



<b>SUMMARY REPORT</b>	<b>Meeting Date:</b>	<b>31 March 2016</b>
	<b>Agenda Item:</b>	<b>8.1</b>
	<b>Enclosure Number:</b>	<b>5c</b>

<b>Meeting:</b>	Trust Board		
<b>Title:</b>	Ludlow Hospital In Patient Ward - Monitoring of Impact of Change		
<b>Author:</b>	Andy Matthews, Divisional Manager Community Hospitals & Outpatients		
<b>Accountable Director:</b>	Steve Gregory, Director of Nursing & Operations		
<b>Other meetings presented to or previously agreed at:</b>	<b>Committee</b>	<b>Date Reviewed</b>	<b>Key Points/Recommendation from that Committee</b>
	Adults SDG Quality and Safety Meeting	11 Feb 2016	None
	Quality and Safety Committee	24 March 2016	

Purpose of the report				
To update the Trust Board on the impact of the change that occurred on the 31 <sup>st</sup> July 2015 at Ludlow Community Hospital when all In Patient beds were transferred to one area.			<b>Consider for Action</b>	✓
			<b>Approval</b>	
			<b>Assurance</b>	✓
			<b>Information</b>	✓
Strategic goals this report relates to:				
<b>To deliver high quality care</b>	<b>To support people to live independently at home</b>	<b>To deliver integrated care</b>	<b>To develop sustainable community services</b>	
✓	✓	✓	✓	
Summary of key points in report				
<ol style="list-style-type: none"> <li>1. Positive feedback received from both patients and staff.</li> <li>2. Incidents in the 6 months after the transfer are lower than the number of incidents prior to the transfer.</li> <li>3. No access issues for patients to be admitted in to the beds with 78% of the patients allocated a bed on the same day as the request.</li> <li>4. Length of stay at Ludlow currently under the combined average length of stay for all the community hospitals.</li> <li>5. Medication incidents generally decreasing.</li> </ol>				
Key Recommendations				
<ol style="list-style-type: none"> <li>1. To continue to monitor the In Patient ward from a patient and ward staff perspective.</li> </ol>				

Is this report relevant to compliance with any key standards? YES OR NO		State specific standard or BAF risk
CQC	YES	Regulations 9,10,12,13,14,18
IG Governance Toolkit		
Board Assurance Framework	YES	991 Quality
Impacts and Implications?	YES or NO	If yes, what impact or implication
Patient safety & experience	YES	Improvement of patient care and experience
Financial (revenue & capital)		
OD/Workforce	YES	Staff satisfaction and retention. Reduction in agency usage.
Legal		

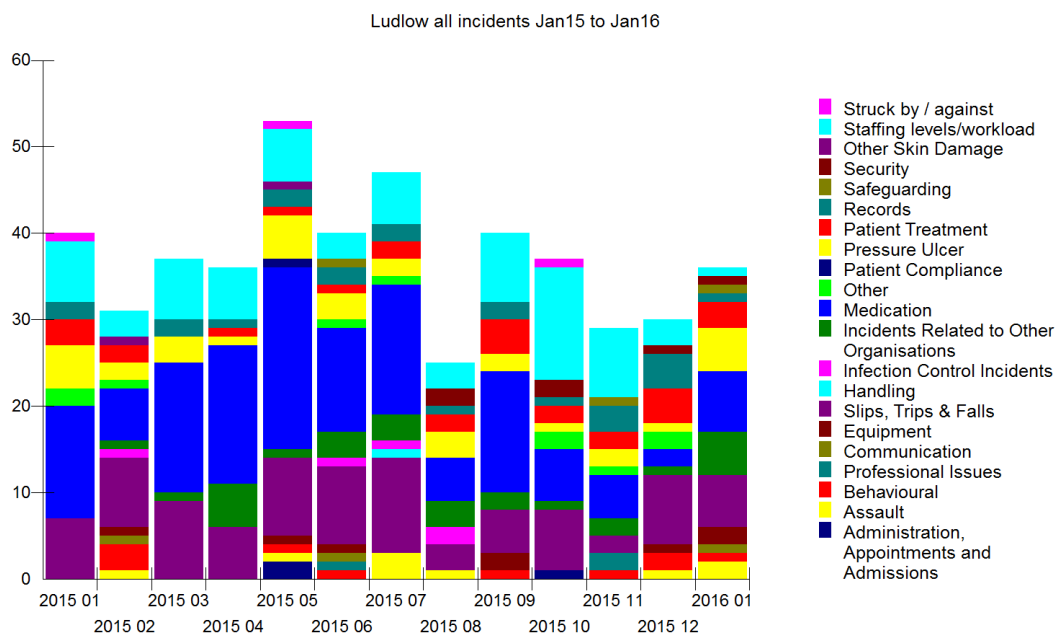
## Ludlow Hospital In Patient Ward - Monitoring of Impact of Change Following the Transfer of All In Patient Beds in To One Area

