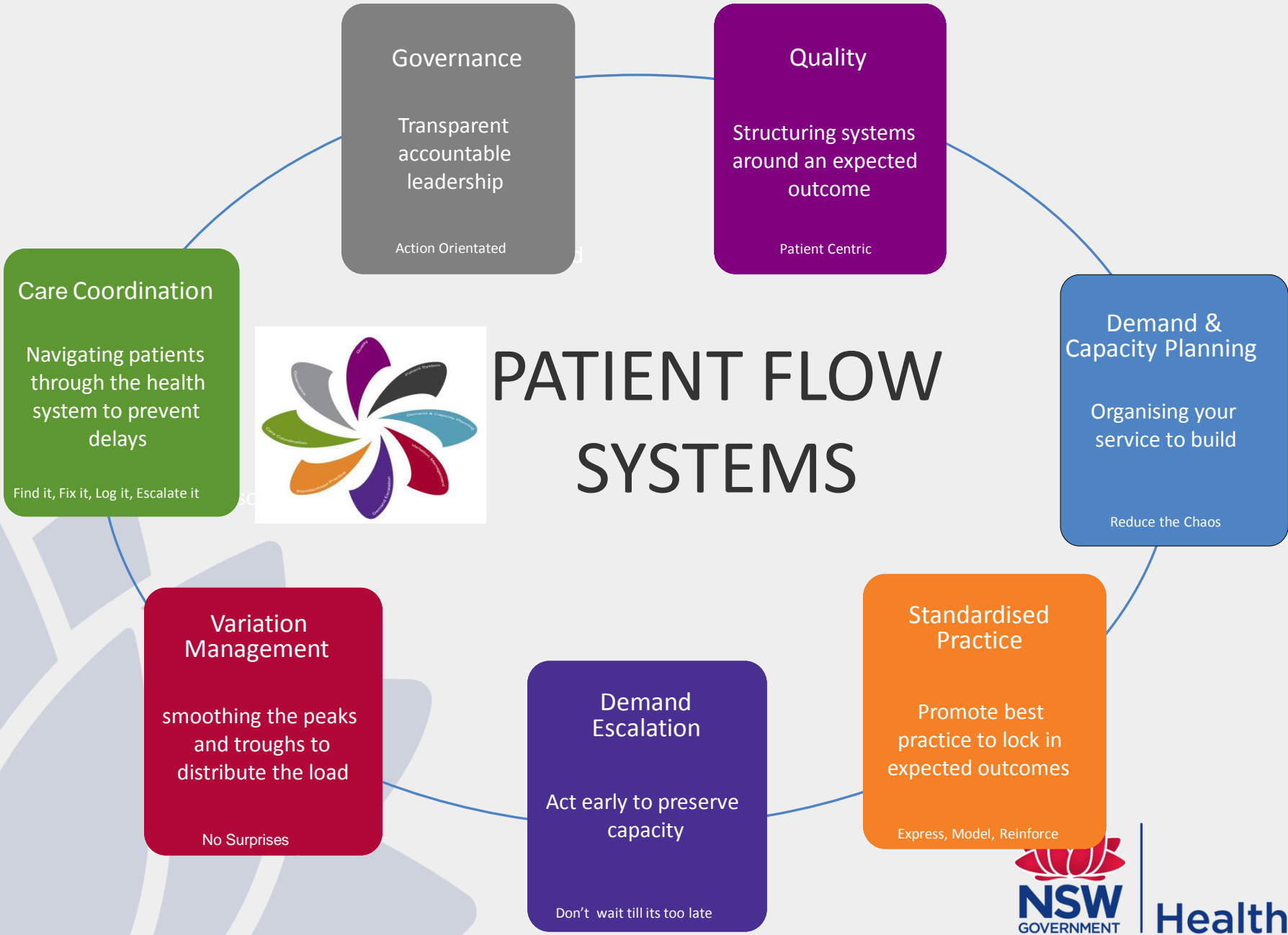


Patient Flow Systems the Patient Flow Portal and NEAT



Health



Care Coordination
 Navigating patients through the health system to prevent delays
 Find it, Fix it, Log it, Escalate it



PATIENT FLOW SYSTEMS

Governance
 Transparent accountable leadership
 Action Orientated

Quality
 Structuring systems around an expected outcome
 Patient Centric

Demand & Capacity Planning
 Organising your service to build
 Reduce the Chaos

Standardised Practice
 Promote best practice to lock in expected outcomes
 Express, Model, Reinforce

