
- Effective prevention and control of Healthcare-associated Infections HCAI requires a multi-targeted approach .

Some ways of reducing Healthcare Infections include:

- Effective hand hygiene Education and audit of all staff
  - 100% of Doctors including ALL Consultants have undertaken Hand Hygiene training in the past 2 years as required
  - Aim to have compliance of at least 90 % on Audit
- Clean environment -
  - Audit of all clinical areas identifies shortcomings and actions are taken to rectify deficiencies
  - Aim to have compliance of at least 85%

### Improving Medication Related Communications in Mayo University Hospital (Updated November 2018)

Knowing My Medicines is a list of all medicines including supplements, herbal remedies, eye/ ear drops, inhalers, injections, nebulisers, oxygen, creems and patches you take or apply and some of their details. Please fill in the Knowing My Medicines information	IMPORTANT To fill out Knowing My Medicines you need all your medicines in front of you	Information for patients and families Knowing My Medicines	Mry DetAils       Name:     My Family Doctor:     My Pharmacy is:       Date of Birth:     My Family Doctor     My Pharmacy Phone No.:       Next of Kin:     Phone No.:     Phone No.:				
inside this leaflet.	including prescribed, non-prescribed and over the counter medicines.	Ficultures	The medicine I am allergic / sensitive to an	nd how I react: Other allergies / sensitiv	vities and how I react:	Chronic(long term) H	ealth Conditions: Date I filled out this form:
This is your record of your medicines. Please keep this docurrent safe and bring it with you when corning to Mayo University Hospital or attending any health- care appointment. If you become ill, you or a family member/carer can bring this record to hospital or to your family doctor.	If you don't know what medicines you take or you need help.filing out Knowing My Medicines ask your retail pharmacist who can give you an up to date list. Your doctor, friend or relative can be asked to help also.		Name of Medicine and strength	Why I take it		dicine I take and when I take it Ig afternoon   evening   night	Additional Information
Please keep your medicines in their original container, because: • the labels contain important information	Take your medicines exactly as directed by your doctor or as instructed on the label. This is important for them to work properly.		e.g. Nome of tablet 25mg	e.g. for my heart	e.g. Yes/No 1	0 0 1	<b>8.5</b> nærding, inderspel, indersoel kins, decresseldens, stagsel
<ul> <li>we will need to be able to identify them</li> <li>they may deteriorate if unpacked</li> </ul>	If you experience any side-effects which you think maybe caused by your medication,						
Keep all your medications at room temperature, except those that need to be kept in the fridge.	please tell your doctor or pharmacist.	NING MY MEDIC					
Keep all medications safely LOCKED away where CHILDREN cannot reach them your medications could HARM them, if accidentally taken.	U KINA						

A random audit to ensure compliance with the Knowing My Medicines Quality Initiative took place on the four main medical floors A, B, C and Elderly Medicine in the month of October. The audit was undertaken 3 months after the project was introduced to the medical floor.

The audit comprised of ten patients from each medical ward - a total of 40 participants from mixed gender and age profile

72% of patients replied that they did receive the Knowing my Medicines Information Leaflet.

Of the 29 patients that answered 'Yes' the question was then asked: 'Did a healthcare professional explain the leaflet to you'?

83% replied Yes to this question; 10% No and 7% Can't remember.

Of the 29 patients that answered 'Yes' to the above question 72% think the leaflet will help them manage and understand their medicines better'. 14 % said No and 14% indicated that they don't know. The Medication Safety Committee are working with the Patient Experience Advisors on how best to roll out awareness with regard to this initiative in the community.

Mayo University Hospital want our patients and staff to improve communication about medications.

Quality Improvement in Falls Prevention and The Management of Fallen Patients- updated November 2018





## Radiology Department Quality Improvement Initiative Updated November 2018

**Radiology Wait Times** 30.0 25.0 **Months Waiting** 20.0 CT TAP 15.0 CT Brain 10.0 •US 5.0 MRI 0.0 Jan 17 Mar 17 Apr 17 May 17 Jul 17 Aug 17 Sep 17 Oct 17 Nov 17 Dec 17 Jan 18 Feb 18 Mar 18 Apr 18 May 18 Jun 18 Jul 18 Aug 18 Sep 18 Oct 18 Vov 18 Dec 18 Feb 17 Jun 17

## What does this mean?

Targeted CT & MRI lists on the longest waiting patients have realised some significant reductions in longest wait times in recent months.

It is planned to continue these targeted lists throughout 2018 in order to further reduce the longest wait times.