

### Case for Change

The growing Sutherland Shire community has led to an increase in the number of Emergency Department presentations, resulting in the service becoming overwhelmed. Combined with an increasing and ageing population, with an associated increase in chronic and complex disease, the New South Wales government has invested \$88.5 million for infrastructure renewal and upgrade at The Sutherland Hospital (TSH).



Loss of 20 inpatient beds due to Hospital theatre redevelopment



53%

Admitted Emergency Treatment Performance (ETP)

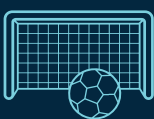


Hospital avoidance models exist but alternative Hospital level care models are limited



Provide the capacity for patients to elect to continue care at home

### Goal



Reduce avoidable admissions for >18 years old to TSH by 5% for patients presenting to the emergency department (category 4 & 5), enabling safe and timely discharge and improving the use of alternate care pathways where appropriate by December 2023.

### Objectives

- Increase admitted Emergency Treatment Performance for >18 years old at TSH from 53% to 63% for category 4 & 5 ED triages by December 2023
- Reduce triage category 4 and 5 emergency department presentations for >18 years old by 5% by December 2023
- Reduce Hospital-acquired Complications (targeting falls / infections / pressure injuries) from 50th percentile to the 25th percentile (HRT peer hospital ranking) for category 4 & 5 ED triages by December 2023.

### Method

<b>Data Collection</b> HRT / SESLHD CIA / BHI / PwC	<b>Service Mapping</b> 8 Services Mapped	<b>Staff Interviews</b> (n = 20)
<b>Focus Group Sessions</b> (n = 6)	<b>Data Analysis &amp; Root Cause Analysis</b>	<b>Brainstorming Sessions</b>
<b>Solutions prioritisation &amp; voting</b>	<b>Literature Review &amp; Benchmarking</b>	<b>Patient Interviews</b> (n = 10)

### Diagnostics - Key Issues

Diagnostics started with a focus on 3 main areas:



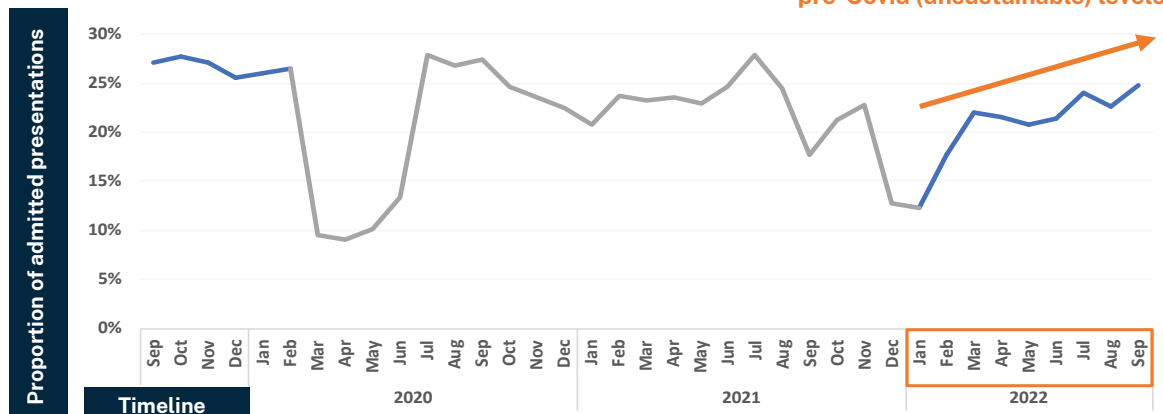
However data analysis showed a **high volume of low acuity** ED presentations are **being admitted**. This enabled a focus of the redesign project on Emergency Department referral pathways, as it became evident that the data reflected capacity to influence patient journeys and experience for **Category 4 and 5 triaged patients**.

### Findings & Concerns

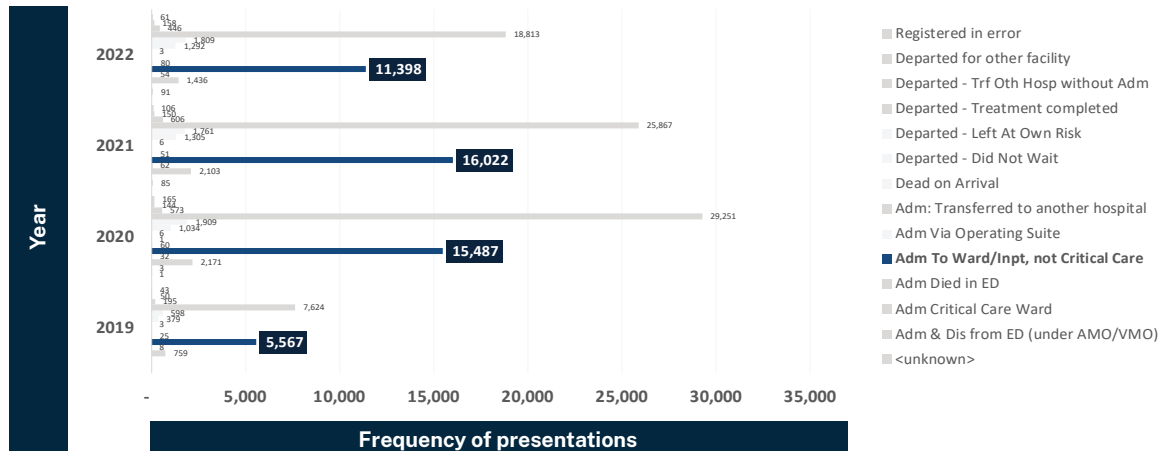
- Reduction in beds
- High admission rate (particularly out of hours)
- High staff turnover in ED
- Confusion regarding referral pathways
- COVID Impact
- No HITH Service

