BEAT It!

every patient every time

Enhanced Mental Health Consumer Journey in Wyong Emergency Department

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Project background





45%

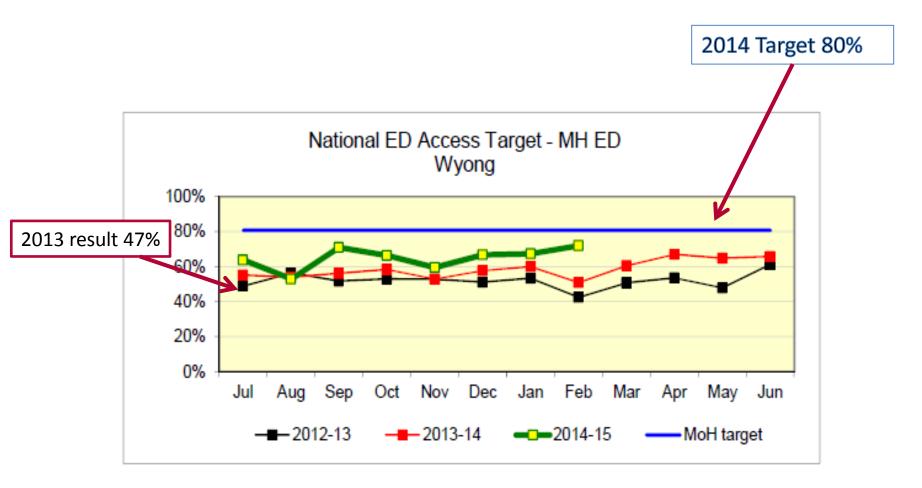






Case for Change

2014 NEAT (ETP) Target 80% up to 81% 2015







Project Goal and Objectives



Strategic Direction

Caring for the Coast every patient every time



Project Goal

To improve mental health consumers experience at Wyong ED by reducing wait times and treatment delays.



Project Objectives

 By June 2015 mental health consumers presenting to ED will be admitted, discharged or transferred within 4 hours, thereby improving Mental Health NEAT from 47% in 2013 to 81%





Methodology

REDESIGN Centre for Healthcare Redesign - Methodology					
Project Initiation & Start-up	Diagnostics	Solution Design	Implementation Planning	Implementation Checkpoints	Evaluation Sustainability Knowledge Sharing
To develop the project scope and set up project, change, communication and stakeholder management plans	To collect and assess critical data about processes, patients and staff. Identify key issues to be resolved and build the case for change	To design and prioritise solutions to issues and build stakeholder support	To develop a comprehensive plan for implementing solutions and measuring benefits	To implement solutions and confirm that benefits are being delivered	To identify ways to improve the process, share lessons and drive sustainability
Project Management	 Process Mapping 	Literature Search for Best Practice Solutions	Implementation Plans for Quick Wins	Implement Quick Wins	Post Implementation Evaluation
Project Objectives & Measuring Benefits	•Diagnostic Tools & Techniques	Facilitated Problem Solving &	Business Cases	Implement all	 Review & Redesign of
Project Scoping	Staff Interviews	Brainstorming	Implementation Teams	Solutions	Unsuccessful Initiatives
Governance & Reporting	Patient Interviews	Solutions Identification	Change Readiness Assessment	Trouble ShootingCoaching & Support	Continuous Cycle of Redesign – Sustainability
• Roles & Responsibilities	Patient Tag Alongs	Cost/Benefit Analysis of Solutions	Sponsorship Roles & Responsibilities	Monitoring and Reporting	Sharing of Knowledge
Project Deliverables & Scheduling	 Data Collection & Analysis 	Prioritisation of Solutions	Project, Stakeholder,	. topotung	Writing For Publication
Project Costs	Baseline KPI's	Detailed Solution	Communication & Change Management Plans		
Risk Management	 Issues Identification 	Statements			
Change Management	Issues Prioritisation	Develop Quick Wins	Performance Management		
Stakeholder Management	Root Cause Analysis		KPI Definition & Measurement Plan		
Communications Management	Building the Case For Change		•Piloting Initiatives		





