Improving Patient Flow in Scotland

31 October 2014
Stirling Court Hotel

Good patient flow supports optimal care for patients’ needs and contributes to safe, person-centred and effective care. It also eliminates or reduces inefficiencies.

Significant work is being progressed across Scotland to improve patient flow. This national conference will bring together colleagues from across Scotland to share and develop the knowledge and skills needed to improve patient flow.

The day will provide an opportunity to share best practice including presentations and posters from across Scotland.

Scan the above code or click on the below link to visit our programme website. Whole System Patient Flow website

#PatientFlow14

<table>
<thead>
<tr>
<th>Time</th>
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| 0900-0930 | Registration and Refreshments  
An opportunity for delegates to view the Posters Exhibition | Martin Hopkins  
Programme Director, Whole System Patient Flow Improvement Programme (WSPFIP)  
Paul Gray  
Director-General Health and Social Care and Chief Executive NHSScotland |
| 0930–0955 | Welcome and Introduction  
- Setting the context for NHSScotland  
- Whole System Patient Flow Improvement Programme overview | Martin Hopkins  
Programme Director, Whole System Patient Flow Improvement Programme (WSPFIP)  
Paul Gray  
Director-General Health and Social Care and Chief Executive NHSScotland |
| 0955-1015 | Being the Best You Can Be | Jack Black  
MindStore |
| 1015-1055 | Improving the Quality of Care through Effective Patient Flow | Professor Derek Bell  
Faculty of Medicine, Department of Medicine, Imperial College London and President, Royal College of Physicians of Edinburgh |
| 1055-1115 | Refreshments  
An opportunity for delegates to view the Posters Exhibition | Paul Gray  
Director-General Health and Social Care and Chief Executive NHSScotland |
| 1115-1120 | Celebrate Improvement  
- Recognition of colleagues who displayed a poster  
- Announcing 1st, 2nd and 3rd poster prizes | Paul Gray  
Director-General Health and Social Care and Chief Executive NHSScotland |
| 1120-1205 | How to Achieve Timely Access to Care, High Quality of Care and Safe Nurse Staffing While Reducing Health Care Cost | Eugene Litvak, Ph.D.  
President and CEO, Institute for Healthcare Optimization (IHO) |
| 1205-1305 | Breakout Sessions  
Delegates will attend one of the breakout sessions (details on the next page) | |
| 1305-1405 | Lunch  
An opportunity for delegates to view the Posters Exhibition | |
| 1405-1505 | Breakout Sessions  
Delegates will attend one of the breakout sessions (details on the next page) | |
| 1505-1525 | Refreshments  
An opportunity for delegates to view the Posters Exhibition | |
| 1525-1625 | Being the Best You Can Be | Jack Black  
MindStore |
| 1625-1630 | Closing remarks | Martin Hopkins  
Programme Director, WSPFIP |

A - Patient Turnaway - What Is It and How Do We Reduce It?

**Session Summary**
Patient turnaway occurs when patients cannot move to the most appropriate unit in a clinically appropriate time. This manifests as queuing (ED crowding) and diversion. In-patient diversion has many synonyms, but in Scotland it is known most frequently as boarding. The Scottish Government and NHSScotland have been working together for the past five years to understand the phenomenon of boarding - why does it happen and what impact does it have. The most up-to-date data will be presented in this session, drawn from the largest dataset to date.

**Session Outcomes**
After this session, delegates will:
- Be able to define patient turnaway.
- Understand the impact of boarding on patients and hospitals.
- Be able to describe higher and lower risk boarding.

**Session Lead**
Dr Dan Beckett, National Clinical Lead, WSPFIP

B - Criteria Led Discharge

**Session Summary**
In order to create capacity and meet demand a hospital must have an effective discharge process. However it is suggested that across the NHS, there are significant problems with the discharge process, which is impeding flow and reducing quality of care. This is also negatively impacting on patient experience.

