National Dashboards – can they improve patient flow?

- Samantha Riley, Head of Improvement Analytics

21st September 2018
Where we are now?

<table>
<thead>
<tr>
<th>Safety &amp; Quality Dashboard</th>
<th>May 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indicators</td>
<td>Previous Period</td>
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<tr>
<td>Health &amp; Safety</td>
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<td>Infection Prevention</td>
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<td>Medication Error</td>
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<td>Patient Safety</td>
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<td>Process Improvement</td>
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<td>Staff &amp; Training</td>
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<td>Effectiveness</td>
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<td>Efficiency</td>
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<td>Safety &amp; Quality</td>
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<td>Process Improvement</td>
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<td>Staff &amp; Training</td>
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</table>

ght Framework (Index 1)
Useful or distracting?

One month trend......

Is an increase from 95.36% to 95.76% important or distracting narrative?

**Safety & Quality Dashboard**

<table>
<thead>
<tr>
<th>COC Domain</th>
<th>Indicator</th>
<th>Previous Period</th>
<th>Previous Value</th>
<th>Latest Period</th>
<th>Latest Value</th>
<th>Difference</th>
<th>Trend over previous period</th>
<th>Trend post 10% downwards</th>
<th>2017/18 Total</th>
<th>2017/18 Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Care - Friends and Family Test - Would Recommend</td>
<td>January 2018</td>
<td>93.27%</td>
<td>February 2018</td>
<td>95.75%</td>
<td>2.46%</td>
<td>▲</td>
<td>▲</td>
<td>▲</td>
<td>94.31%</td>
<td>94.31%</td>
</tr>
</tbody>
</table>

Caring

7 Family and Friends Test (FFT) (data up to February 2018)

7.2 The Trusts 'Would Recommend' for Friends and Family returns increased to 95.76% for February 2018 from 95.36% in January 2018. The percentage of patients who stated they 'Wouldn't Recommend' decreased to 0.85% in February 2018 from 1.07% in January 2018.
Improving Access to Psychological Therapies – performance against target

<table>
<thead>
<tr>
<th>Metric</th>
<th>Target</th>
<th>Jan-17</th>
<th>Feb-17</th>
<th>Mar-17</th>
<th>Apr-17</th>
<th>May-17</th>
<th>Jun-17</th>
<th>Jul-17</th>
<th>Aug-17</th>
</tr>
</thead>
<tbody>
<tr>
<td>IAPT Treatment 18 Weeks</td>
<td>95%</td>
<td>100.0%</td>
<td>99.5%</td>
<td>99.9%</td>
<td>99.8%</td>
<td>99.4%</td>
<td>99.7%</td>
<td>99.6%</td>
<td>99.7%</td>
</tr>
<tr>
<td>IAPT Treatment 6 Weeks</td>
<td>75%</td>
<td>86%</td>
<td>84%</td>
<td>83%</td>
<td>81%</td>
<td>75%</td>
<td>80%</td>
<td>81%</td>
<td>81%</td>
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<tr>
<td>IAPT Recovery Rate</td>
<td>50%</td>
<td>59%</td>
<td>57%</td>
<td>54%</td>
<td>55%</td>
<td>54%</td>
<td>52%</td>
<td>55%</td>
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<tr>
<td>EIS First Episode Psychosis</td>
<td>50%</td>
<td>100%</td>
<td>100%</td>
<td>83%</td>
<td>63%</td>
<td>100%</td>
<td>89%</td>
<td>100%</td>
<td>85%</td>
</tr>
</tbody>
</table>
Making data count

IAPT recovery rate

EIS - First Episode Of Psychosis

IAPT Treatment 6 Weeks

IAPT Treatment 18 Weeks

Target

Actual

Mean

Actual

Mean

Actual

Actual

Mean

Lower Control Limit

Upper Control Limit

Target

Target

Lower Control Limit

Upper Control Limit


Did green provide true assurance?
Emergency Flow Improvement Tool

• Describes the flow from arrival to discharge at acute hospitals using indicators which have been selected to highlight demand, pinch points, and blocks

• Presents each indicator as a time series graph (xChart) processed against six statistical process control (SPC) rules to highlight common cause (expected) and special cause (unexpected) variation

• Contains a benchmarking feature to compare a trust against the other trusts in the tool

• Is provided as an improvement aid; allowing trusts and their stakeholders to visualise their data and prompt questions about their emergency flow
No RED or GREEN
What does each chart show?

