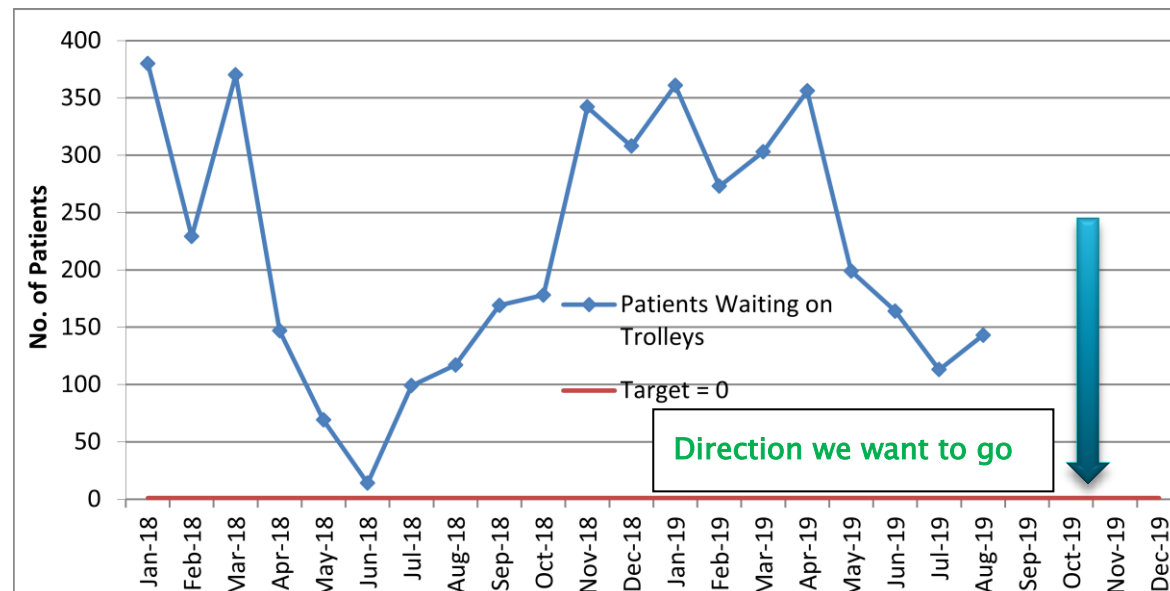
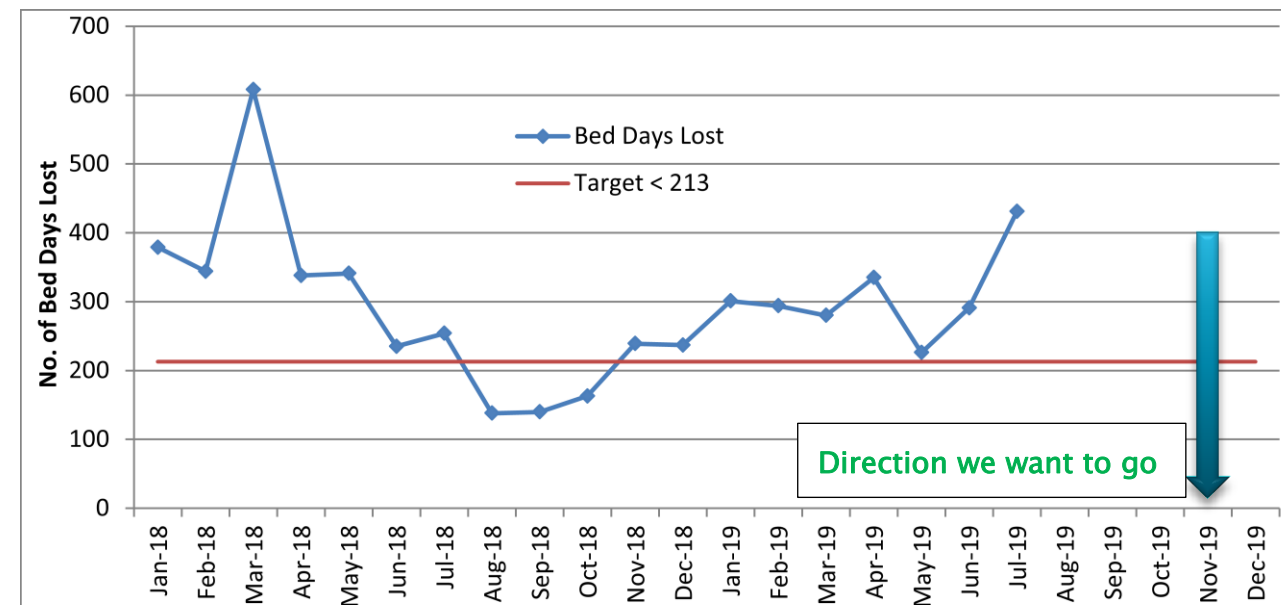




