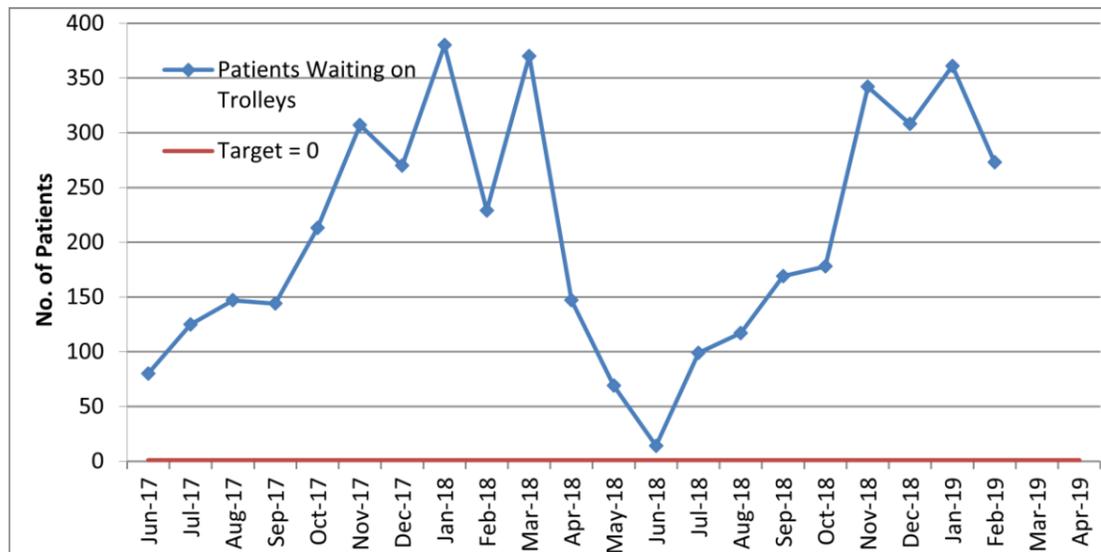
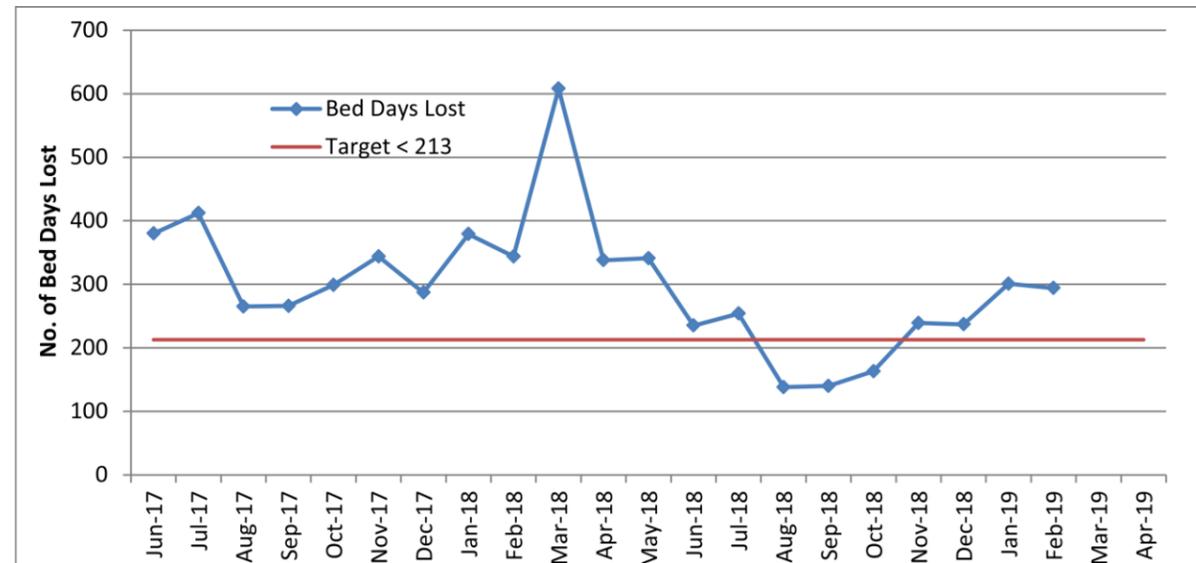




