

# Priority: Implementation of the weekly long length of stay patient reviews as set out in 'reducing long length of stays'

## Northern Lincolnshire and Goole NHS Foundation Trust

**What were you aiming to achieve/what was the problem you were trying to solve/what was your goal? To reduce the number of patients with length of stay of 21 days or more by 25% in line with the national target.**

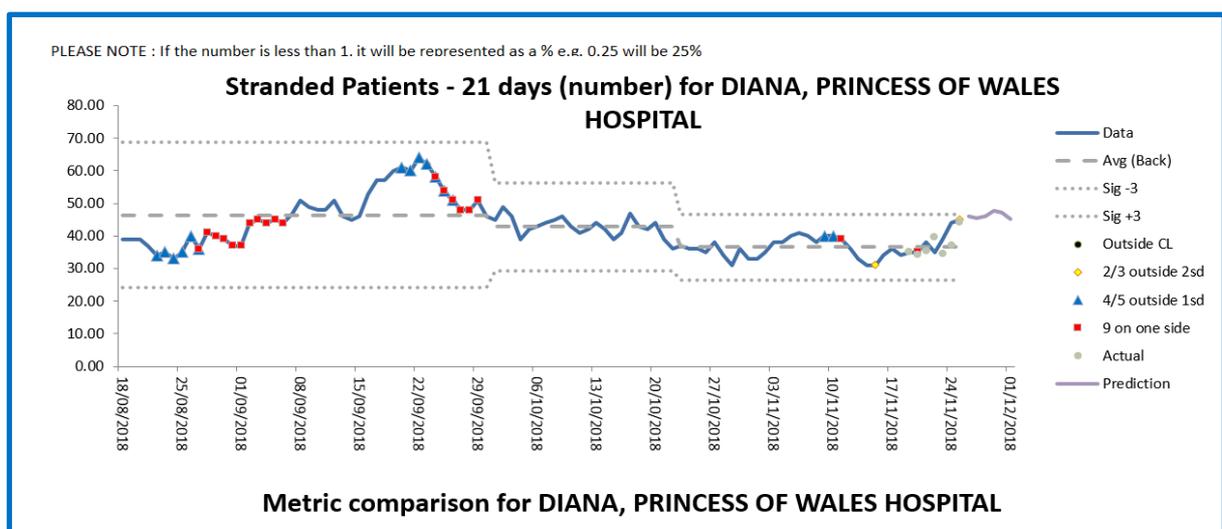
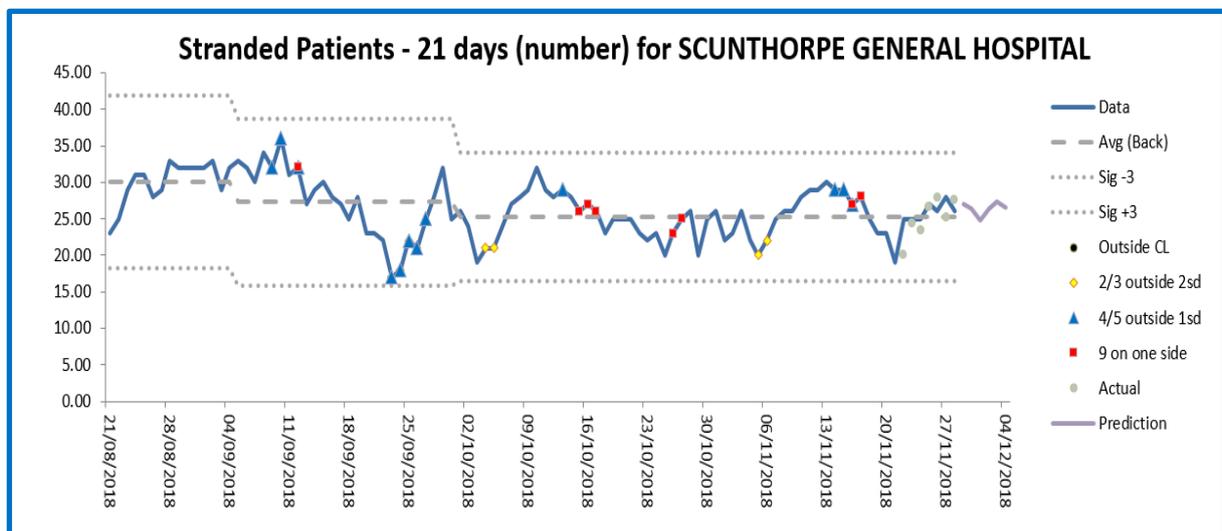
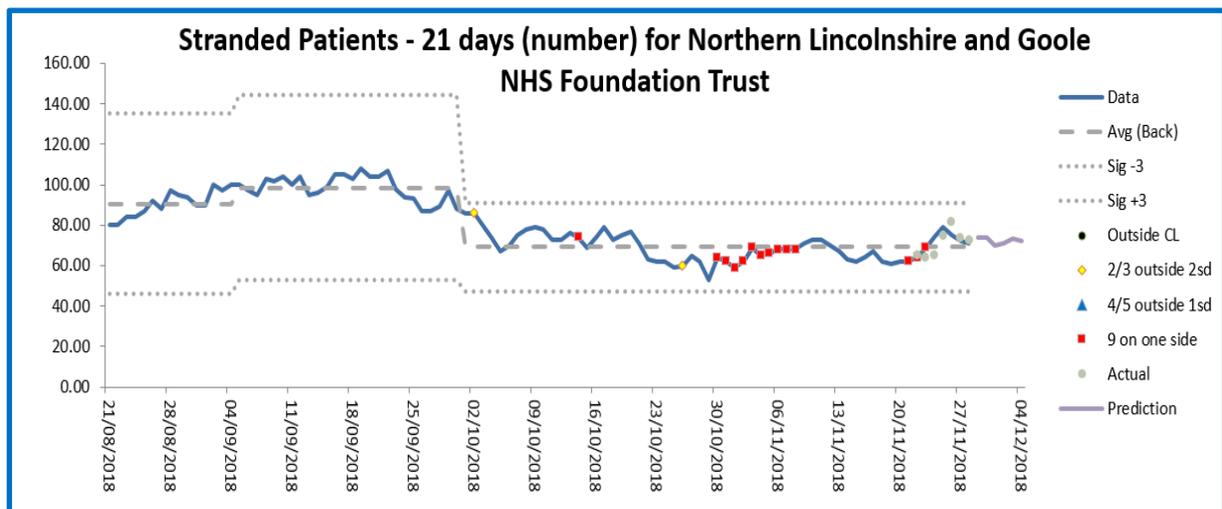
### **What was the solution/what interventions took place?**