Patients Waiting on Trolleys for an Inpatient Bed



Patients who are Medically Fit to be discharged and cared for at Home with Support or in a Nursing Home or District Hospital but still in MUH



Medical Re-Admissions Rates



What does this mean?

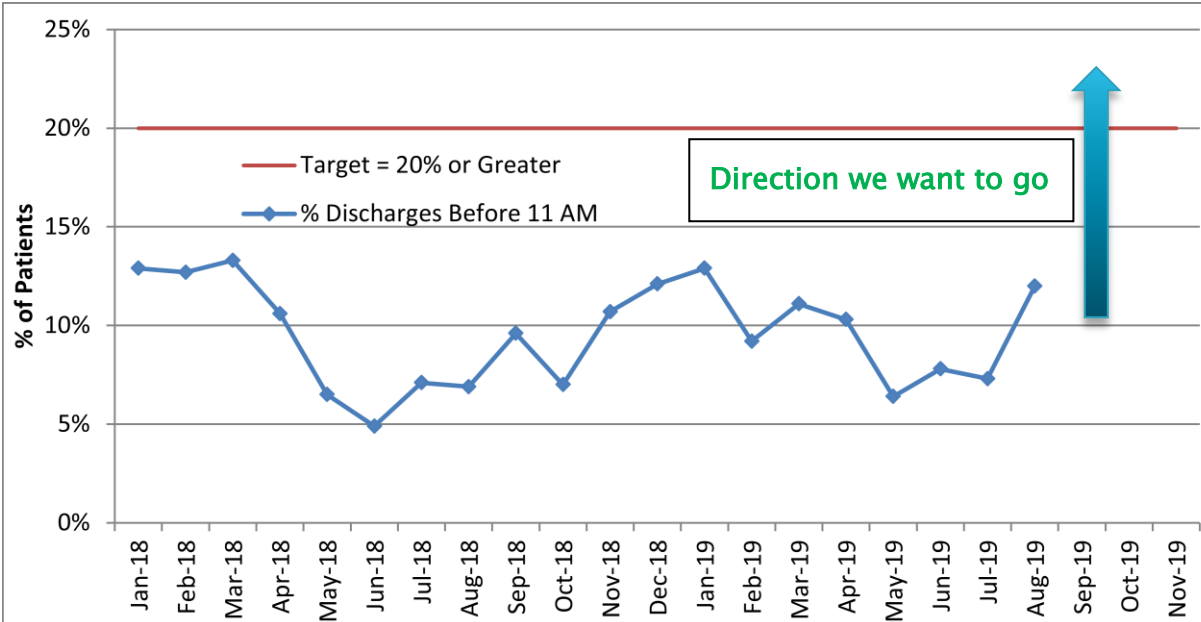
The aim of MUH is to get the right patient into the right bed for the right care. The numbers of patients waiting on a trolley for an inpatient bed is affected by the number of patients who are ready to be discharged to home with support or to a non-acute bed e.g. a nursing home or district hospital.