### 1. Introduction

- 1.1 On 31<sup>st</sup> July 2015 the 24 In Patient beds at Ludlow Community Hospital were transferred to one area on to the ground floor adjacent to the existing Dinham Ward.
- 1.2 The decision was made to improve the quality and safety of patient care by reducing the high number of agency registered nurses used to plug the vacancy gap in the nursing workforce. This initiative was to allow staff to work together to better support the patients and each other more effectively and safely.
- 1.3 A paper was produced in September 2015 to the Quality and Safety Committee which showed that 5 weeks since the transfer there were no negative impacts as a result of the transfer. It appeared from the evidence produced that there had been less incidents, no omitted medications and no patient complaints. The staff and patients also commented on the benefits of being in one area.
- 1.3 This follow up paper will inform the Trust Board of the impact of the change from a patient and staff perspective 6 months following the transfer.

### 2. Incidents

- 2.1 The incidents at Ludlow Hospital in patient ward from January 2015 to January 2016.



- 2.2 Incident Analysis indicates that monthly variations are to be expected, dependent on patient profile. The total of incidents for the 6 months from February to July (before the move) is 244 compared with 197 for the 6 months August 15 to January 16 (after

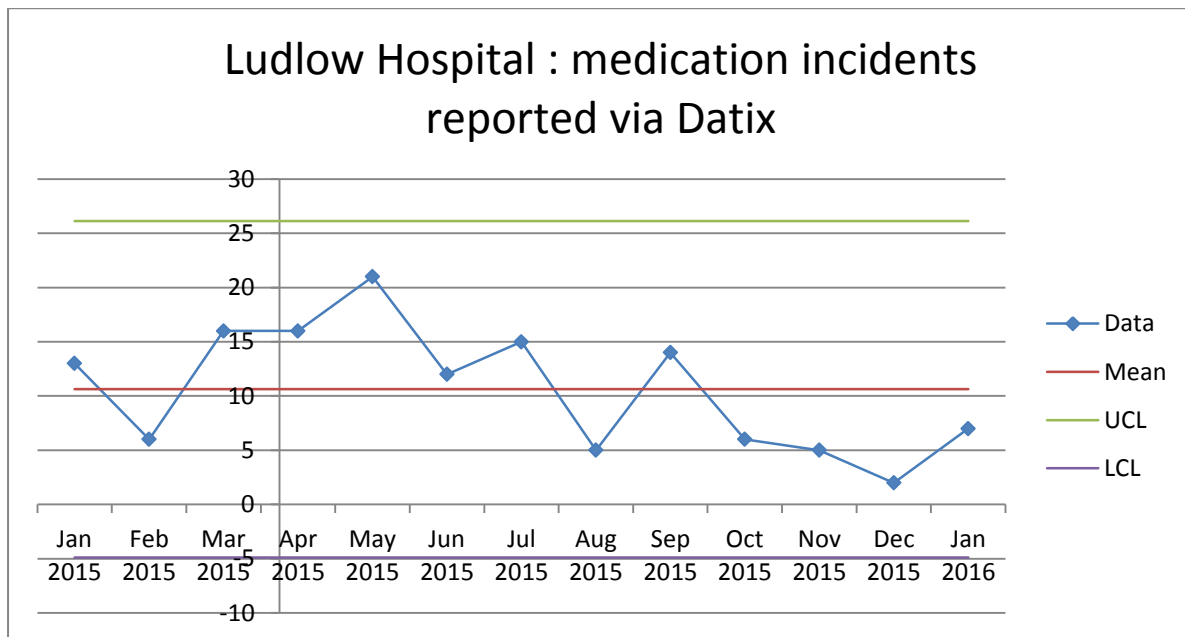
the move) this is a reduction of 20%. If this reduction is sustained it may indicate that the move has had an impact on the number of incidents.