Demand Escalation
 Act early to preserve capacity
 Don't wait till its too late

Variation Management
 smoothing the peaks and troughs to distribute the load
 No Surprises



Health

Current State of PFP Utilisation

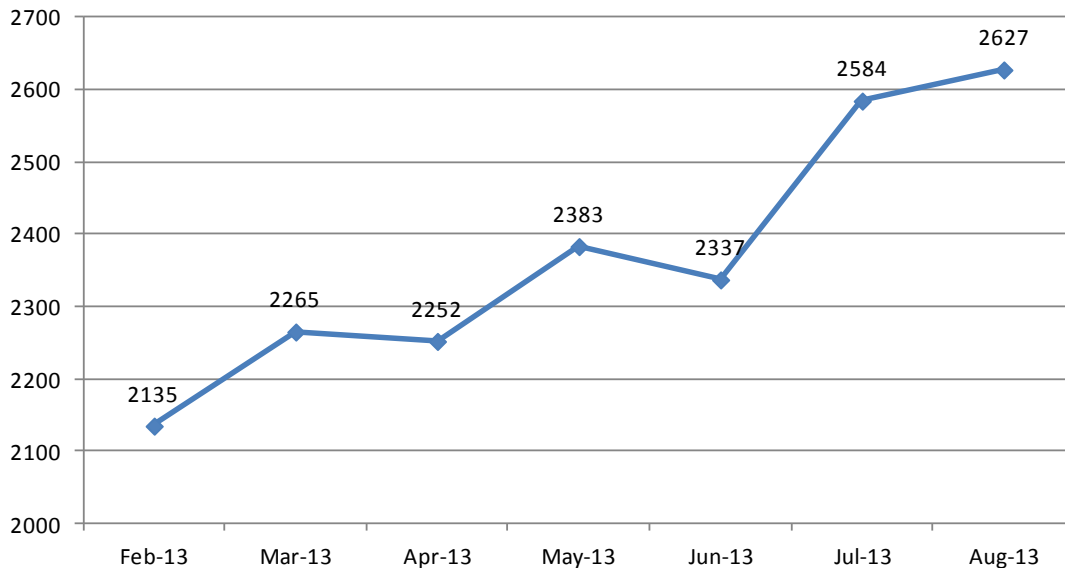
Utilisation Indicator	YTD 2011 (Jan-Aug)	YTD 2012 (Jan-Aug)	YTD 2013 (Jan - Aug)	Overall Variance (2011 - 2013)
# Successful User Logins	30,889	90,333	108,801	77,912 (~252%)
# Inter Hospital Transfers Initiated	13,188	29,744	36,479	23,291 (~177%)
# Waiting for What Reasons Created	0	45,308	46,756	1,448 (3%) ¹

Note 1: Waiting for What variance is for 2012-2013

Key Insight:

- **# successful logins** into PFP for Jan-Aug increased by **~252%** between 2011 - 2013
- **# Inter Hospital Transfers** initiated for Jan- Aug increased by **177%** between 2011 - 2013

PFP Active Users (Feb - Aug 2013)



Key Insight:

- From Feb - Aug 2013 total number of active PFP users increased by approx. 23%

(Active user = user who has logged into PFP at least once during the month)

PFP functions to support NEAT

- Improve PFP utilisation:
 - Clinician defined EDD > 95%
 - Review and case manage pts with extended LOS
 - Identify and repatriate outlier patients daily
 - Monitor IHT's performance via clinical urgency
 - Review/escalate and resolve W4W delays on a daily basis
 - Aggregate W4W delay data for possible redesign projects.
 - Use Predictive Tool to understand and plan actions around demand and capacity mismatch.

Inter Hospital Transfers

- Information about the number and clinical priority of inter hospital transfers
- Identify current delays
- Review performance and identify sites contributing to delays
- Assists operational staff manage beds across the LHD/SHN and addresses LOS reduction and waiting for what.