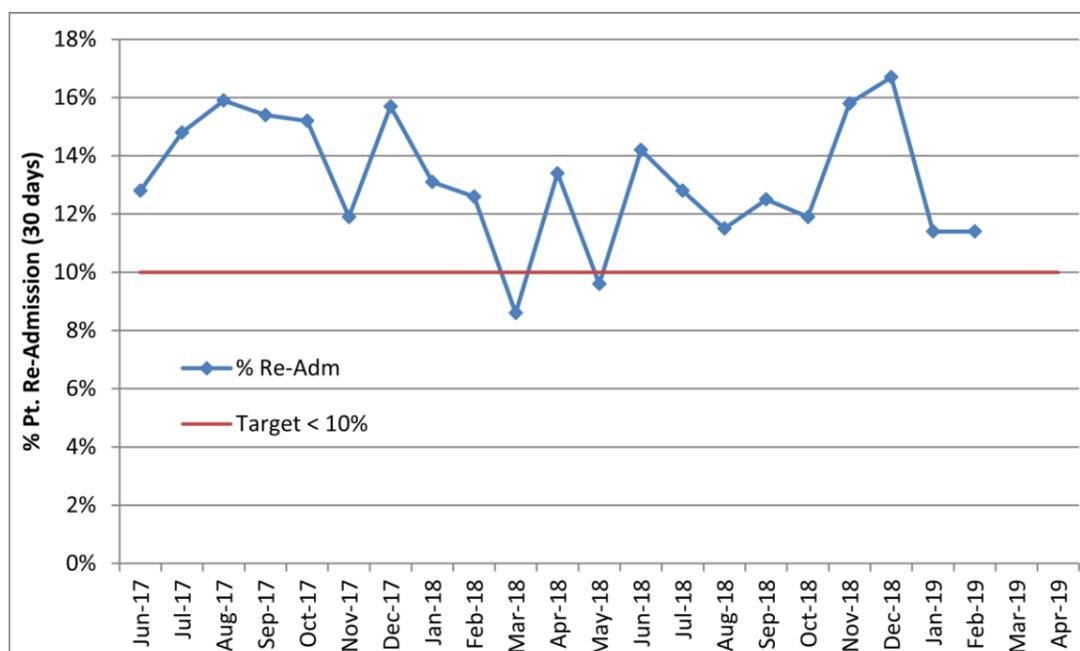
Patients Waiting on Trolleys for an Inpatient Bed



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?

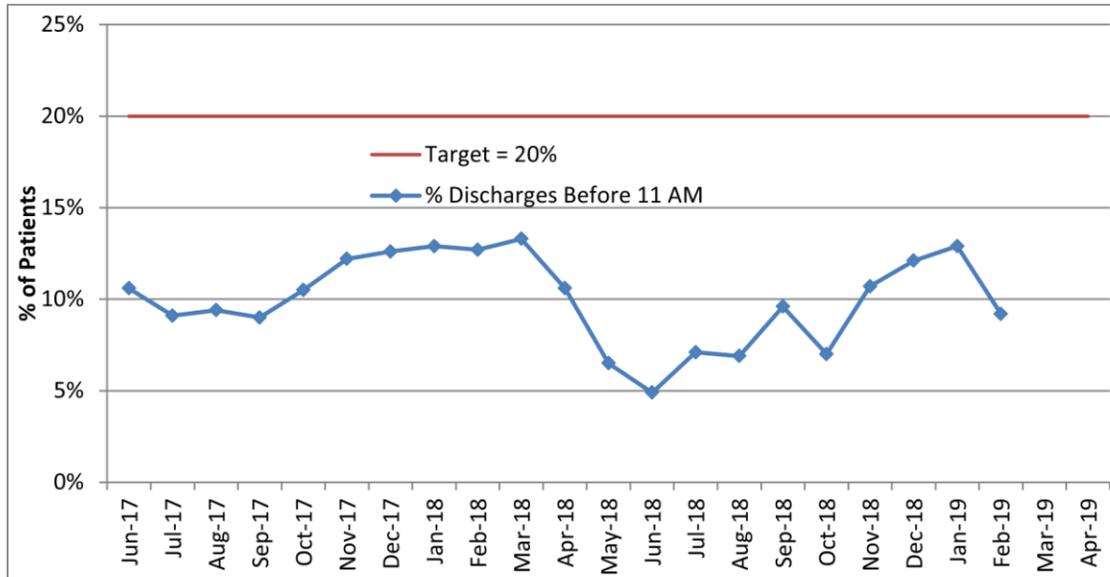
The aim of MUH is to get the right patient into the right bed for the right care. The numbers of patients waiting on a trolley for an inpatient bed is affected by the number of patients who are ready to be discharged to home with support or to a non-acute bed e.g. a nursing home or district hospital.