Indicator title

Benchmarking icon

Latest activity value

Upper control line

Mean line

Lower control line

Blue – special cause variation improvement/reduced pressure

Grey common cause variation

Orange special cause variation cause for concern

Colour scheme indicates variation
Benchmarking ribbon
Evidence of improvement
Intervention = impact
Are action plans working?

19 / 28 indicators showing common cause

Improvements

Decline

A&E 4 hour performance (%)
Is the tool used?

- 134 provider trusts
- 13,000 hits since Sept 2017
Feedback

• “A huge amount of data around improvement exists, but this tool breaks it down in to operationally relevant categories and is actually what people who are working on the ground need”

• “We are using it to evaluate the efficacy of measures we are putting in place, for example on time to triage, we can see whether changes we are making are having the desired impact”

• “Having the categories set out clearly helps to identify where you are a negative outlier, so we know where to focus our efforts.”
How to access

The Emergency Flow Improvement tool is hosted on the model hospital portal

https://model.nhs.uk/

In the Emergency medicine compartment

Non Model Hospitals users should email NHSI.efit@nhs.net requesting access

Please contact NHSI.efit@nhs.net if you have any problems with access
Daily flow tool

Emergency flow improvement tool - daily SITREP

(Trust) Local NHS Foundation Trust (Current variation at 10 September 2019) - Click on a hospital site to see flow of SPC charts or "ALL" for trust wide view.

A & E 4 hour performance
- Number of patients arriving by ambulance
- Ambulance handovers over 30 mins
- Type 1 attendance seen within first 6 mins
- A & E attendances (Type 1)
- A & E attendances (Type 3)
- A & E 4 hour breaches (Type 1)
- Number of A&E patients streamed in less than 4 hrs wait breaches in co-located printer service
- A & E 4 hour performance (Type 1)
- Emergency Admissions
- Emergency Admissions via A&E
- Proportion of Admissions via A&E
- G & A Beds unavailable due to DTOX
- G & A Core bed stock open
- G & A Of open, number occupied
- G & A Total beds available open
- Beds occupied by stranded patients
- Beds occupied by extended Length of Stay patients

Variation
- Special Cause Concern
  - High
  - Low
- Special Cause Note/Investigate
  - High
  - Low
- Common Cause

Switch to monthly version

Variation Indicators
### Multi-site summary

**Emergency flow improvement tool - daily SITREP**

<table>
<thead>
<tr>
<th>Metric</th>
<th>A &amp; E performance</th>
<th>(A&amp;E)</th>
<th>e4h performance</th>
<th>(AMB)</th>
<th>AN</th>
<th>AMB</th>
<th>Type 1</th>
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Take away messages

• **Improvement** aid **NOT** a performance management tool

• **Diagnostic tool** to:
  • **Focus intervention**
  • **Avoid** being **distracted** by normal variation

• Provides a **starting point** for a conversation

• Can be used to evidence whether **solutions** are having a **positive impact**

• **Local knowledge** and **context critical**

• Please let us know what you are learning from using the tool and what changes you are making!
DTOC Improvement Tool

Identifies changes over time

https://improvement.nhs.uk/resources/delayed-transfer-care-dtoc-improvement-tool/
Red2Green – understanding delays

The Red2Green tool is designed for use on individual wards. It allows staff to capture the reasons that patients are delayed in their journey through hospital.

The wards can set up the tool to suit their particular number of beds or chairs.

The results are fed into a dashboard which summarises a number of metrics including the delay reasons. The report can be interrogated by month or week

https://improvement.nhs.uk/resources/red2green-improvement-tool/
Free SPC tools: frontline staff

https://improvement.nhs.uk/resources/statistical-process-control-tool/
Thank you!

- Samantha.riley1@nhs.net
- @samriley
- #plotthedots