If a patient represents to MUH in an unplanned unexpected fashion within 30 days a review of the reasons will take place. MUH's aim is to prevent all avoidable re-admissions.

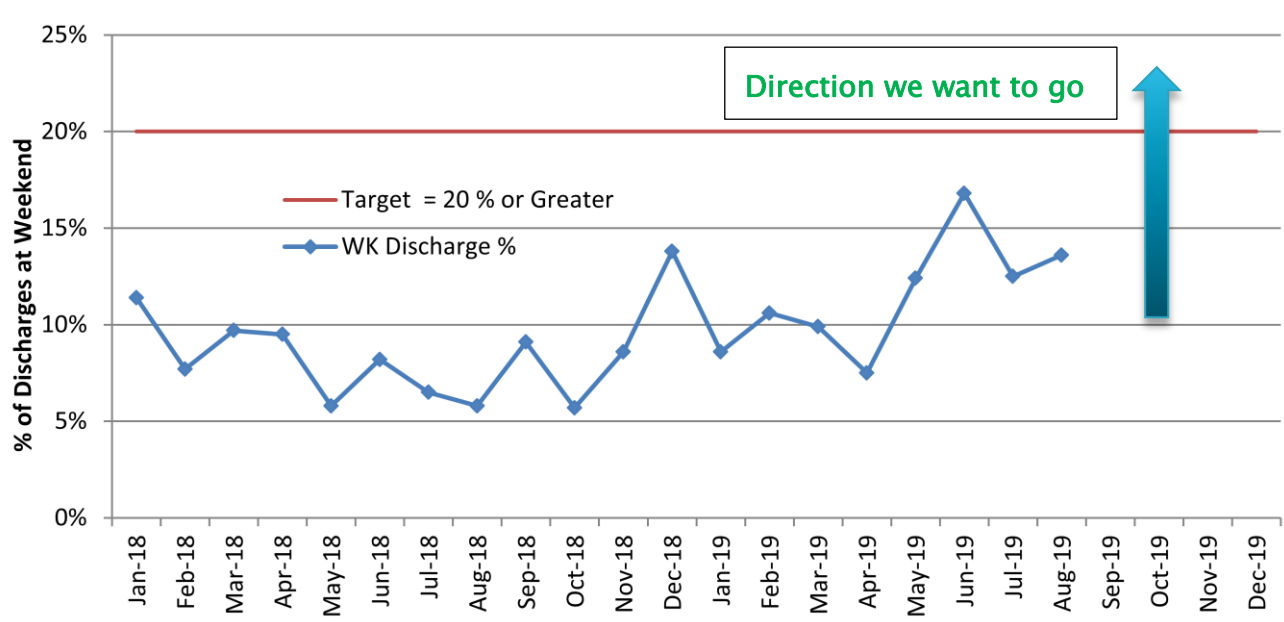
Please Note: Bed Days Lost as a result of delayed discharges was adversely affected as a result of the knock-on effects of Storm Emma in March.