From Hospital (LHD)

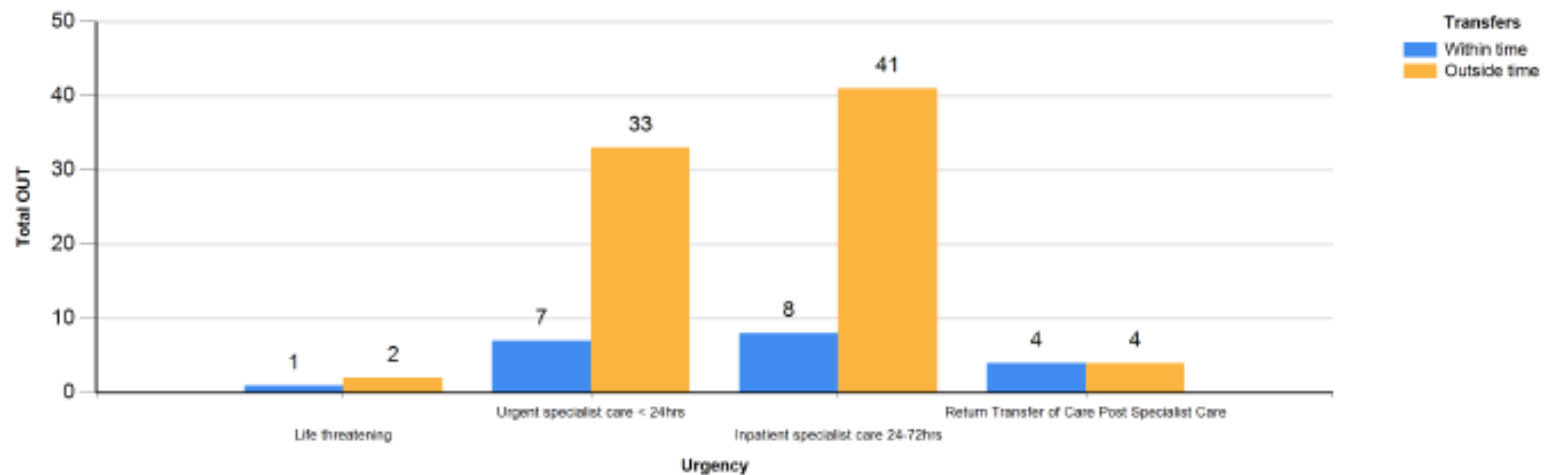
Patient ID	Patient Name	Facility To	Urgency Category	Specialty	Estimated Transfer Time	Transfer Request Time	Bed Confirmed Time	Request to Confirmed Time	Patient Sent Time	Confirmed to Sent Time	Transfer Completed Time	Sent to Completed Time	Req/Est to Completed Time*
			Inpatient specialist care 24-72hrs	General Medicine	04/03/13 10:32	14/02/13 10:30	04/03/13 10:36	18 days 6 mins	04/03/13 12:56	2 hours 20 mins	04/03/13 13:46	50 mins	18 days 3 hours 16 mins
			Inpatient specialist care 24-72hrs	General Medicine	19/03/13 12:24	18/02/13 14:09	19/03/13 12:21	28 days 22 hours 12 mins	20/03/13 10:55	22 hours 34 mins	20/03/13 11:25	30 mins	29 days 21 hours 16 mins
			Inpatient specialist care 24-72hrs	General Medicine	04/03/13 13:02	20/02/13 08:28	11/03/13 11:50	19 days 3 hours 22 mins	11/03/13 16:05	4 hours 15 mins	11/03/13 16:45	40 mins	19 days 8 hours 17 mins
			Inpatient specialist care 24-72hrs	General Medicine	22/02/13 09:17	20/02/13 15:40	06/03/13 12:32	13 days 20 hours 52 mins	06/03/13 13:30	58 mins	06/03/13 14:14	44 mins	13 days 22 hours 34 mins
			Inpatient specialist care 24-72hrs	General Medicine	22/02/13 14:10	22/02/13 14:10			07/03/13 13:03		07/03/13 13:44	41 mins	12 days 23 hours 34 mins
			Inpatient specialist care 24-72hrs	General Medicine	04/03/13 13:05	25/02/13 12:40	11/03/13 11:59	13 days 23 hours 19 mins	11/03/13 19:41	7 hours 42 mins	11/03/13 20:15	34 mins	14 days 7 hours 35 mins
			Inpatient specialist care 24-72hrs	General Medicine	28/02/13 18:54	26/02/13 09:56			01/03/13 14:26		01/03/13 14:50	24 mins	3 days 4 hours 54 mins
			Inpatient specialist care 24-72hrs	General Medicine	27/02/13 12:08	27/02/13 12:08			10/03/13 15:10		10/03/13 16:00	50 mins	11 days 3 hours 52 mins
			Inpatient specialist care 24-72hrs	General Medicine	28/02/13 10:27	28/02/13 10:27	11/03/13 14:25	11 days 3 hours 58 mins	11/03/13 15:00	35 mins	11/03/13 15:50	50 mins	11 days 5 hours 23 mins
			Inpatient specialist care 24-72hrs	Geriatric Rehabilitation	28/02/13 12:47	28/02/13 12:47	28/02/13 13:01	14 mins	01/03/13 08:40	19 hours 39 mins	01/03/13 08:40	0 mins	19 hours 53 mins
			Inpatient specialist care 24-72hrs	General Medicine	04/03/13 11:51	28/02/13 13:57	04/03/13 11:40	3 days 21 hours 43 mins	04/03/13 15:37	3 hours 57 mins	04/03/13 16:27	50 mins	4 days 2 hours 30 mins
			Inpatient specialist care 24-72hrs	Rehabilitation Medicine	25/03/13 19:09	28/02/13 14:18			25/03/13 14:40		25/03/13 19:09	4 hours 29 mins	25 days 4 hours 51 mins