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.

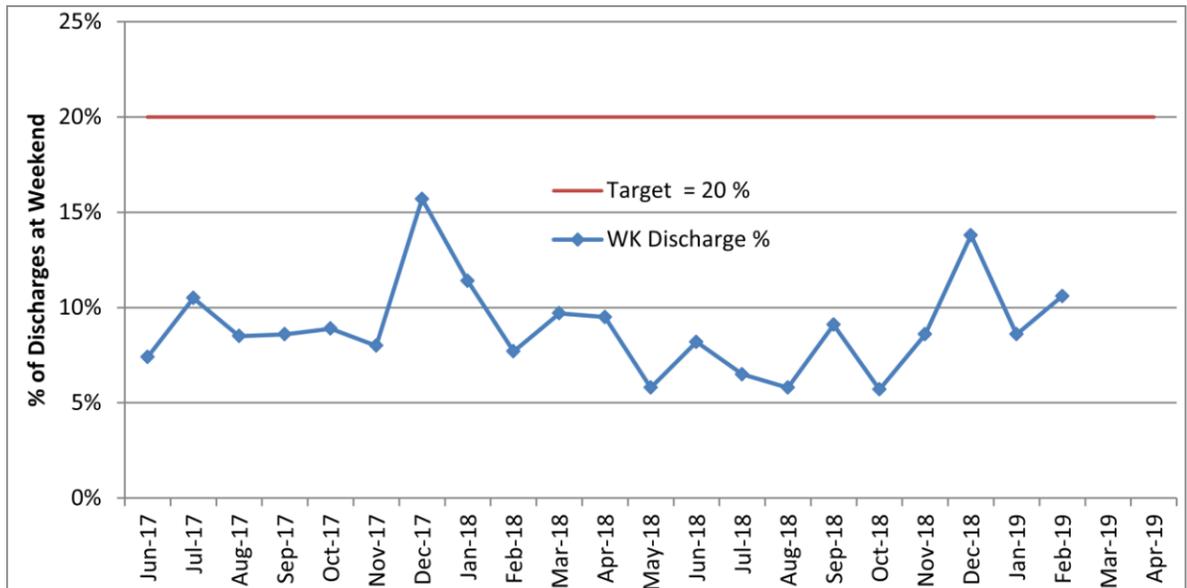
Please Note: Bed Days Lost as a result of delayed discharges was adversely affected as a result of the knock-on effects of Storm Emma in March.