Diagnostics

- Utilise existing data
- Staff interviews (n=30)
- Process Mapping (n=5)
- Suggestions Box
- Focus Groups (n=2)
- Literature review







Engaging Consumers & Carers

Patient & Carer Experience Trackers (n=26)



- Consumer & Carer Stories (n=4)
- Complaints & Compliments (n=12)
- Consumer Consultants

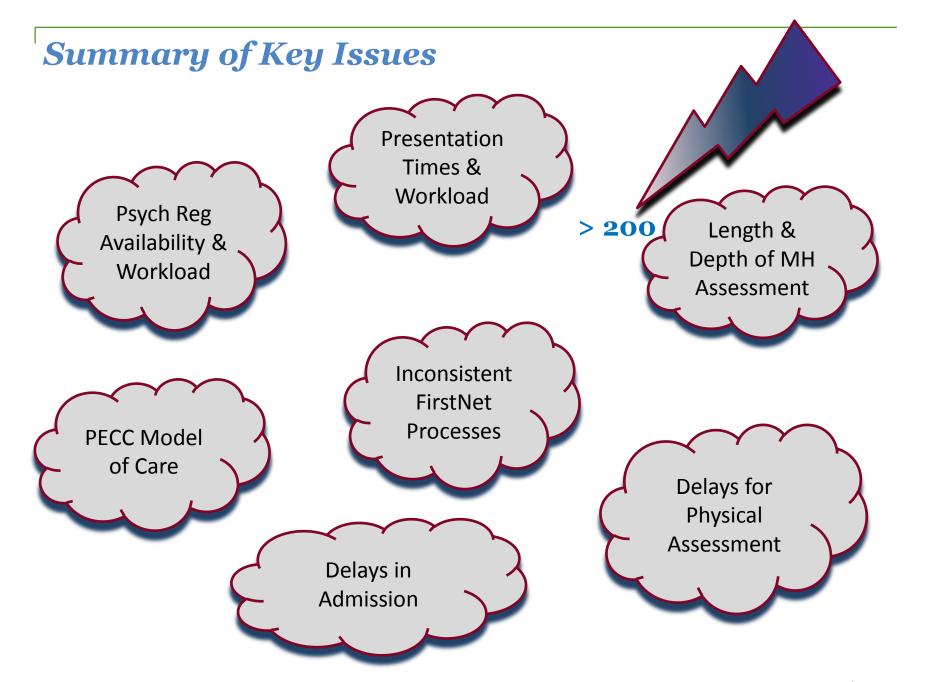
"I felt uncomfortable with sick kids next to me " "No one told me how long I would have to wait"

"There was a long wait in the waiting room"