Patient Transfer Times Graph

For the Period 25/03/13 to 23/04/13

* Excludes Incomplete transfers

Transfers out of



Transfer Times Summary

Urgency	Shortest Transfer Time	Longest Transfer Time	Average Transfer Time
Life threatening	0 day(s) 0 hour(s) 0 min(s)	1 day(s) 3 hour(s) 51 min(s)	0 day(s) 9 hour(s) 57 min(s)
Urgent specialist care < 24hrs	0 day(s) 0 hour(s) 1 min(s)	2 day(s) 16 hour(s) 14 min(s)	0 day(s) 9 hour(s) 9 min(s)
Inpatient specialist care 24-72hrs	0 day(s) 0 hour(s) 1 min(s)	8 day(s) 4 hour(s) 43 min(s)	2 day(s) 13 hour(s) 57 min(s)
Return Transfer of Care Post Specialist Care	0 day(s) 0 hour(s) 0 min(s)	3 day(s) 1 hour(s) 46 min(s)	1 day(s) 7 hour(s) 18 min(s)

Waiting for What

- By reviewing "Waiting for What" reasons regularly, delays in care can be identified and managed effectively.
- In a single glance you can see the main delays effecting patients across the hospital.
- % of W4W should be around 15 -20%... currently ~ 3 to 10%
- Feedback to staff the results of actions.