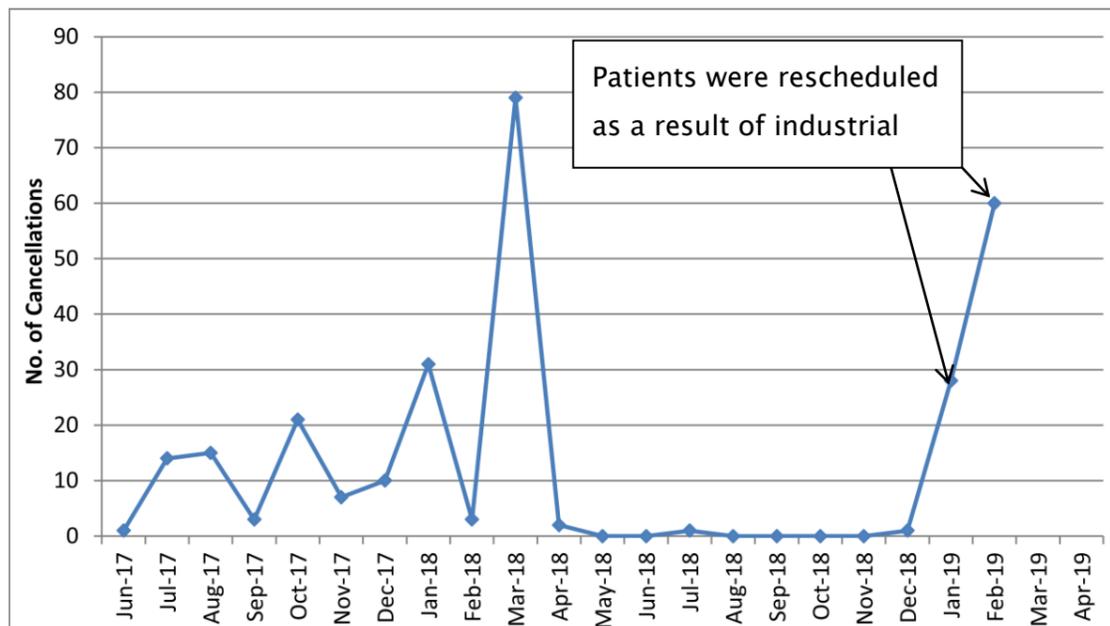
Patients Discharged and Ready Before 11 AM



Patients Discharged on Saturday and Sunday



Number of Patients Cancelled by Hospital due to bed availability



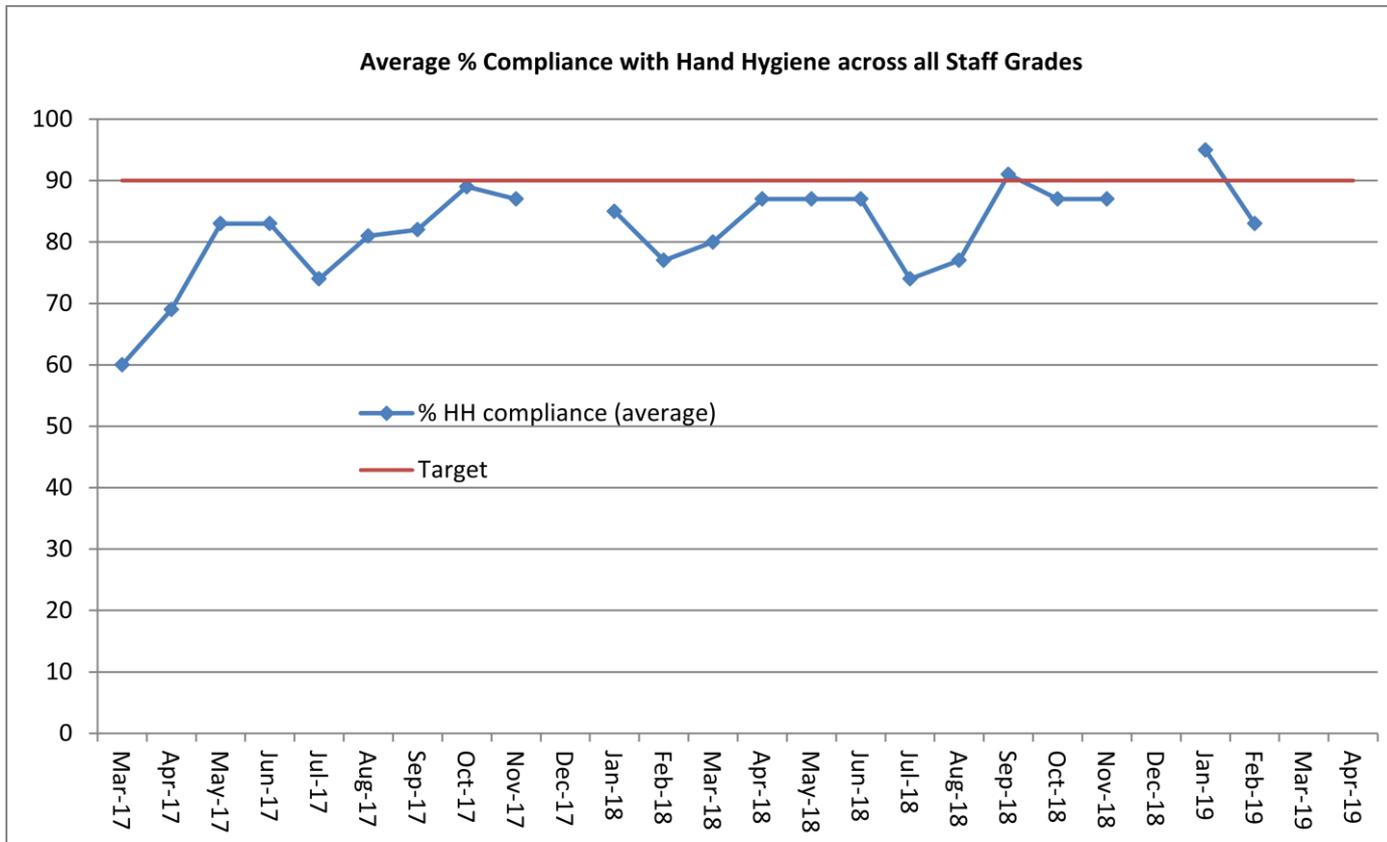
What does this mean?

