

WSLHD Mental Health Redesign Project

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October 2013



Health
Western Sydney
Local Health District

Background

- In January 2012 it was noted that there had been a significant increase in demand for Mental Health Services (MHS) at Westmead Hospital (WMH) Emergency Department (ED) commencing in July 2011.
- MH consumers experienced extended ED lengths of stay (LOS) with an average of >20 consumers per month waiting in the ED for more than 24 hours to access a MH inpatient bed.
- Led to significant delays in clearing emergency beds and contributing to access block of 85.7% in January 2012 (based on clearing EDs in less than 8 hours).
- Clinical Redesign Project (CRP) commenced February 2012



Overview – Project Goals

- To improve the experience for consumers of MH in the ED at WMH through the identification of issues, development of strategies and implementation of improvement processes

Objectives

- Examine admission, assessment and discharge processes in mental health at Westmead Hospital by 30 April, 2012
- Identify factors that have led to an increase in service demand for mental health for period July 11 to January 12, by 30 April 2012
- Examine the inpatient journey in order to determine factors that contribute to access block by 30 June 2012



Clinical Redesign Project - Diagnostics

- Steering committee was established.
- Data e.g. first net, patient flow database.
- Focus Groups and staff meetings
- Staff Surveys
- Patient stories
- Process Mapping
- Brainstorming
- Medical record Audits