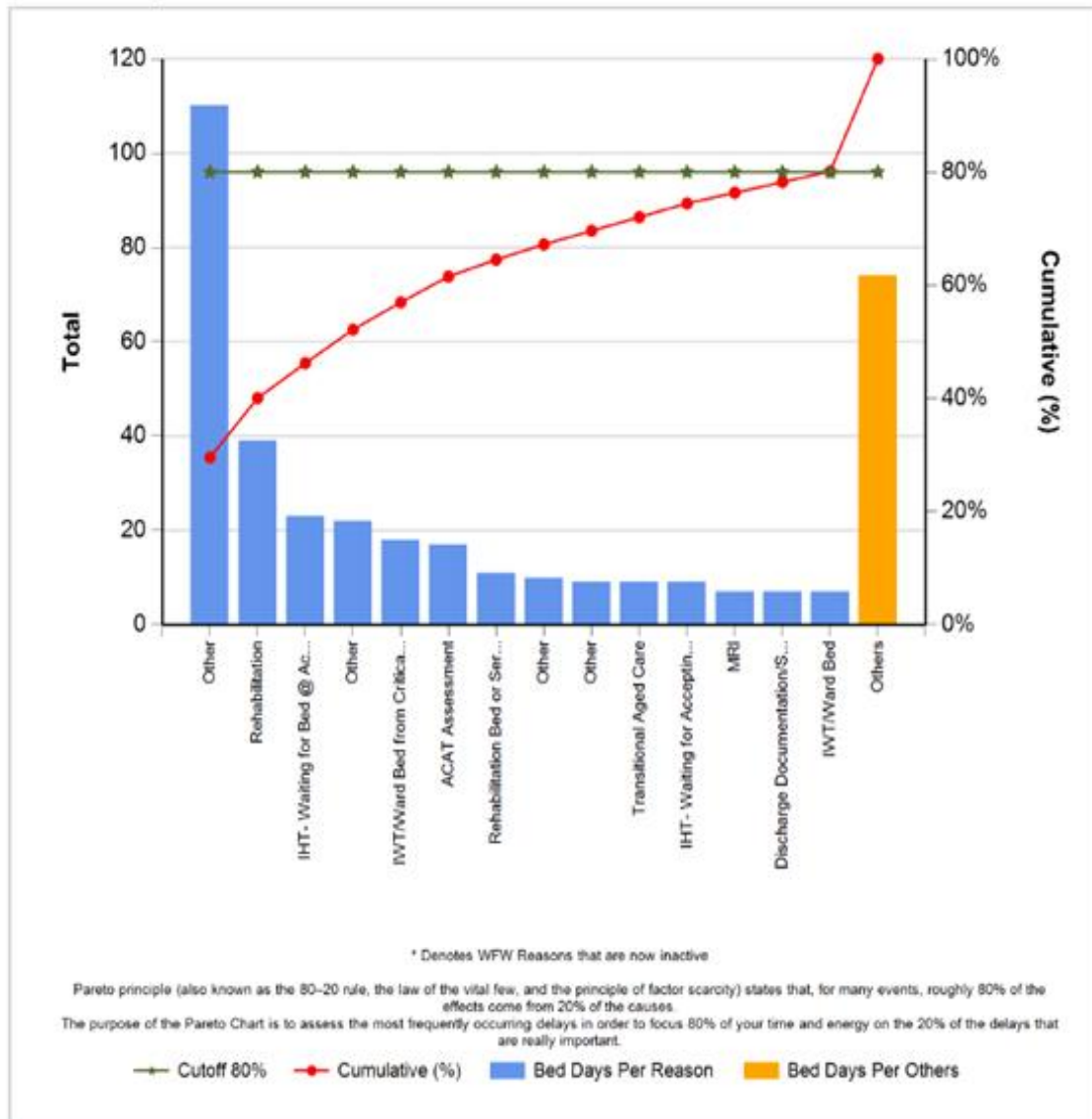
Waiting for What – Current Admissions (Open Reasons)

Snapshot - 16/04/13

Hospital (LHD)

MRN	Surname	First Name	Primary Delay Reason	Secondary Delay Reason	Optional Text	Admission Date	LOS	WFW Start Date	WFW (Total Days)	EDD	Specialty	Ward	Med. Officer	Last Updated Date	Last Updated By	Facility ID
0024032			Consults	Aged Care		12/04/13	4	15/04/13	1	19/04/13	Orthopaedics	NEXUS			pbidh	Q230
0757159			Consults	Physiotherapist		05/02/13	70	13/02/13	62	17/04/13	Geriatrics	STRAS				Q230
0876642			Consults	Rehabilitation		23/12/12	114	22/01/13	84	25/03/13	Rehabilitation	NTHRPH				Q230
3021064			Consults	Other Medicine		23/01/13	83	29/01/13	77	07/03/13	Rehabilitation	NTHRPH				Q230
0674621			Diagnostics / Treatment	AMO / Team Review		15/07/12	275	12/04/13	4	22/07/12	Endocrinology	EMERGENCY			pbidh	Q230
2528164			Diagnostics / Treatment	MRI	Spine	13/04/13	3	14/04/13	2	17/04/13	Neurosurgery	G2S			pbidh	Q230
0288791			Diagnostics / Treatment	Operating Theatre		12/01/13	94	24/01/13	82	10/04/13	Immunology	CAPAC-O&A				Q230
0001521			Diagnostics / Treatment	Operating Theatre		01/03/13	46	08/03/13	39	18/04/13	Medical Service	G3G				Q230
2548384			Diagnostics / Treatment	Operating Theatre	on 17/04/13	07/04/13	9	11/04/13	5	24/04/13	Cardiac Surgery	F3C				Q230
2779918			Diagnostics / Treatment	Operating Theatre		05/04/13	11	11/04/13	5	15/04/13	Neurosurgery	RNC3				Q230