### 3. Patient Access To Beds

- 3.1 All the beds for the community hospitals are booked via the capacity hub. This includes patients transferring from other hospitals e.g. Royal Shrewsbury, Princess Royal, Hereford, Worcester, Powys and patients admitted from home via GP referral to the Care Co-ordination centre.
- 3.2 The evidence from the capacity hub indicates that a majority of beds are allocated the same day as the request is received. From the end of July to the end of January out of 180 admissions 140 were allocated the same day, 26 the following day and 14 the day after. The capacity hub supervisor has commented that there has been a perceived increase in the turnover of beds.
- 3.3 The latest length of stay figures available at Ludlow Hospital are for December 2016 and this was 17.3 days. The average for the four community hospitals in December was 19.5 days.

### 4. Medicines Management

- 4.1 Reported medicines incidents in general are decreasing over time.



## **5. Staff Welfare**

- 5.1 Reports have been received that staff have appeared happier, as staffing levels have improved and reliance on bank / agency has greatly reduced. The staff have settled in to working in one clinical area. Regular monthly ward meetings are in place for staff to support staff on the ward. The Community Hospital Staff Forum is to be launched on the 22<sup>nd</sup> February 2016 which will take on a solution focused approach for community hospital staff to enable them to make changes for the better to work life in the community hospitals.

## **6. Patient Feedback**

- 6.1 From July 2015 to January 2016 Ludlow Inpatients survey FFT scores were as follows: 44 extremely likely, 22 likely and 1 neither

No one said unlikely or extremely unlikely to recommend

Examples of comments from the Inpatient Survey over that period included :

- Pleasant atmosphere and generally caring attitude
- Staff were very good
- All request anticipated before asking
- Care and treatment was explained in a very clear way
- All staff were brilliant
- Ward very noisy at times

- 6.2 A Sit & See observation was undertaken in Quarter 3 (October) at Ludlow Hospital with a 97% positive score and 3% passive

Comments included the following:

- Patients complimented nurses
- All nurses were interested in what patients had to say and doctor remembered the detail of the patients family and very concerned about care at home afterwards
- Only negative was the doctor and nurse did refer to a patient as 'she' in front of her.

## **7. Patient Complaints, PALS and Compliments**

- 7.1 There have been two complaints for the period January 15 to January 16, one before and one after the move, For the same period 8 PALS enquiries were received, 5 before the move and 3 after. From this we conclude that the move has had no impact on Complaints and PALS numbers. Compliments have been steady throughout 2015.

## **8. Use of Agency Staff**

- 8.1 The use of agency staff has dramatically reduced since the ward transferred to one clinical area. In June 2015 134 Registered Nurse Agency shifts were used and in July 115 Registered Nurse Agency shifts were used. In the 6 month period after the move only 72 Registered Agency Nurse shifts have been required.

## **9. Key Actions**

9.1 To continue to monitor the In Patient ward from a patient and ward staff perspective.

## **10. Conclusion**

- Positive feedback received from both patients and staff.
- Incidents in the 6 months after the transfer are lower than the number of incidents prior to the transfer.
- No access issues for patients to be admitted in to the beds with 78% of the patients allocated a bed on the same day as the request.
- Length of stay at Ludlow currently under the combined average length of stay for all the community hospitals.
- Medication incidents generally decreasing.

## **11. Recommendations**

Note the actions taken to date and the actions planned.