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.

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

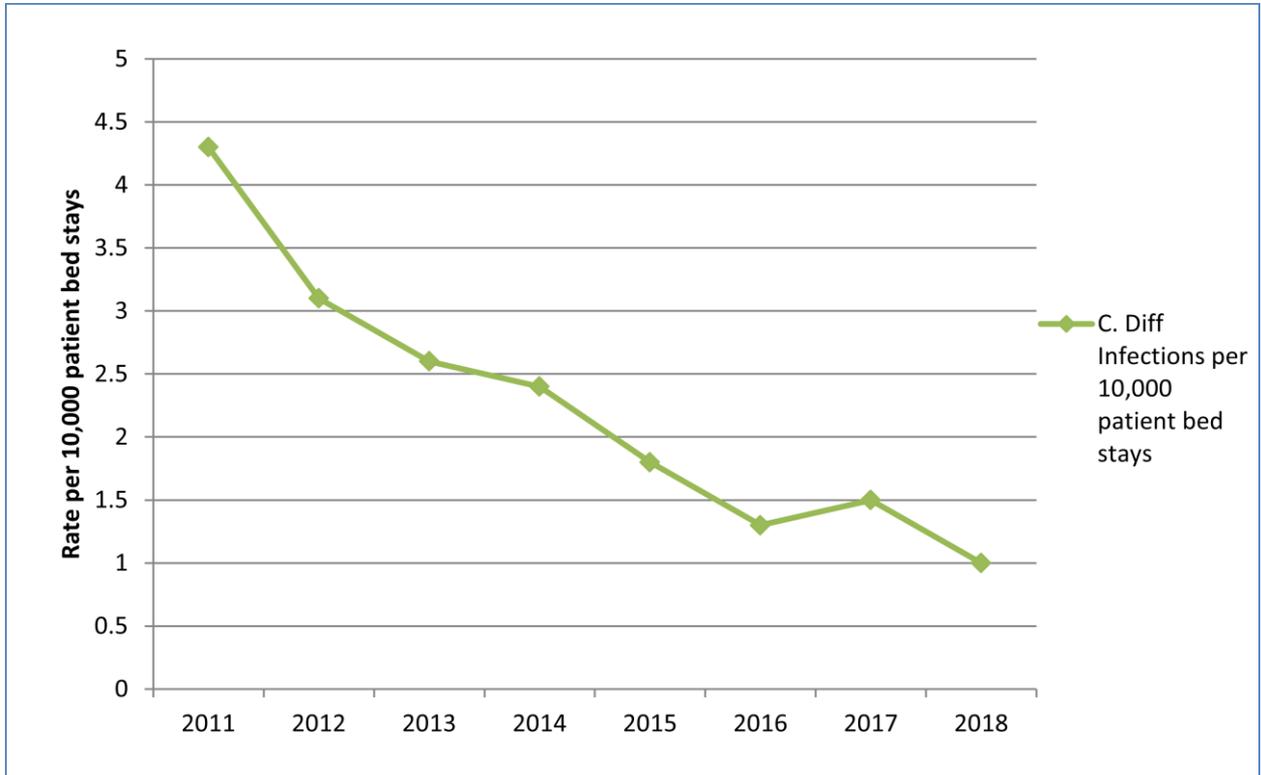


What does this mean?