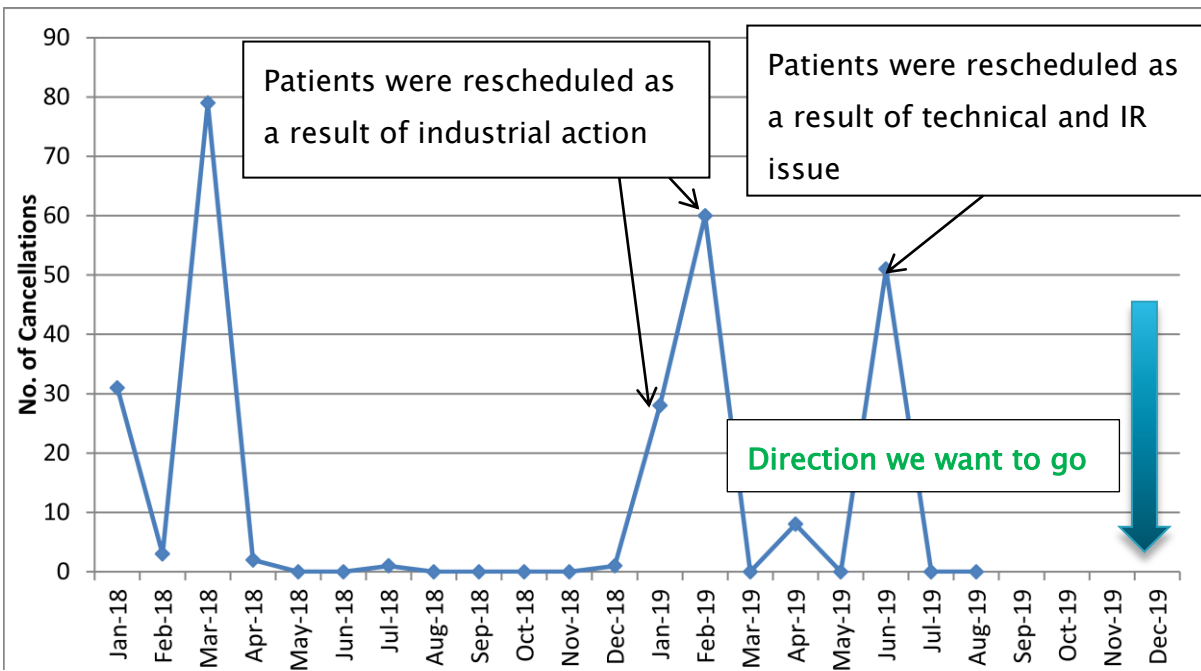
Patients Discharged and Ready Before 11 AM



Patients Discharged on Saturday and Sunday



Number of Patients Cancelled by Hospital due to bed availability



What does this mean?

Early Discharges before 11 am means we can allocate beds to those waiting overnight.

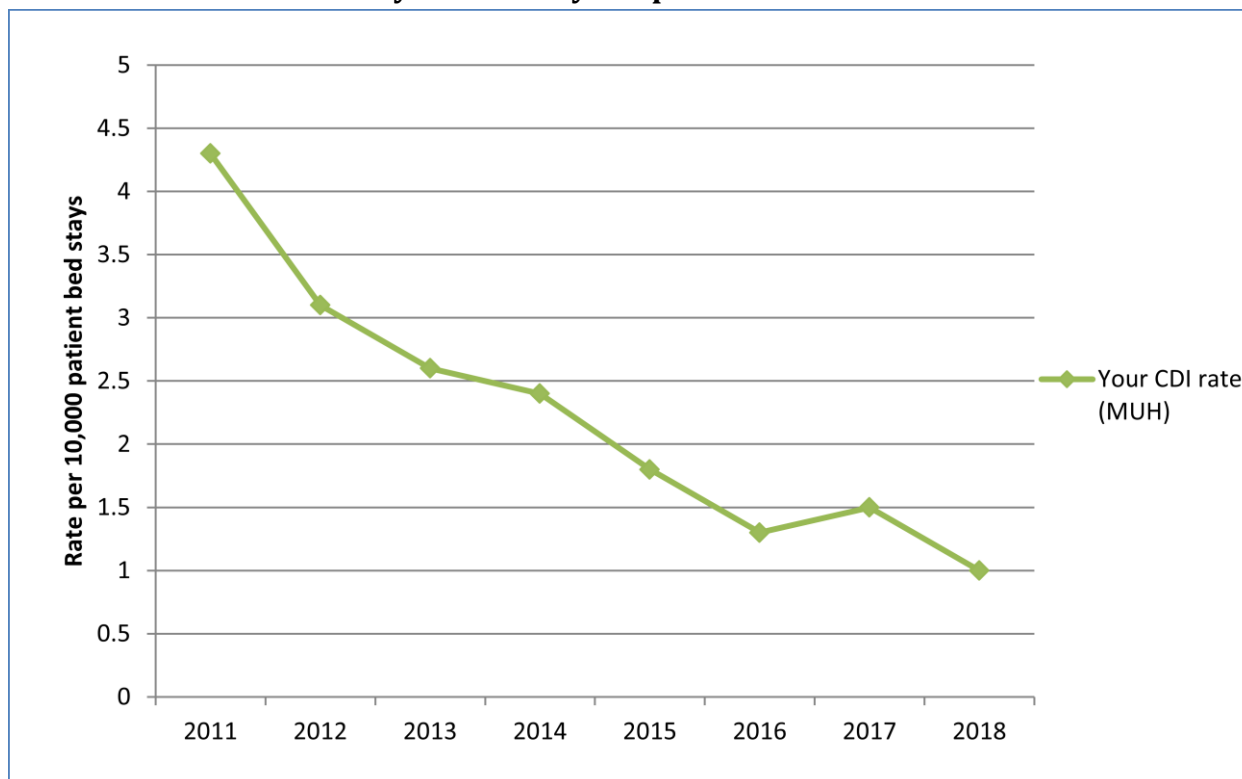
Weekend Discharges help with Patient Flow on Monday and prevent Electives being cancelled.