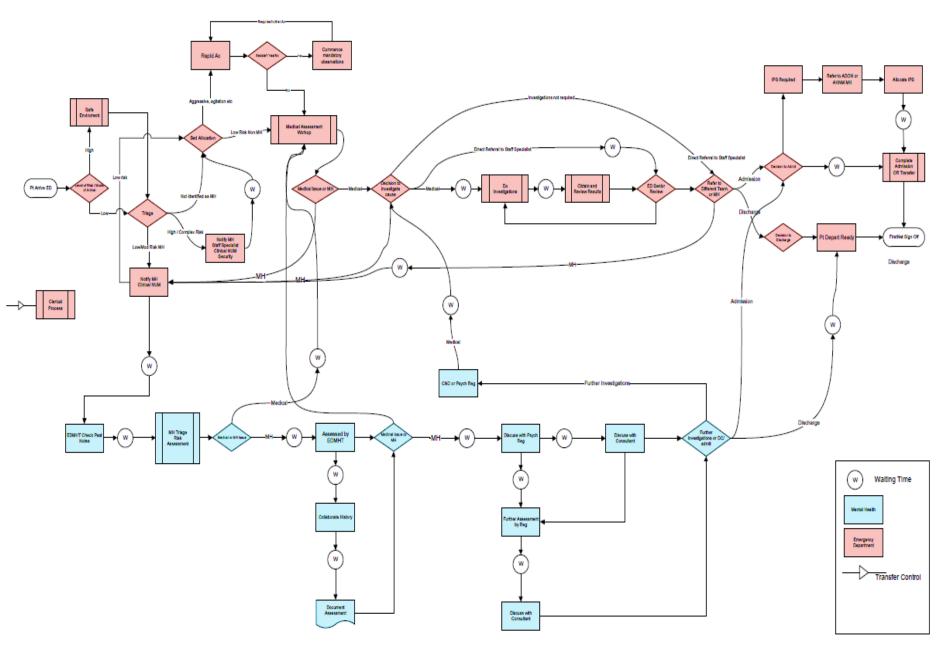








The PAST patient journey



Solution Design Techniques



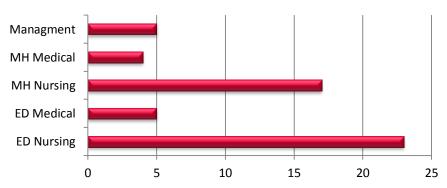


6 x Brain storming sessions

Literature Review

- Review of previous Mental Health NEAT projects
- Suggestions Box
- Solution Statements
- Solutions Prioritisation Tools & Voting