Criteria Led Discharge (CLD) is a process which allows patients to be discharged by registered nurses or another appropriately qualified health professional such as a junior doctor or physiotherapist once they have met a set of medically approved criteria. CLD also formalises discharge into a defined process, which commences from the point of admission. This prevents unnecessary time in hospital and promotes earlier in the day discharge that can occur over 7 days.

Delegates will hear directly from colleagues who have successfully implemented CLD. Delegates will also hear from our national clinical lead for CLD and from some of the pilot sites in the process of implementing CLD.

Join this session to find out more about the positive impact criteria led discharge can have on patient flow.

**Session Outcomes**
After this session, delegates will:
- Have a clear understanding of the principles of criteria led discharge.
- Be able to identify what potential impact criteria led discharge may have on your systems flow.
- Understand the key priorities in implementation of criteria led discharge.

**Session Lead**
Lynne Mann, Service Improvement Lead, Quality and Efficiency Support Team (QuEST)

**Speakers**
- Professor Andrew Collier, National Clinical Lead - Criteria Led Discharge, QuEST
- Alison Noonan, Improvement and Development Manager, NHS Greater Glasgow and Clyde
- Jenny Ingram, Head of Improvement, NHS Grampian
**C – Flowopoly - Re-Enacting Patient Flow Using Table-Top Scenarios**  
Room - Glendevon

| Session Summary | This session will give delegates an opportunity to take part in an exciting exercise that uses real hospital data to visualise and understand the problems and complexity of ‘flow’. The exercise will take delegates through real (anonymised) patient journeys in the system. Delegates will obtain a ‘helicopter view’ of the system, the pressure points and blockages and will see in real-time the nature of ‘flow’.
| Session Outcomes | **After this session, delegates will:**
| | Have a better understanding of how the unscheduled care “whole system” works.
| | Have a better understanding of what data should be used to measure and monitor patient flow in unscheduled care systems.
| | Have a better understanding of how to raise awareness of the issues related to patient flow.
| Session Lead | Katie Cuthbertson, Programme Manager, WSPFIP
| Speakers | Neil Pettinger, Kurtosis
| | Michael Fox, Intandum

| D - Measuring Flow for Improvement | Room – Callander Dollar
| Session Summary | Good measurement is crucial to understanding and improving the flow of patients through a healthcare system. In this session we will explore some important approaches to measurement, focussing on examples from real data.
| Session Outcomes | **After this session, delegates will:**
| | Know about some basic and important analyses of flow.
| | Have a basic understanding of how to interpret these analyses.
| | Have identified at least one new analysis to conduct in their organisation.
| Session Lead | Martin Hopkins, Programme Director, WSPFIP
| Speakers | Dr Tom Woodcock, Imperial College London

| E - 7 Day Services | Room - Allanwater
| Session Summary | This session will showcase a Scottish example of how a seven day service has been practically implemented and improved patient flow. There will also be an opportunity to hear an overview of the Sustainability and Seven Day Services Programme.
| Session Outcomes | **After this session, delegates will:**
| | Understand the impact 7 Day Services can have on patient flow.
| | Appreciate how a 7 Day Services can be achieved and a deeper understanding of some of the challenges in implementation.
| | Have an overview of the Sustainability and Seven Day Service Programme and how it is being delivered.
| Session Lead | David McDonald, Service Improvement Lead, WSPFIP
| Speakers | Christine Divers, Head of Rehabilitation, Golden Jubilee National Hospital
| | Daniel MacDonald, Medical Workforce Adviser, Scottish Government
| | Lech Rymaszewski, Consultant, NHS Greater Glasgow and Clyde

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### F - Demand and Capacity Planning

**Session Summary**
This session will focus on using Management Information to support Demand and Capacity planning in order to improve patient flow across hospitals. There will be the opportunity to learn from current examples of how this works in NHS Boards and also the opportunity to join in a wider discussion on engaging Operational and Clinical Teams with Management Information.