Please note: The majority of hospital cancellations in March 2018 were due to Storm Emma.

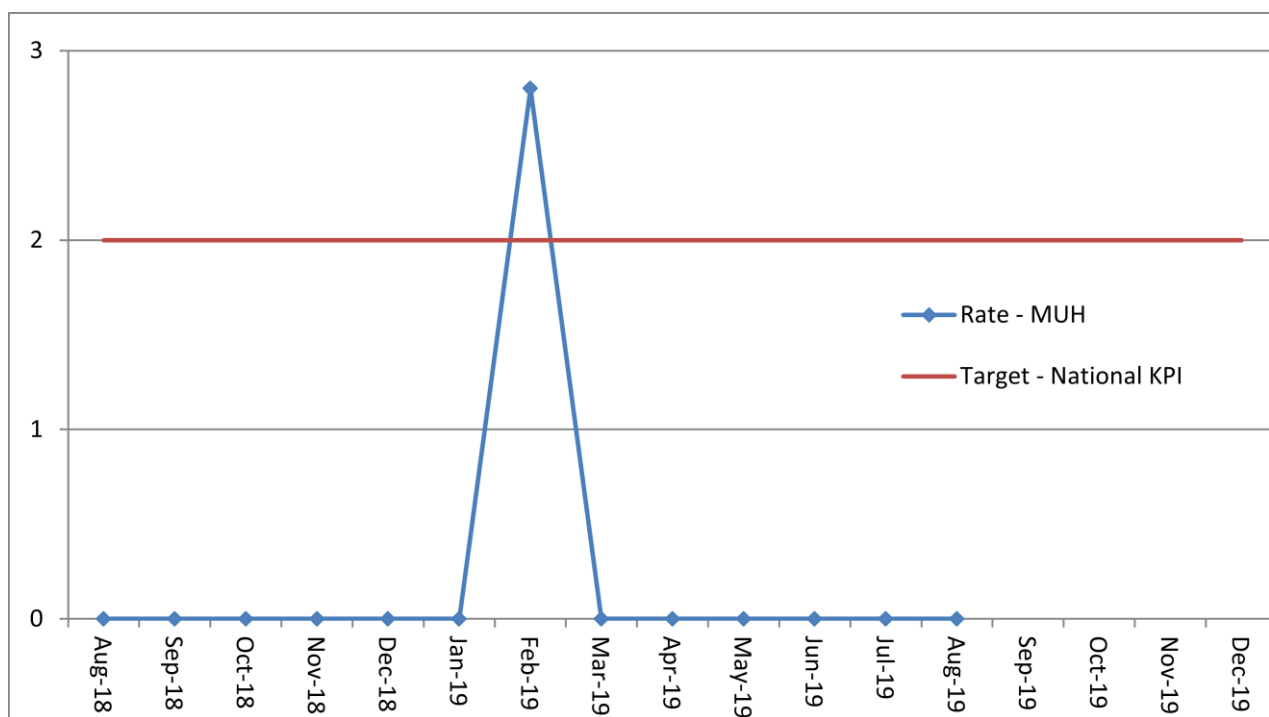
Reducing Clostridium Difficile infections in Mayo University Hospital