2528164			Diagnostics / Treatment	Operating Theatre		13/04/13	3	15/04/13	1	17/04/13	Neurosurgery	G2S			pbidh	Q230
0543893			Diagnostics / Treatment	Other	Nursing Care	29/11/12	138	04/12/12	133	23/05/13	Rehabilitation	NTHRPH				Q230
0529044			Diagnostics / Treatment	Other	Acute Care	29/11/12	138	11/12/12	126	20/04/13	Neurosurgery	G2S				Q230
1038704			Diagnostics / Treatment	Other	Acute Care	16/01/13	90	01/02/13	74	11/04/13	Rehabilitation	NTHRPH				Q230
0288791			Diagnostics / Treatment	Other	Acute ongoing	12/01/13	94	13/02/13	62	10/04/13	Immunology	CAPAC-O&A				Q230
0474195			Diagnostics / Treatment	Other	continuing acute care	24/02/13	51	26/02/13	49	22/04/13	Geriatrics	STRAS				Q230
0330179			Diagnostics / Treatment	Other	ongoing acute care 02/04/2013	25/02/13	50	08/03/13	39	20/04/13	Rehabilitation	RNC1				Q230
0721787			Diagnostics / Treatment	Other	continuing acute care 13/03/13	15/02/13	60	11/03/13	36	23/04/13	Rehabilitation	STHRPH				Q230
0010094			Diagnostics / Treatment	Other	continuing acute care 13/03/13	09/02/13	66	11/03/13	36	22/04/13	Respiratory	F2R				Q230
2776789			Diagnostics / Treatment	Other	Acute Care	14/03/13	33	15/03/13	32	01/05/13	General Surgery	G1				Q230
0220105			Diagnostics / Treatment	Other	await strass	04/03/13	43	18/03/13	29	22/04/13	Geriatrics	STRAS				Q230
2772571			Diagnostics / Treatment	Other	vac change today	14/02/13	61	18/03/13	29	10/05/13	Rehabilitation	STHRPH				Q230