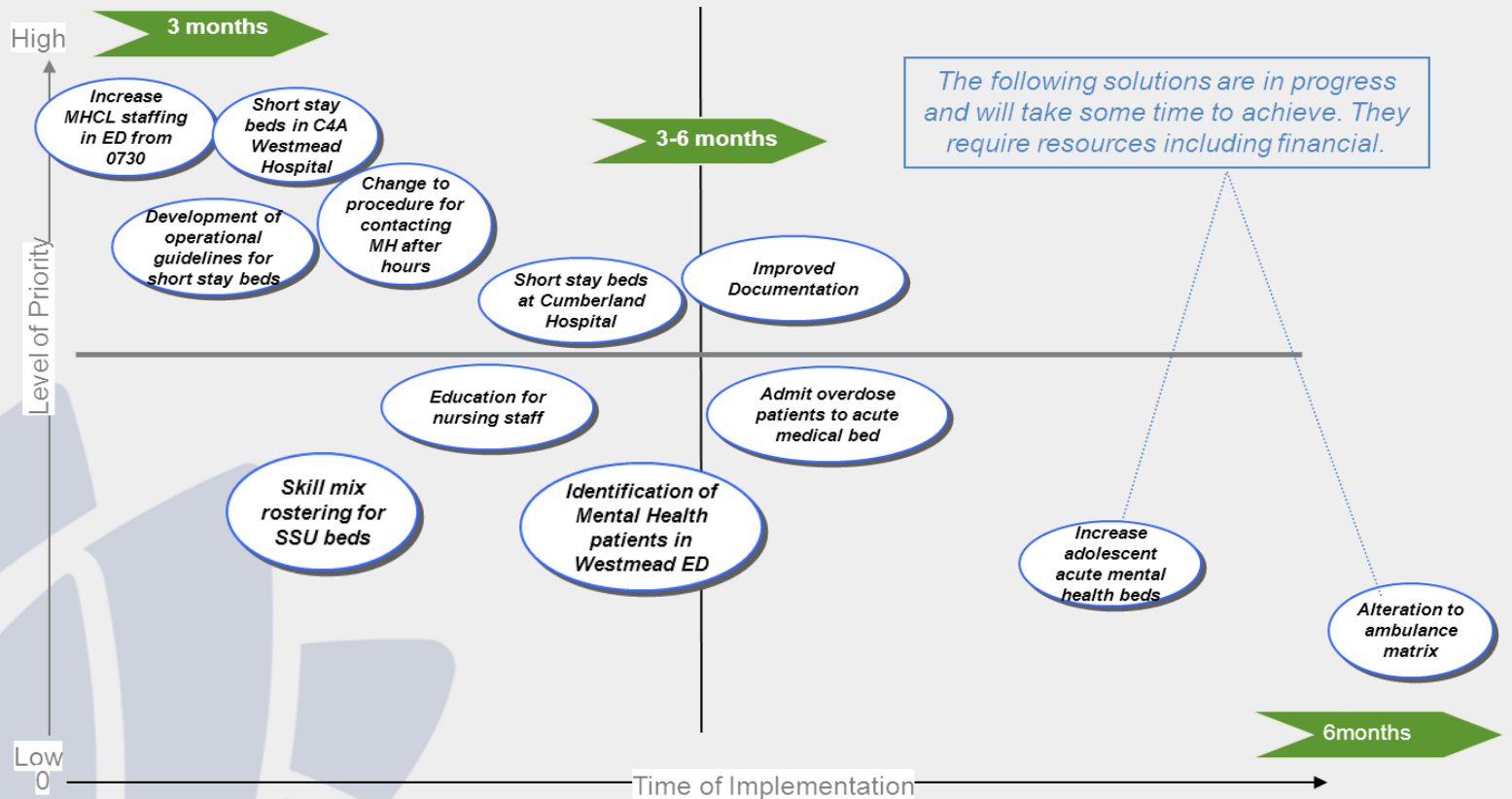


Summary of Key Issues - from Diagnostics

- CRP conducted 6 years ago which identified issues and these continue
- Staff culture impacting on performance & processes
- Process issues contributed to long delays for assessment
- Multiple points of contact for Consultation Liaison Mental Health
- Significant increase in population above state average
- Patients identify long delays in ED for MH service as problematic
- In depth review indicated that **80% of presentations to WMH ED** in January 2012 had a **length of stay of <72 hours**