Updated September 2019

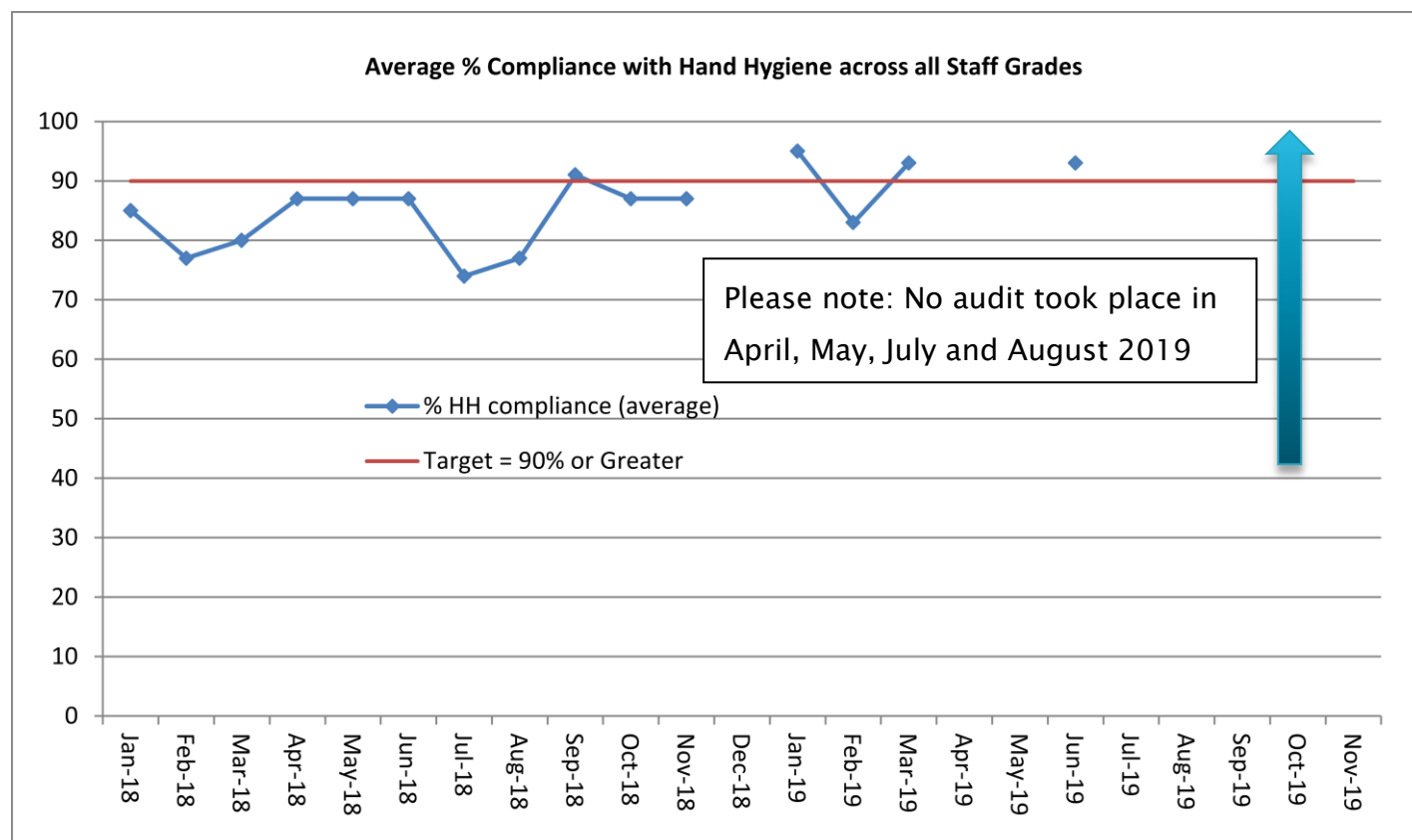
Annual C. difficile infections (CDIs) in Mayo University Hospital 2011 - 2018