- Weekly review of patients with a length of stay of 21 days or more by a roving team. This process was started on 5th September 2018.
- The team consisted of: deputy Chief Operating Officer, senior site operations person, chief community nurse, discharge team nurse, matrons/head of nursing, lead therapist, social care manager. The reviews were carried out on each ward which had patients with a length of stay of 21 days or longer.
- Actions were often carried out in real time or were written up and distributed within two hours of the review.
- The deputy medical director is joining the weekly reviews to enable conversations with medical staff, and there is a weekly escalation meeting with the COO/Medical Director and Chief Executive.
- Training and support given by ECIST/NHSI.

### **Describe the measured results/ What was the impact on your aim or goal?**

- The number of patients with a length of stay of 21 days or more has reduced by circa 34 patients since the start of the change in September 2018 and has been hovering around about the trajectory set of 61 patients 6 weeks ahead of the December ambition. The trust is working towards consistently meeting the target by December 2018.
- The team could review more patients after several weeks than they could at the beginning as they got faster at doing this.
- After several weeks the ward staff were expecting the roving team at the same time each week, had prepared for them coming and valued the support from the team.

**Supporting data example:**



NB there was a change to the way these numbers were reported on the 3.10.18

**What were the learning points? What worked well/less well and why? What else did you observe? Were there any unintended consequences**

- Consistent use of same questions to ask worked well as it allowed the ward to prepare.
- Set time each week was helpful as the ward staff knew when to expect the team.
- Carrying out actions in real time and being clear who was taking the action.
- Access to all computer systems helped to myth bust regarding what specific patients were waiting for.
- The impact of this approach has been greater at the Diana Princess of Wales site compared to the Scunthorpe General Hospital. The trust are working to understand why this is and how this can be addressed.
- The original time of 3pm was too late and the time was brought forward so that actions could be carried out on the same day.

**Find out more**

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