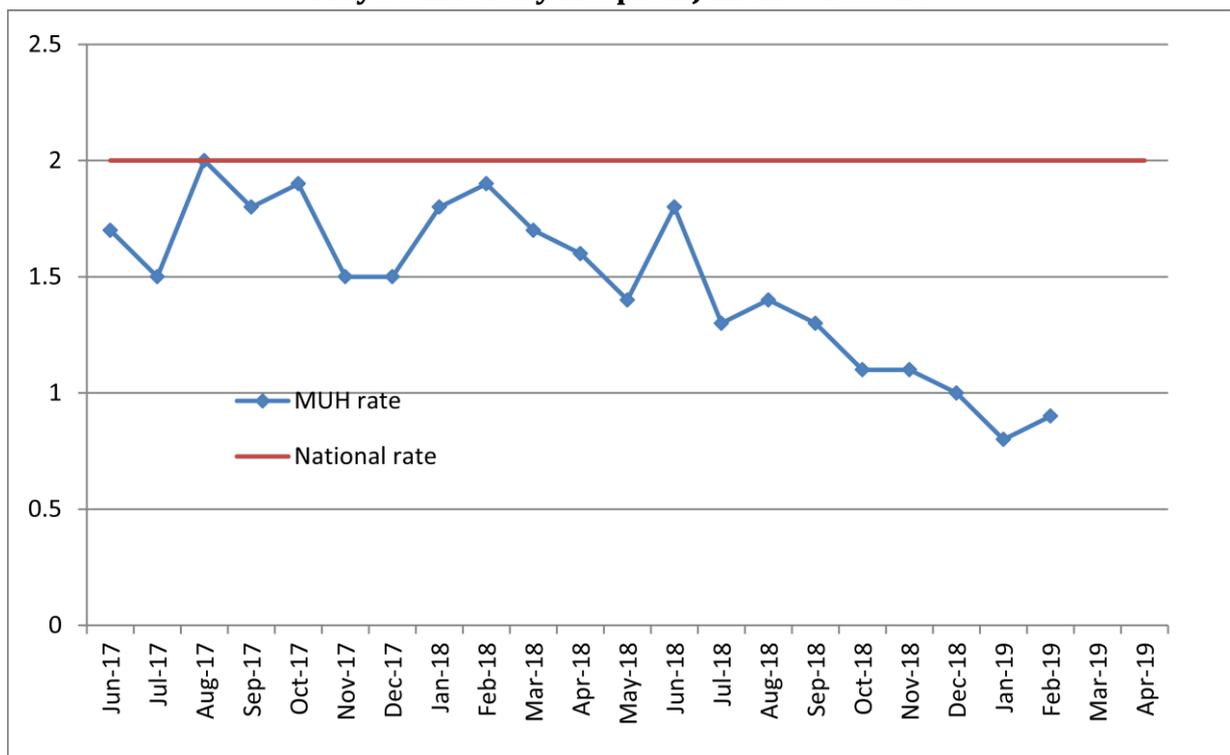
- **Appropriate Antibiotic Prescribing -**
 - *Pharmacists regularly audit use of antibiotics to ensure if the antibiotic is necessary, the correct type of antibiotic by the correct route (IV or Oral) for the correct duration.*
 - *Benefits include reduction of C.diff rates and line infections, reduced 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%*

Reducing Clostridium Difficile infections in Mayo University Hospital Updated March 2019