Hospital

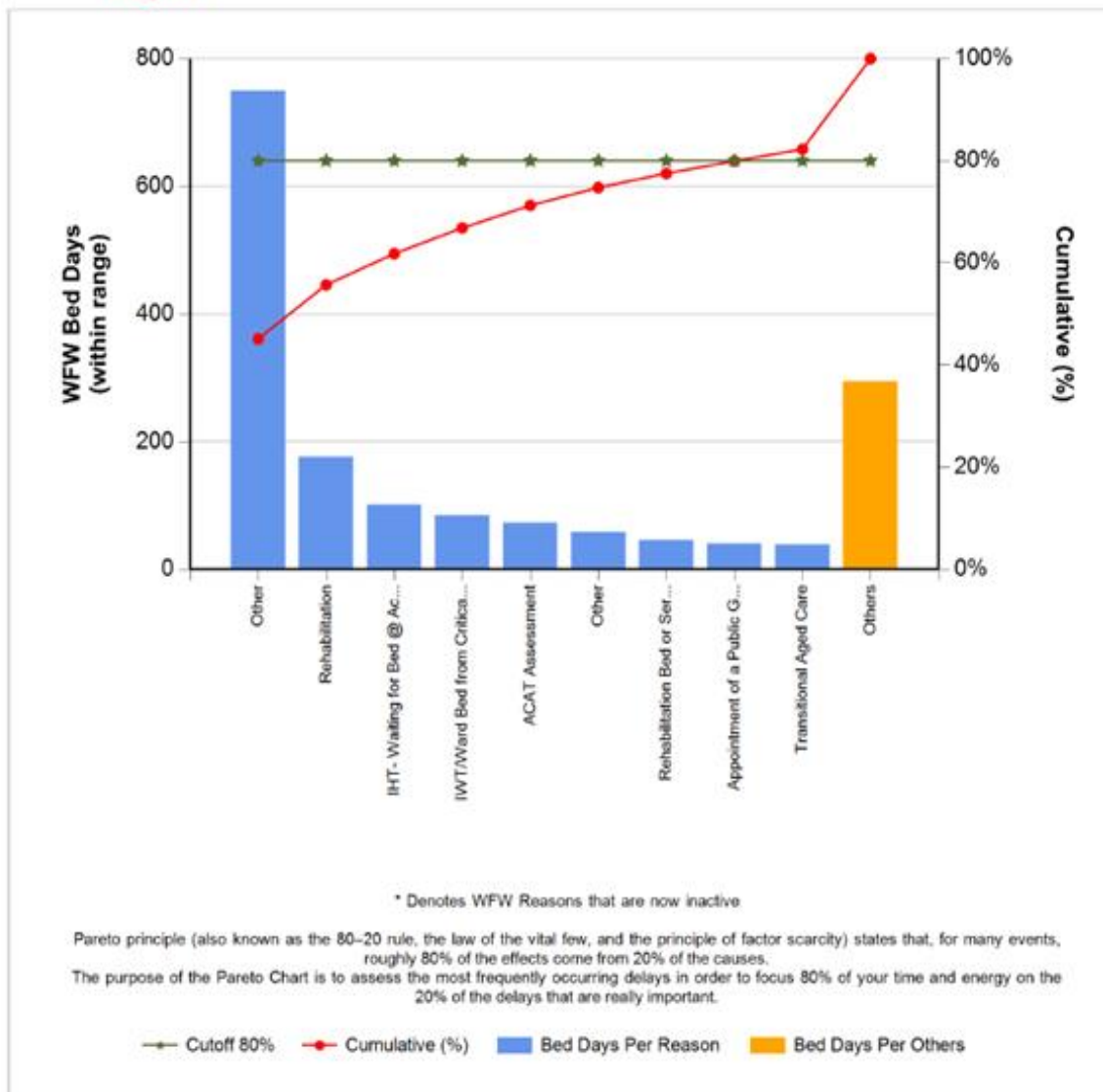


Waiting for What Reasons Summary

Hospital

Reasons	Total per Reason	Cumulative (%)	Total (%)
Transfer/Transport: Other	110	30%	30%
Consults: Rehabilitation	39	40%	10%
Transfer/Transport: IHT- Waiting for Bed @ Accepting Facility	23	46%	6%
Diagnostics/Treatment: Other	22	52%	6%
Transfer/Transport: IWT/Ward Bed from Critical Care	18	57%	5%
Out of Hospital Referral: ACAT Assessment	17	62%	5%
Out of Hospital Referral: Rehabilitation Bed or Service	11	65%	3%
Discharge Process: Other	10	68%	3%
Out of Hospital Referral: Other	9	70%	2%
Out of Hospital Referral: Transitional Aged Care	9	72%	2%
Transfer/Transport: IHT- Waiting for Accepting Facility	9	74%	2%
Diagnostics/Treatment: MRI	7	76%	2%
Discharge Process: Discharge Documentation/Summary	7	78%	2%
Transfer/Transport: IWT/Ward Bed	7	80%	2%
Others	74	100%	20%

Hospital



Bed Days Used per Waiting for What Reason

Reasons	Hospital	LHD)	
	WFW Bed Days (within range)	Cumulative (%)	Total (%)
Transfer/Transport: Other	749	45%	45%
Consults: Rehabilitation	176	56%	11%
Transfer/Transport: IHT- Waiting for Bed @ Accepting Facility	101	62%	6%
Transfer/Transport: IWT/Ward Bed from Critical Care	84	67%	5%
Out of Hospital Referral: ACAT Assessment	73	71%	4%
Diagnostics/Treatment: Other	58	74%	3%
Out of Hospital Referral: Rehabilitation Bed or Service	46	77%	3%
Out of Hospital Referral: Appointment of a Public Guardian	40	79%	2%
Out of Hospital Referral: Transitional Aged Care	39	81%	2%
Others	294	100%	19%

Demand and Capacity Management

Prediction data only applies to ED accessible wards

	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue
	18/09/13	19/09/13	20/09/13	21/09/13	22/09/13	23/09/13	24/09/13	25/09/13	26/09/13	27/09/13	28/09/13	29/09/13	30/09/13	01/10/13
Predicted total beds AVAILABLE	42	25	36	17	11	27	29	31	25	36	17	11	27	29
Predicted total beds REQUIRED	37	29	30	19	18	32	26	21	22	26	19	18	29	24
BED DEMAND STATUS	5	-4	6	-2	-7	-5	3	10	3	10	-2	-7	-2	5
Total ED accessible beds	115	115	115	115	115	115	115	115	115	115	115	115	115	115
	Notes	Notes	Notes	Notes	Notes	Notes	Notes	Notes	Notes	Notes	Notes	Notes	Notes	Notes



PFP utilisation

- Identify key staff in the organisation.
- Clarify roles and responsibilities.
- Identify knowledge gaps.
- Provide Executive support for driving improved utilisation.
- Contact MoH PFP Team for assistance

For Further Information

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Health