Solutions Prioritisation Stakeholders Engaged

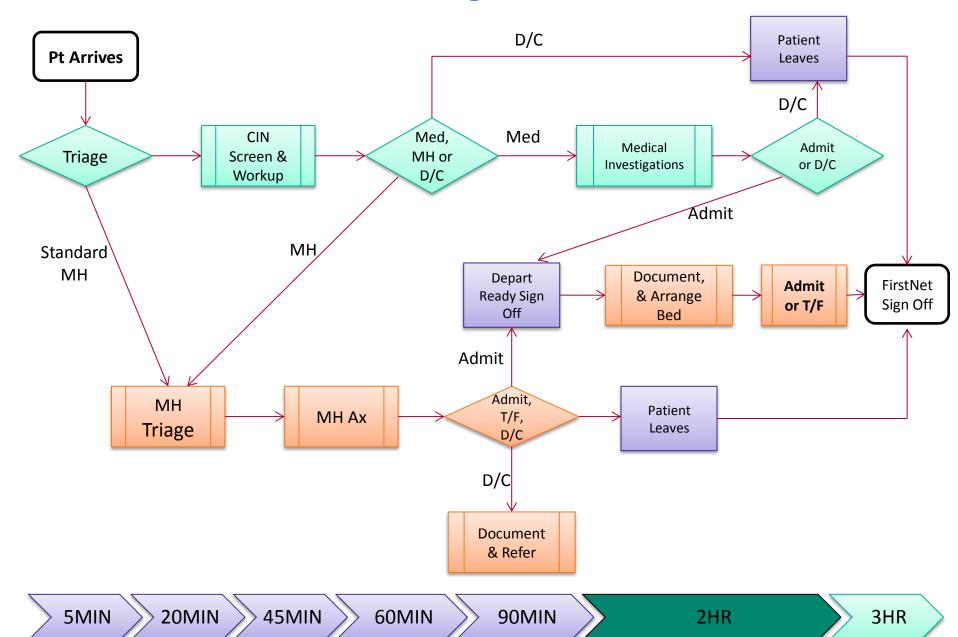


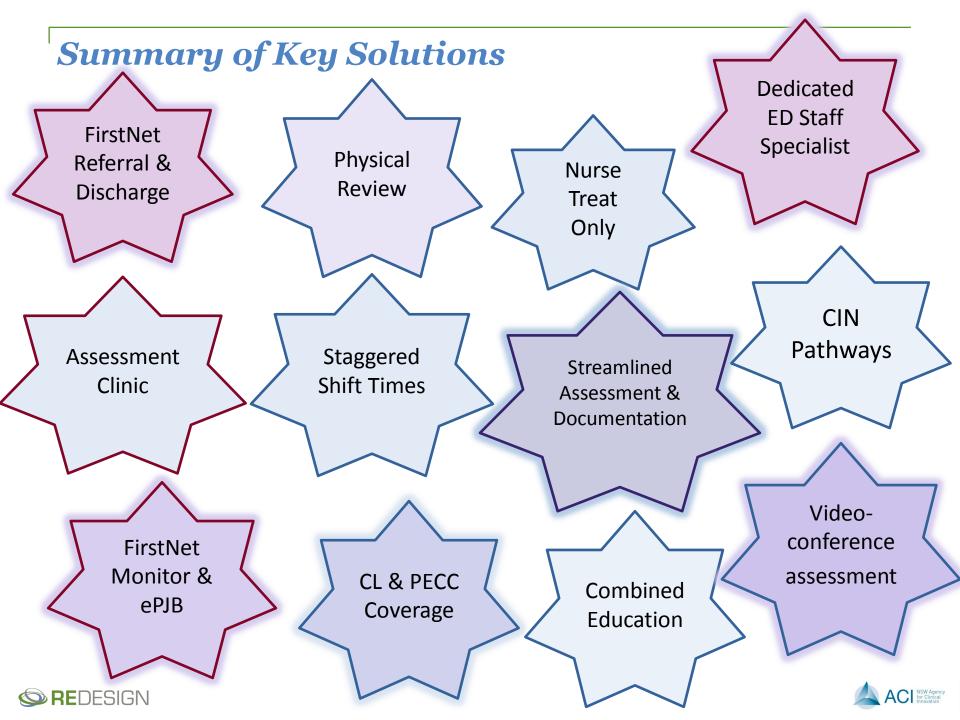




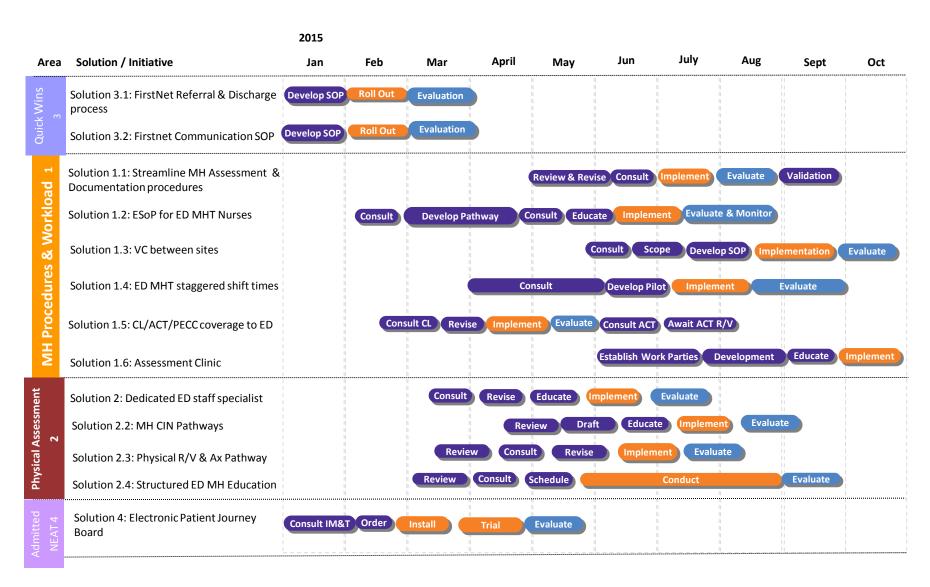


The NEW Patient Journey





Implementation Sequencing





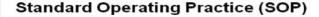


Progress to Date

Standard Operating Practice (SOP)