### Proportion of ED presentations (triage 4 and 5) being admitted

18 years and above only

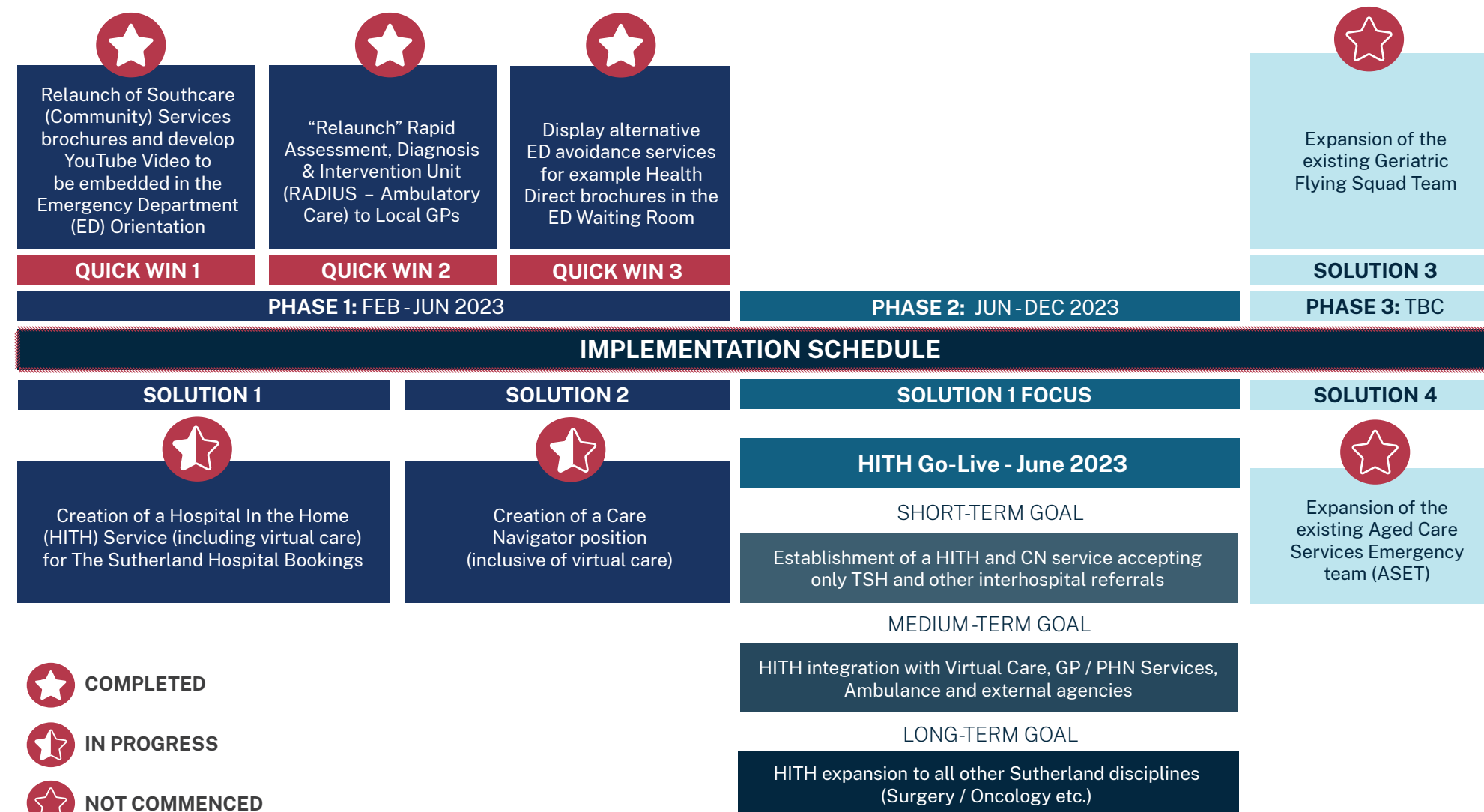


### Mode of separation for ED Presentations



### Solutions – Implementation Schedule

A collaborative and co-design approach (including various focus group sessions with key departments, staff and committee meeting sessions), resulted in the development of 4 solutions and 3 quick wins to be implemented.



### Sustaining Change

- Solutions 1 and 2 have been submitted as part of the hospital winter planning strategy and has been included throughout all major hospital business plans and strategies as a priority
- Solution and Quick Win owners were identified early and engaged closely with the Project Team, Working Group and Steering Committee
- Stakeholder mapping for each solution enabled a strong targeted communication plan, built into the Implementation Schedule
- Ongoing evaluation of the project including process, outcome and impact will continue to be performed through a robust data collection plan, implementation schedule and sustainability model
- A comprehensive reinforcement strategy has been developed for each solution with the solution owners and sponsors and built into the implementation schedule.

### Lessons learnt

- The ACI and UTAS academic writing requirements will differ from the organisation written deliverables. Reconciling Redesign method and local practices through understanding of each frame of reference is essential
- Scope to consider availability of local resources
- Build in contingency in the timelines
- Redesign Coaches are the key to success
- Stakeholders mapping and sustained engagement underpinned by a strong communication plan are critical to gain buy-in, and lay the foundation for a successful implementation

### Acknowledgements

- The Sutherland Hospital Staff (particular thanks to Southcare, RADIUS and ED Staff)
- Redesign Advisory Committee Members
- HITH Working Party Members
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