**Session Outcomes**
**After this session, delegates will:**
- Have an overview of current technology being used to create and disseminate Management Information.
- Understand the approaches being adopted to engage Operational and Clinical Teams with Management Information.
- Have participated in discussions on providing and using Management Information to effectively support Demand and Capacity planning.

**Session Lead**
Laurence Keenan, Service Improvement Manager, WSPFIP

**Speakers**
- Dr Tom Jarosz-Cromie, Capacity Planning Programme Manager, NHS Tayside
- Jonathan Todd, Head of Information Management, NHS Greater Glasgow and Clyde
- Derek Phillips, Senior Information Analyst, NHS Greater Glasgow and Clyde

### G - Patient and Staff Engagement to Support Redesign of Services

**Session Summary**
It is important to engage patients and staff when undertaking any service improvement. This session will showcase examples from NHS Greater Glasgow and Clyde and NHS Tayside about how patients and staff have been actively involved in initiating, designing and implementing service changes to improve patient flow.

NHS Greater Glasgow and Clyde will demonstrate how they have actively engaged with patients to optimise the pathway taken by mothers who undergo elective caesarean delivery. Thereby providing the highest standards of quality and safety, keeping the mother and her child at the centre of all decisions. The aim is to minimise the mothers’ hospital stay and returning the patient to their community environment as soon as it is appropriate.

NHS Tayside will provide an overview of how they created the vision for change together with staff and patients.

**Session Outcomes**
**After this session, delegates will:**
- Understand the benefits of engaging patients and staff in service improvement.
- Have awareness of tools and techniques to engage patients and staff in redesign.
- Be able to identify where patients and staff can support you to improve patient flow.

**Session Lead**
Michelle McNulty, Service Improvement Manager, WSPFIP

**Speakers**
- Dr Kerry Litchfield, Anaesthetist, NHS Greater Glasgow and Clyde
- Dr Andrew Clark, Anaesthetist, NHS Greater Glasgow and Clyde
- Dr Sharon Hilton Christie, Anaesthetist, NHS Tayside (1205-1305 Only)
- Gillian Birrell, Programme Manager, Whole System Patient Flow, NHS Tayside (1405-1505 only)

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**H - Flow is a Safety Issue**

**Session Summary**
We recognise that patient flow has consequences for patient safety and vice versa and therefore suggest that neither safety nor flow should be seen in isolation. Hospital Huddles have been identified as an ideal opportunity for the wider multidisciplinary team to collectively discuss, prioritise and action issues of flow and safety. Making flow and safety part of the same conversation.

**Session Outcomes**
*After this session, delegates will:*
- Recognise the overlap between safety, person centeredness, flow and quality of care.
- Appreciate the role of culture in success factors.
- Have learned from the recommended model.

**Session Lead**
Julie Main, Service Improvement Manager, WSPFIP

**Speakers**
- Dr Andrew Longmate, National Clinical Lead for Patient Safety, The Quality Unit
- Erica Reid, The Quality Unit,
- Lyn McDonald, Site Director, NHS Lothian

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**I - Implementing IHO’s Methodology in Scotland**

**Session Summary**
NHS Forth Valley are at the early stages of implementing IHO’s Methodology. Following Eugene Litzak’s main stage presentation, this session will delve deeper into IHO’s Methodology with NHS Forth Valley’s story of implementation to date. The session will also provide an opportunity to ask Eugene Litvak further questions about the methodology and outcomes from past implementation.

**Session Outcomes**
*After this session, delegates will:*
- Have a greater awareness and understanding of IHO’s Improving Patient Flow Methodology.
- Understand the stages involved in implementing IHO’s Improving Patient Flow Methodology in the Scottish context and lessons learnt to date from NHS Forth Valley.

**Session Lead**
Tracey Gillies, Medical Director, NHS Forth Valley

**Speakers**
- Dr Chris Cairns, Consultant Anaesthetist, Clinical Lead IHO Project, NHS Forth Valley
- Eugene Litvak, Ph.D., President and CEO, IHO

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