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



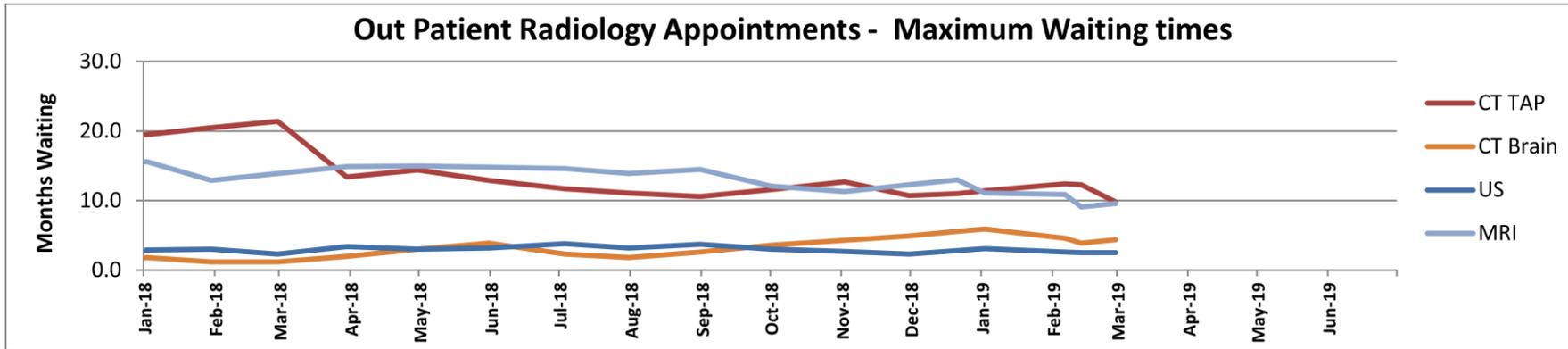
C. difficile infections (CDIs) in Mayo University Hospital Jun '17 - Feb '19