C. difficile infections (CDIs) in Mayo University Hospital Aug '18 - Aug '19 (rate per 10,000 bed days)



MUH Commitment to Quality Care through Hand Hygiene and Environmental Audits **Updated September 2019**

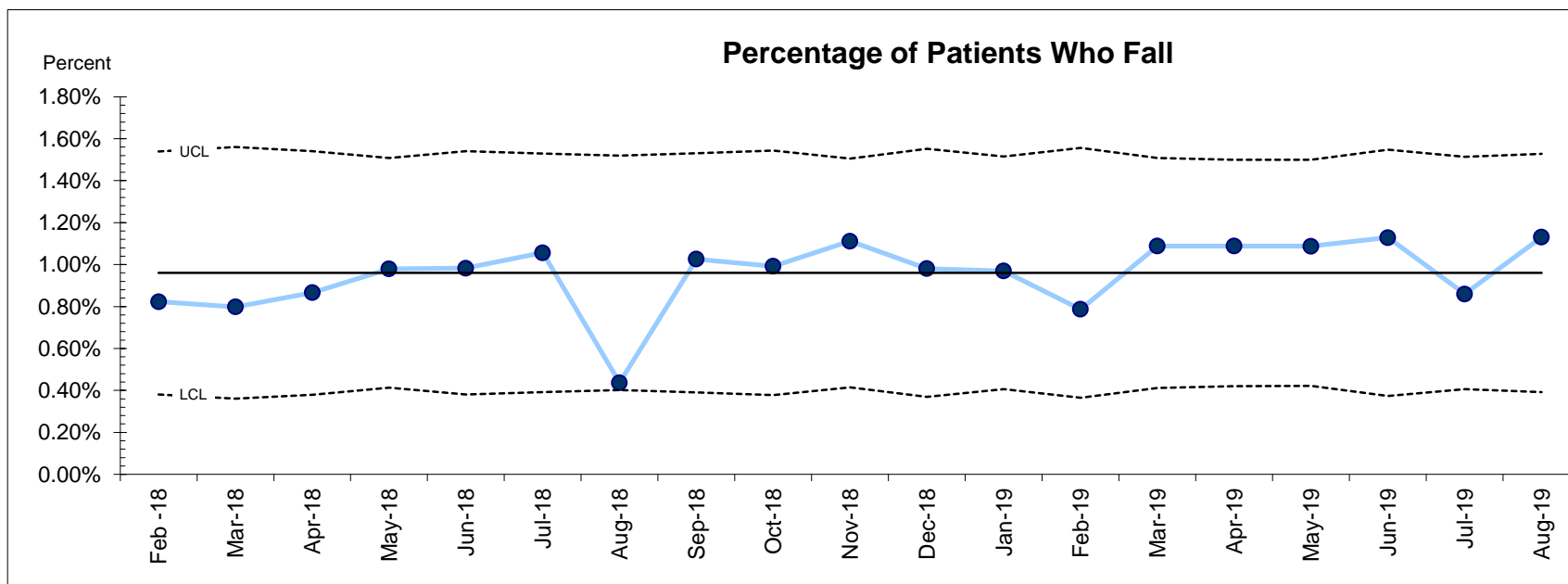


What does this mean?