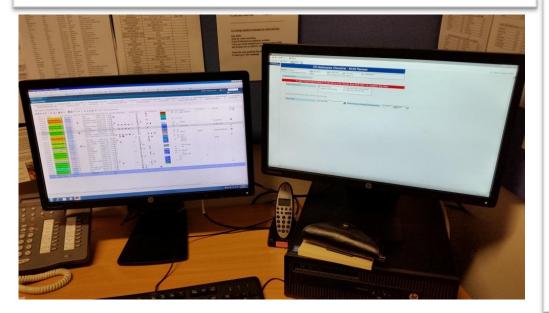


Discharging Mental Health Patients from ED using FirstNet





Referring a patient to the ED Mental Health Team using FirstNet – CCLHD Emergency Departments & ED Mental Health Teams





Standard Operating Practice (SOP)



NURSE TREAT ONLY - Emergency Department Mental Health Team

Applicable to / Scope of Practice

Emergency Department Mental Health Nursing Staff with extensive experience and competence in mental health and risk assessment.

Purpose

There are small subsets of consumers who present to the Emergency Department for nonurgent mental health related issues that do not require significant medical review or intervention. These consumers can be assessed and discharged by the ED MHT Nurse under the Nurse Treat Only Standing Operating Procedure.

3. Standard Operating Practice

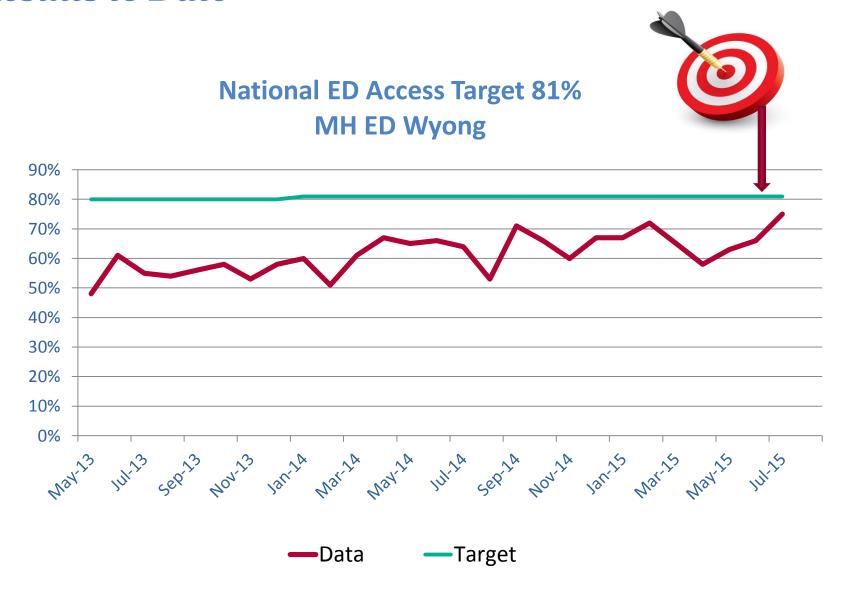
Nurse Treat Only SOP can be applied in the following circumstances

- Normal vital signs and Triage Category 3, 4 or 5
- Low risk eg anxiety, situational crisis, personality disorders where crisis has settled, adjustment disorders
- Well known consumers of the service who can be referred back to their case manager
- Alcohol and drug use disorders which are low risk can be provided D&A contact details for self-referral. If acute intervention is required, ED can refer to D&A Staff Specialist on call
- Patients where ED request a brief mental health review before admission to a medical ward so a plan can be initiated for ongoing Consultation Liaison Psychiatry follow-upeg. Settled post overdose, medical or surgical patients with stable mental health comorbidity
- . GP referrals that are non-complex and low risk