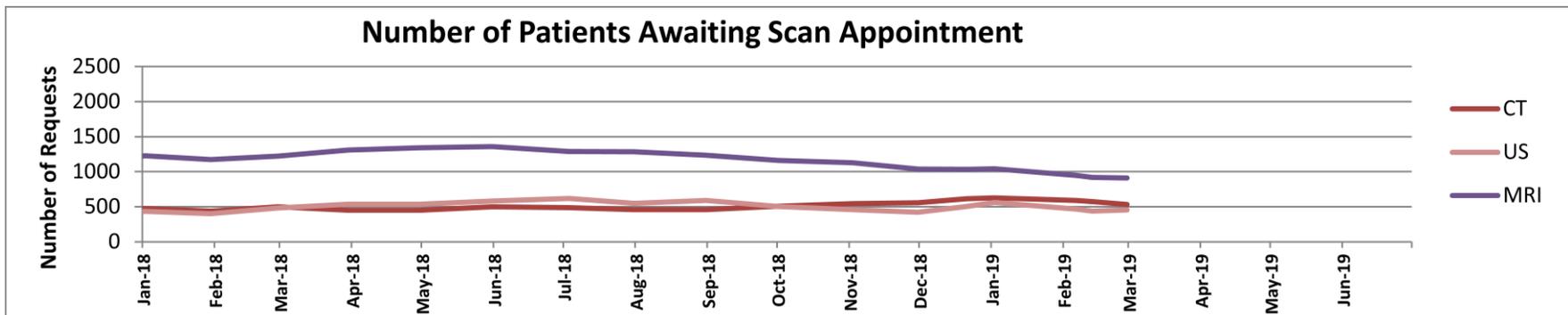


Radiology Wait Times

Out Patient Radiology Appointments - Maximum Waiting times



Number of Patients Awaiting Scan Appointment

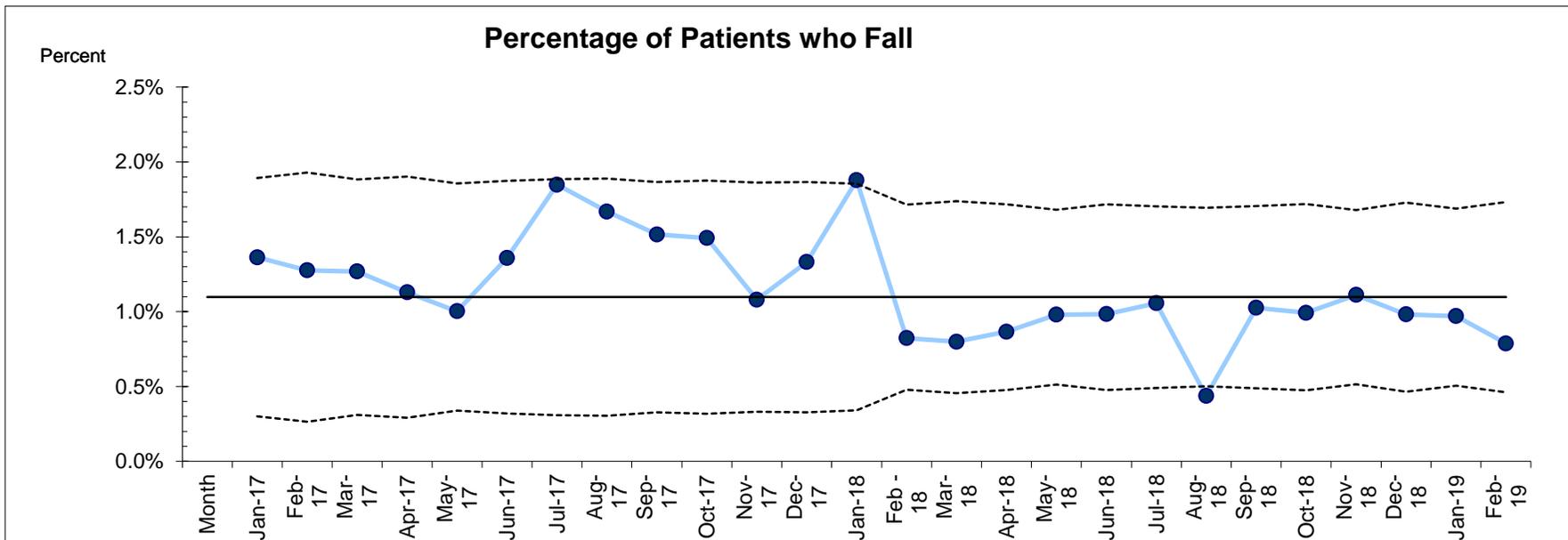


What does this mean?

In recent months targeted waiting list initiatives in MRI, CT and Ultrasound have been used to offer appointments to patients with the longest waiting times. This has resulted in a drop in the overall number of people waiting and a reduction in the longest waiting times in these imaging modalities.

Quality Improvement in Falls Prevention and The Management of Fallen Patients- updated March 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.

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

Don't let fear of falling limit your activities
The fear of falling itself increases your chances of having a fall. Do not allow yourself to become inactive due to fear.

Stay active and exercise your legs
Do you have difficulty walking or keeping your balance? Ask your doctor to refer you to a physiotherapist to help you choose the correct walking aid and prescribe an exercise program suitable for you.

WHAT TO DO AFTER A FALL
If you CAN get up, If you CANNOT get up, If you are a WITNESS.

FOR FURTHER INFORMATION CONTACT: Mary McDonnell (Physiotherapist), Sarah Reaney (Occupational Therapist)



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 February 2019, there were 2 patients that had repeat falls; these patients were predisposed to falls due to pre-existing medical complaints. These patients did have minor injuries as a result of their falls, immediate care was given and comprehensive care plan was put in place for these patients.

There was no Serious Reportable Event in February 2019.

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

The Nursing and Midwifery Metrics in Mayo University Hospital measures the following standard with 8 patients on each ward /unit each month.

Medication Safety

1. Medicines are secure, i.e. there should be no medicines on the bottom of trolleys, on lockers, bed tables etc.
2. Prescription sheets are correctly labelled and complete.
3. The patient has a name band on that is correct.
4. The patient understands what medication they are taking. Ask the patient.
5. There are no delays noted in relation to medication administration e.g. IV Medication administration.

Discharge Planning

1. Has your discharge plan been discussed with you?
2. Did you get a copy of the Mayo General Hospital Discharge information leaflet?
3. Do you feel that your care has been discussed with you while you have been in hospital, were your questions answered? Were you part of the decision?

