



Naas General Hospital



'Red2Green' multidisciplinary huddle improves patient flow and inpatient length of stay

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Naas General Hospital

Quality Initiative Overview

Background

- R2G is an NHS patient Flow Concept - adapted for local use
- Multidisciplinary Steering Group
- Phased roll out commenced in August 2020

Key Aims

Improve the inpatient experience with a focus on;

- Reducing Length of stay
- Reducing Delayed discharges
- Reducing Bed Days Used



Red2Green MDT Huddles

Daily MDT huddles at ward white boards:

- 8.40am, 15 minutes
- Discuss care plan for each patient (n=31)
- Set predicted discharge date for each patient
- Proactively address any patient flow issues
- Support HSCP referrals
- Support prioritisation of diagnostics
- Determine Red/Green status for each patient

Consultant	P.D.D.	Transport	Physio	O.T.	Dietetics	SALT	Discharge Planner	TVN	Social Work	Pharmacy	Room No.
	16/4										1
	15/4		N	N							2
	16/4										3
	15/4										4
	19/4							*			5
	19/4										6
	15/4		N	N							7
	15/4										8
	14/4										9
	DTOC 15/4										10
	DTOC 15/4										11
	15/4										12
	15/4										13
	14/4										14
	14/4										15
	15/4										16
	15/4		*								17
	16/4								*		18
	14/4										19
	14/4										20
	15/4										21
	15/4										22
	15/4		*								23
	15/4		*								24
	14/4										25
	16/4										26
	19/4							*	*		27
	15/4							*	*		28
	15/4										29
	15/4										30
	14/4								*		31
	14/4										

R2G Whiteboard

A **Red** Day is when the patient no longer requires care in the acute setting OR there are delays

A **Green** Day is when the patient requires an acute level of care

RESULTS

“Q4 2019+Jan 2020” v “Q4 2020+Jan 2021”

Avg Length of
Stay reduced by
3.4 days

Delayed Transfer
of Care reduced
by over 50%

Admissions >30
days reduced by
over 50%

Bed Days Used
reduced by 23%

Increased admission
and discharge activity
by approx. 20%

DISCUSSION

Strengths

- Patient flow efficiencies
- Improved MDT communication and teambuilding
- MDT and bed management meetings restructured
- Response to service user feedback

Challenges

- Impact of COVID-19
- Stakeholder engagement

Conclusion

- Improvements in: Avg. LOS and >30 LOS, Transfer delays, Bed days, referral response
- Established daily practice
- Excellent engagement from MDT- positive staff feedback
- Ongoing PDSA analysis to drive further improvements and service planning