Results to Date

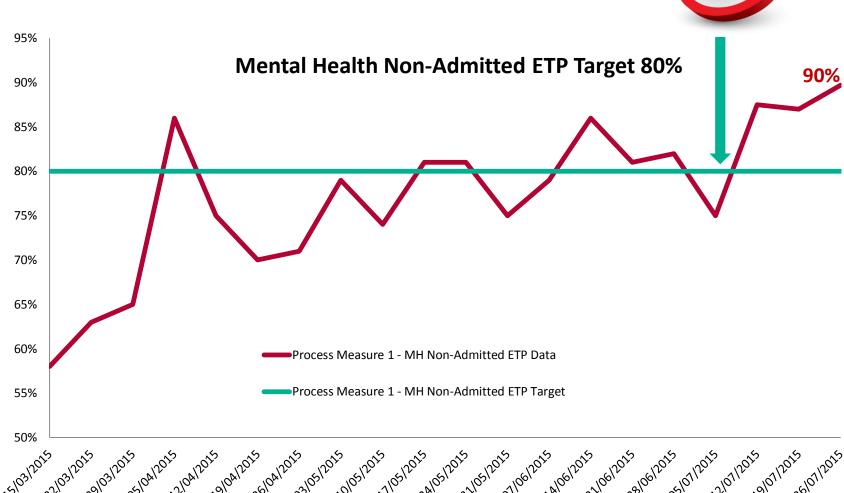






Results to Date

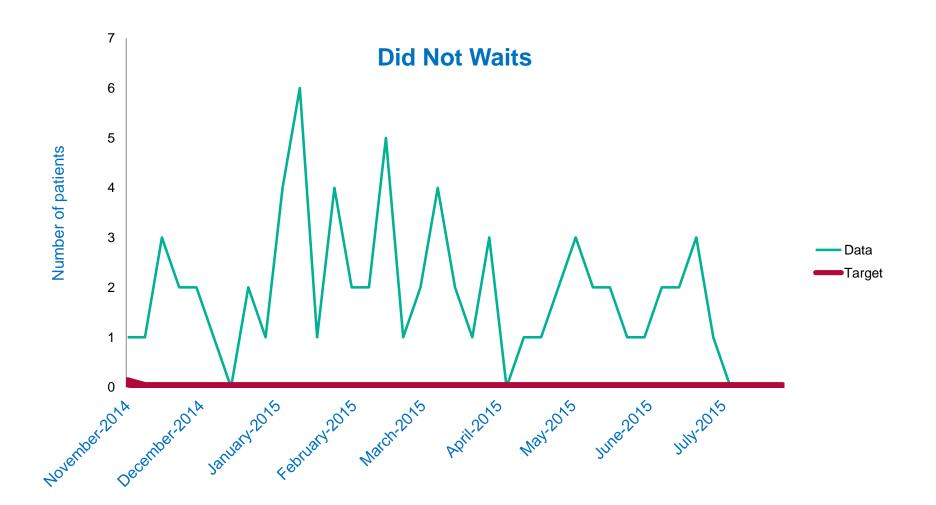








Results to Date

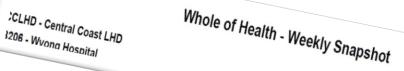






Next Steps

- ✓ Weekly reports to team
- ✓ Ongoing Implementation
 - Staggered shift times
 - Clinical Initiative Nurse Pathways
 - Video Conference assessments
 - Assessment Clinics
- Whole of Health Program
- Consumer & Carer Survey
- Australian Nursing & Midwifery Conference
- Achieving Performance Targets through Patient Flow Conference











Lessons learnt

- Maintain consumer experience as focus
- Collaboration and ownership by stakeholders



- Cascading sponsorship to translate and reinforce the importance of changes
- Regular, clear and concise communication
- Robust and accurate data to support and monitor performance







Acknowledgements

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 Nicole Hargreaves, Mary-Louise Leslie, Cassandra Byrnes
- Our Consumers & Carers
- Mental Health & Emergency Department clinicians
- NSW Health Whole of Health Program
- Lynne Blanchette ISLHD





Beat the Mental Health NEAT









Thank you