- **Appropriate Antibiotic Prescribing –**
 - *Pharmacists regularly audit use of antibiotics to ensure if the antibiotic is necessary, the correct type of antibiotic by the correct route (IV or Oral) for the correct duration.*
 - *Benefits include reduction of C.diff rates and line infections, reduced length of stay and Cost savings*
- **Effective prevention and control of Healthcare-associated Infections HCAI requires a multi-targeted approach .**
Some ways of reducing Healthcare Infections include:
- **Effective hand hygiene – Education and audit of all staff**
 - *100% of Doctors including ALL Consultants have undertaken Hand Hygiene training in the past 2 years as required*
 - *Aim to have compliance of at least 90 % on Audit*
- **Clean environment –**
 - *Audit of all clinical areas identifies shortcomings and actions are taken to rectify deficiencies*
 - *Aim to have compliance of at least 85%*

Quality Improvement in Falls Prevention and The Management of Fallen Patients- updated September 2019

This chart shows the percentage of falls in relation to patients discharged from MUH. We have a high rate of over 65 year old patients admitted to MUH and this correlates with the increasing age profile of the population of patients we care for.



FALLS - HOW TO PROTECT YOURSELF

FALLS PREVENTION AND MANAGEMENT GROUP, MAYO UNIVERSITY HOSPITAL

Have your medications checked regularly. Take special care if you are dizzy or light-headed. Ask your doctor about your bone health.

Posters on display in clinical areas please read and talk to staff about falls prevention

TO PREVENT FALLS?

There is no single reason why people fall. A fall usually occurs when several events happen at the same time. The causes of falls are often called risk factors.

If you have had a fall talk to your doctor, nurse or therapist about what caused the fall and what you can do to reduce your risk of falling. There are some simple tips to help you prevent falls in your home.

Check around your home for hazards

Here is the most common place for older people to fall. You can often make some simple and inexpensive changes to make your home safer.

• Remove or repair hazards on both sides of stairs.
• Clear clutter from walkways and stairs.
• Remove carpet or rugs that might cause you to trip.
• A handgrip device allows you to alert your loved ones if you have fallen. Talk to your GP, Public Health Nurse about this.
• Ask your GP to refer you to an occupational therapist to assess your home and advise you how to make it safer.

WHAT TO DO AFTER A FALL

If you CAN get up: Remove any objects that might cause you to trip. If you CANNOT get up: Call for help. If you are a WITNESS: Help the person who has fallen. If you are a WITNESS: Call for help.

Some hints which may help you in the event of a fall:

1. Stay on the floor. 2. Stay on the floor. 3. Stay on the floor. 4. Stay on the floor. 5. Stay on the floor. 6. Stay on the floor. 7. Stay on the floor. 8. Stay on the floor. 9. Stay on the floor. 10. Stay on the floor.



What does this mean?

What is a fall?

A fall is defined as an event which results in a person coming to rest inadvertently on the ground or floor or other lower level.

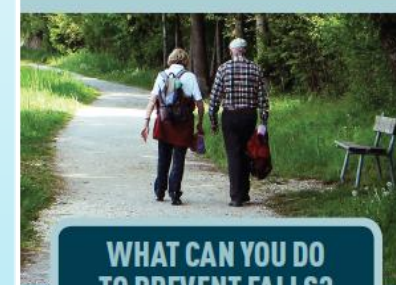
Harm caused

In August 2019, there were 2 patients that had repeat falls; these patients were predisposed to falls due to pre-existing medical complaints. Immediate care was given to these patients. A falls review was undertaken to identify any contributory factors, and actions were taken.

Actions we have implemented

Policy on identification, assessment, prevention and management of patient falls, New falls assessment, care plan and bed rail risk assessment; Purchased ultra-low beds, one in each of the main clinical areas and falls prevention alarms; The Red Star initiative to identify patients at risk of falling; Information leaflet for health care worker; The actions to take when a patient falls are included in MUH patient safety book; Education on correct use of seating to prevent falls; Multidisciplinary MUH Falls Education DVD.

FALLS - HOW TO PROTECT YOURSELF



WHAT CAN YOU DO TO PREVENT FALLS?

There is no single reason why people fall. A fall usually occurs when several events happen at the same time. The causes of falls are often called risk factors. If you have had a fall talk to your doctor, nurse or therapist about what caused the fall and what you can do to address your risk factors.

Leaflet available on wards. Please talk to staff about falls prevention