

 **ADMISSION TO HOSPITAL**

AREA FOR IMPROVEMENT	SPECIFIC QIP	QIP ACTIONS	WHAT WILL IMPROVE?	TIMELINE
Improve patient flow and reduce waiting times to be seen in the Emergency Department from check in at reception desk through to admission to a ward or discharge from the department.	<ul style="list-style-type: none"> <li>Waiting times in the Emergency Department.</li> </ul>	<ul style="list-style-type: none"> <li>Revision of unscheduled care committee (Q3 2022) – Integrated USC group with CHO8 &amp; primary care involvement established.</li> <li>Process mapping exercise to document actual and ideal patient flows through the ED.</li> <li>QIPS developed to address bottlenecks/ inefficiencies identified through process mapping.</li> <li>QIPS piloted and implemented.</li> <li>Recruitment of additional staff to the Emergency Department.</li> <li>Capacity planning for the Emergency Department – working with HSE estates in developing the acute floor footprint as well as working with CHO8 in developing a local injury unit (Q4 2024).</li> </ul>	<ul style="list-style-type: none"> <li>Improved patient flow through the Emergency Department.</li> <li>Reduction in waiting times to be seen in the ED.</li> <li>Improved patient satisfaction.</li> <li>Improved PET times.</li> </ul>	Q2 2023

 **DISCHARGE OR TRANSFER**

AREA FOR IMPROVEMENT	SPECIFIC QIP	QIP ACTIONS	WHAT WILL IMPROVE?	TIMELINE
Improve communication between hospital staff and service users about potential medication side effects upon discharge.	<ul style="list-style-type: none"> <li>Communication about medication side effects.</li> </ul>	<ul style="list-style-type: none"> <li>World Patient Safety Day awareness campaign on Medication Safety. Scheduled for 15th September 2022 – WHO's focus for 2022 is med safety.</li> <li>Develop report document on results of 2022 NCES survey.</li> <li>Communicate results of 2022 NCES with all staff.</li> <li>Establish multidisciplinary hospital discharge working group (to include Consultant lead, ADON patient flow, med safety pharmacist, bed management, DNMs, CNMs, QPS, NCHD lead).</li> </ul> <p><i>(continued on next page)</i></p>	<ul style="list-style-type: none"> <li>Increased staff awareness on the importance of effective communication with service users regarding medication safety on discharge.</li> <li>Empowerment of service users to be involved in their care.</li> <li>Improved communication between healthcare providers and service users about medication safety.</li> <li>Streamlined and efficient discharge process including information provided to service users.</li> </ul>	Q2 2022



## DISCHARGE OR TRANSFER

AREA FOR IMPROVEMENT	SPECIFIC QIP	QIP ACTIONS (CONTINUED)	WHAT WILL IMPROVE?	TIMELINE
Improve communication between hospital staff and service users about potential medication side effects upon discharge.	<ul style="list-style-type: none"> <li>Communication about medication side effects.</li> </ul>	<ul style="list-style-type: none"> <li>Working group to carry out full review of discharge process with particular focus on communication about med safety – process mapping, QIPS developed as a result of process mapping exercise to address gaps identified.</li> <li>Develop plan for roll out of National Healthcare Communication Programme.</li> <li>Review of medication reconciliation arrangements for patients due for discharge &amp; QIPS developed.</li> </ul>		Q2 2022
To develop a discharge information leaflet to be given to all patients on their discharge from MRHT.	<ul style="list-style-type: none"> <li>Information resources for service users.</li> </ul>	<ul style="list-style-type: none"> <li>Develop report document on results of 2022 NCES survey.</li> <li>Communicate results of 2022 NCES with all staff.</li> <li>Develop discharge information leaflet containing info on med safety &amp; danger signals to be aware of (discharge working group – see QIP 1).</li> <li>Info leaflet to be approved by D+T committee and then clinical governance committee.</li> <li>Pilot of use of information leaflet on one ward. <b>Note:</b> A medical ward will be chosen to pilot the leaflet before full rollout through the hospital. <b>Reasons for choosing a medical ward:</b> <ol style="list-style-type: none"> <li>The majority of our IP discharges are from medical wards; and</li> <li>Most of hospitals NCES survey responses are from patients discharged from medical wards (64.5%).</li> </ol> </li> <li>Roll out of discharge information leaflet to all wards.</li> <li>Develop audit plan on usage of PIL.</li> </ul>	<ul style="list-style-type: none"> <li>Increased service user awareness on their care following discharge.</li> <li>Improved communication between healthcare providers and service users.</li> <li>Streamlined and efficient discharge process including information provided to service users.</li> <li>Increased service user satisfaction.</li> </ul>	Q2 2022