MIDLANDS REGIONAL HOSPITAL, MULLINGAR

TIME-WHAT PATIENTS LISTENING RESPONDING **SCALE** SAID TO US & IMPROVING **ADMISSION** PATIENT 1. Regional Hospital Mullingar are working together with IEHG group service ON-GOING EXPERIENCE: improvement programme, to improve patient flow and reduce patient wait TO HOSPITAL Improving patient times. This initiative involves streaming patients to the appropriate areas for experience of ED. medical assessment, diagnostic investigation and intervention if required. > 廊 2. During the hours of Streaming, patients are greeted at point of entry by a ON-GOING senior nurse/decision maker and depending on patient suitability in line with the criteria set by Clinical Director for the Acute Medical Assessment Unit (AMAU). If the criteria are met, the patient will be directed to the AMAU therefore resulting in avoiding the Emergency Department. The right patient in the right place at the right time receiving the right treatment 3. The hospital and local community services have come together to identify ON-GOING priorities for improving care with a particular emphasis on acute floor access (ED and MAU), the admission process and improving communication with community partners. Key priorities are to develop standardised processes to ensure identification of frailty at the front door with a rapid and robust response mechanism. The Mullingar team are achieving 100% screening of all presentations to ED aged 75 years and over with screening now fully embedded in the triage process which triggers a Comprehensive Geriatric Assessment (CGA). It is planned for other Health and Social Care Professionals to attend the Emergency Department to perform assessments on patients at an earlier point of the patient pathway to further improve the patient experience during their hospital stay. **NUTRITION: CARE ON** 1. Improving choice, nutritional value and availability of meals for patients is ON-GOING **THE WARD** Improve hospital the focus of the Hospitals Nutrition and Hydration Committee and initiatives food and nutrition. involving a replacement meal if you have missed a meal, protecting time for patients to have their meals and scheduling of meal times are in progress. **EXAMINATION COMMUNICATION:** 1. The hospital's Person Centredness Programme are planning to introduce the Q4 2019 Improve access Shared Decision Making Process to promote patients, their families and staffs **DIAGNOSIS &** and information involvement in shared decision making on their care. **TREATMENT** for patients when discussing their care and treatment with a doctor. COMMUNICATION: 2. Introduction of the Shared Decision Making Process through the Person ON-GOING Improve the patient's Centredness Programme for greater interaction between staff, patients and confidence and their families to build on a foundation of trust. trust of healthcare 3. Continue involvement in the '#Hello, my name is...' initiative with all new staff professionals providing their care provided with badges on commencement of employment. **DISCHARGE** COMMUNICATION: 1. Up to 100 Patient Information Leaflets or Guides for patients have been NOV 2018-Improve access and developed. OR TRANSFER FFB communication of 2019



patient information

regarding managing

their condition after their discharge.

discharge.

2. Revision of the Patient Discharge Leaflet is ongoing with emphasis on

Work continues on the expansion of the Hospital website with links to patient information currently being explored along with making the Leaflets available on the Shared Drive on each Ward Desktop for ease of access for Ward staff.

Discussions with Managers and their staff to commence to ensure all relevant information available is provided to patients during their stay and prior to their

information on whom to contact should patients have concerns.