Solutions Identified/Prioritised



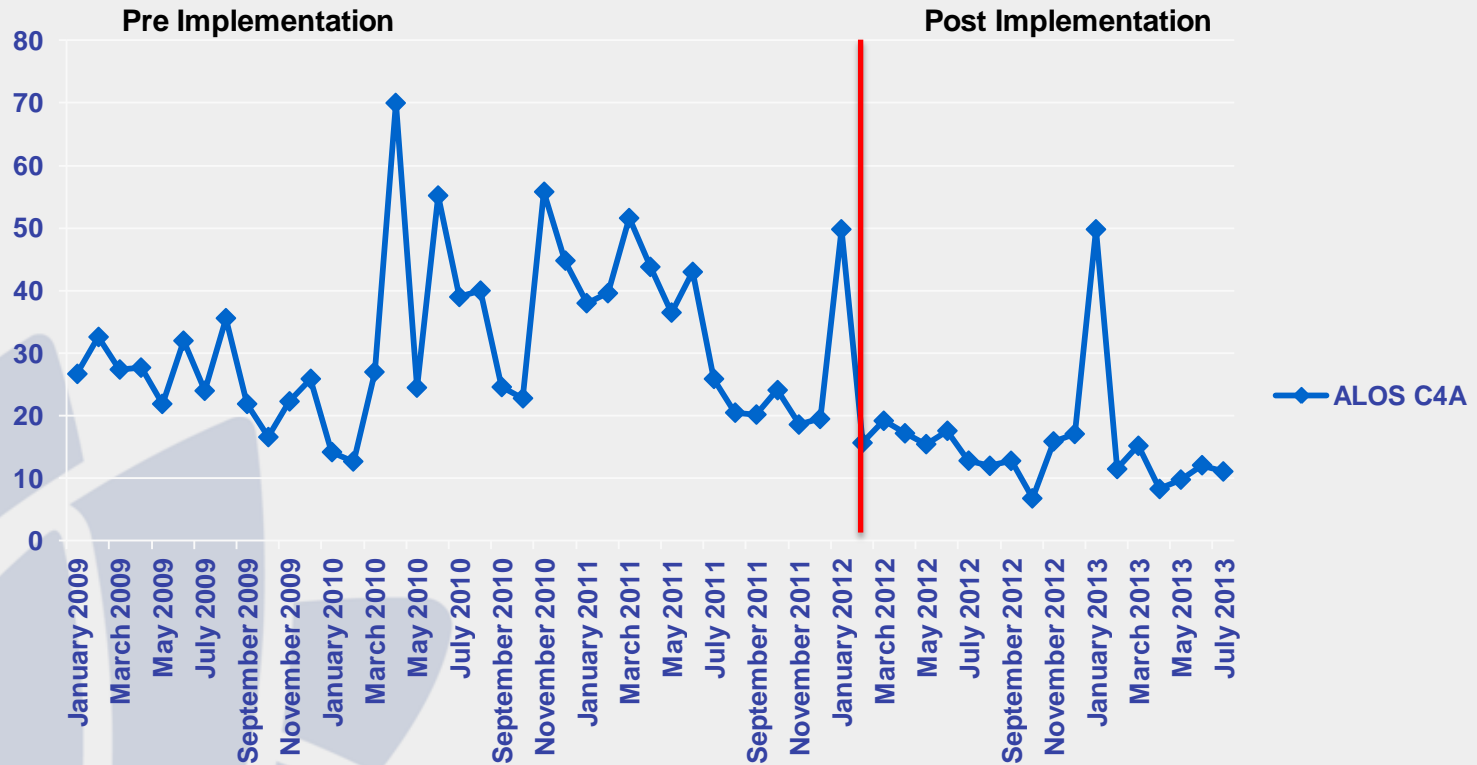
Results

- Streamlined contact for the Consultation liaison team
- Reduced LOS by 50% for MH patients in WMH ED including significant reduction for patients waiting >24hours (80%) for inpatient bed
- Increased access to inpatient mental health beds by 15 admissions per month (122%)
- Reduced LOS inpatient mental health unit by 18 days (50%)

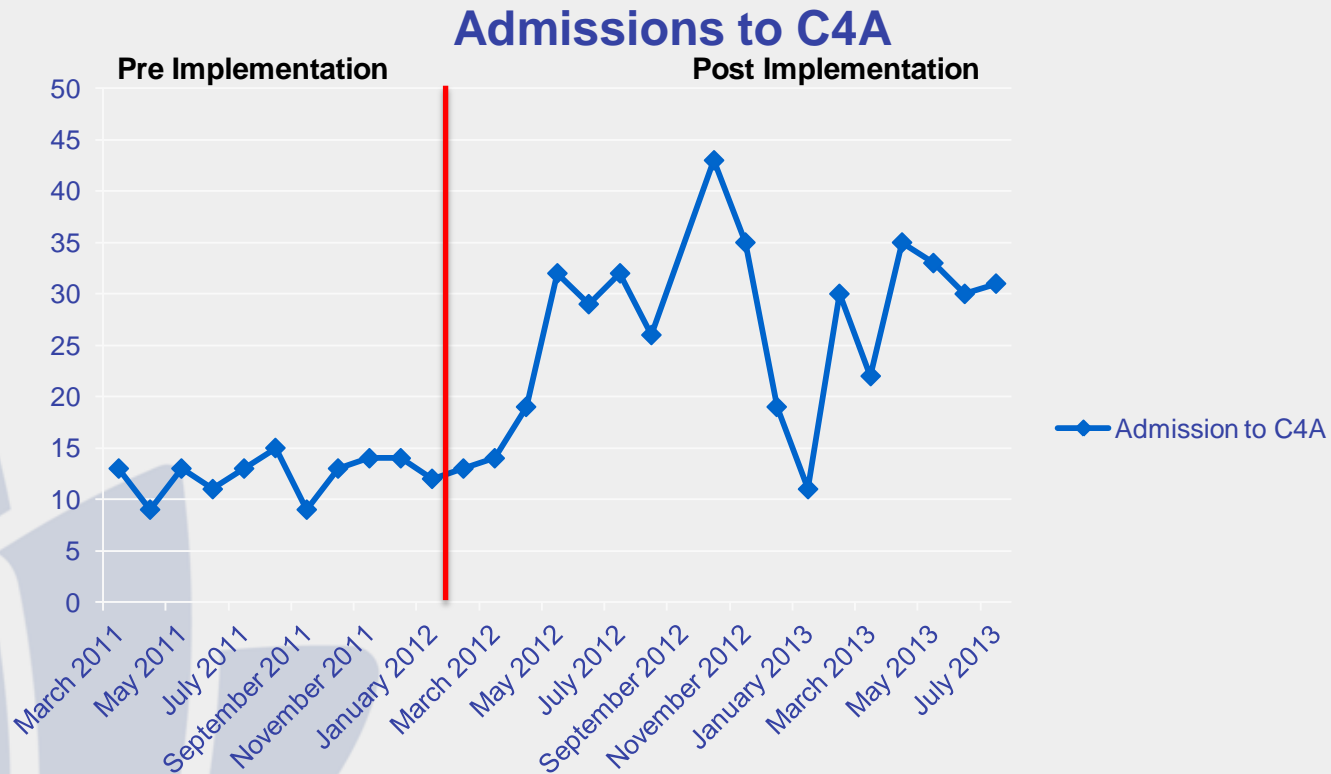


Results

ALOS C4A



Results



Key Learnings

- Value of strong clinical leadership and executive support
- Use of existing reporting mechanisms
- Communication i.e. involvement, message etc
- Don't underestimate the impact of small changes
- Importance of CR process in identifying issues and developing solutions



Remember



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