

# Implementation and Roll out of Real Time Demand and Capacity (RTDC) in Hywel Dda University Health Board

Quality, Safety and Experience Committee

Wednesday 15 December 2022

# What is RTDC?

‘The RTDC approach, developed with the support of the Institute for Healthcare Improvement, creates a means to build the infrastructure to improve the key outcomes of hospital-wide patient flow. It also creates a robust tool to identify key barriers to flow that can become part of an organization’s portfolio of improvement projects. By identifying key barriers, the RTDC approach can continuously and in a clearly articulated fashion allow a hospital to respond to changes in the external and internal environment that affect flow.’

#1 Predict Capacity

#2 Predict Demand

#3 Develop a Plan

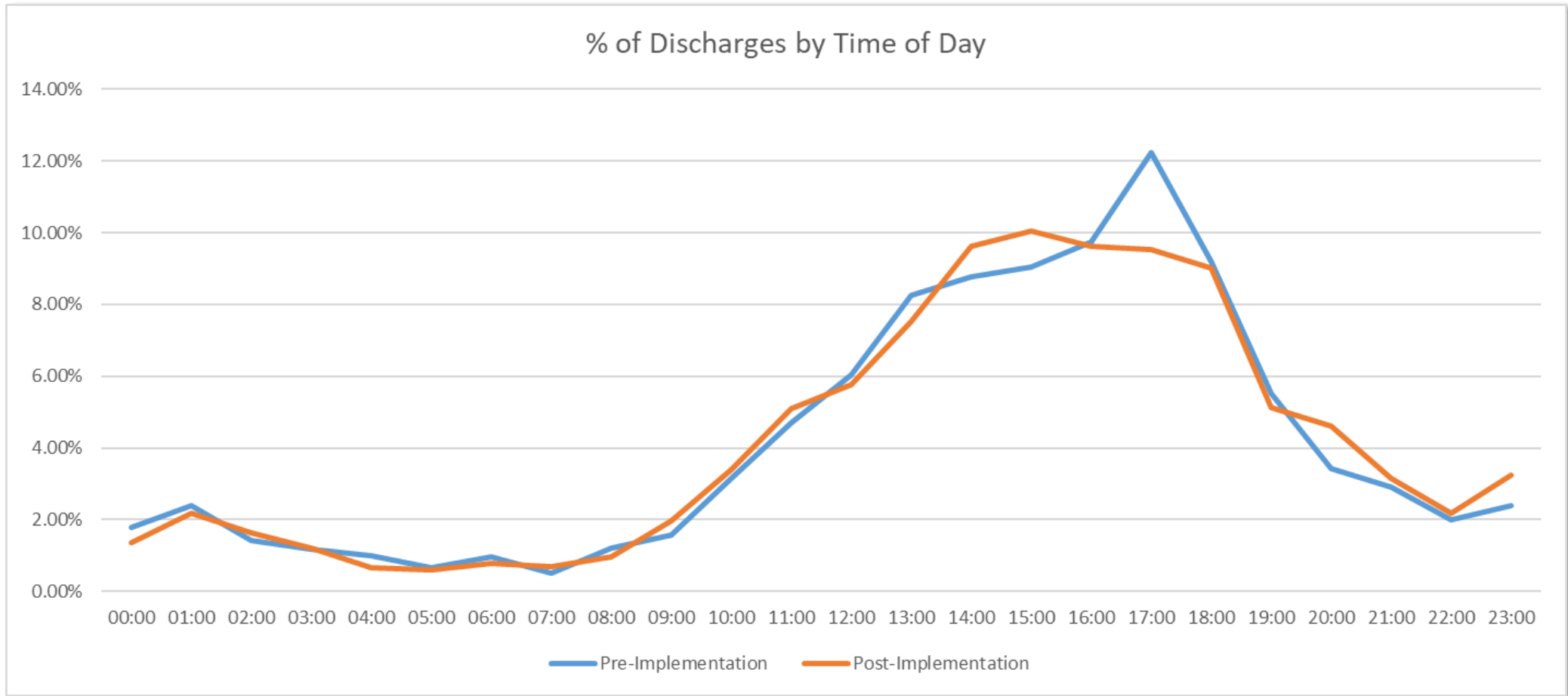
#4 Evaluate the Plan (and predictions)

# Key learning from RTDC pilot in Glangwili Hospital supported by Improvement Cymru (March 2022-May 2022):

- Medical and whole Multi Disciplinary Team (MDT) engagement needed
- Site-based leadership and ownership
- RTDC needs to fit into the existing system- not “another initiative”
- Amalgamate flow and safety work streams
- Embed a whole hospital approach - not wards alone
- Senior nurse manager’s & Manager of the Day ownership of implementation vital for sustainability
- Outcomes from the pilot demonstrates RTDC needs to be implemented alongside wider optimal hospital flow workstreams to deliver system benefits
- Learning from pilot informed the RTDC implementation plan and alignment with Transforming Urgent and Emergency Care (TUEC) Goal 5 “Optimal Hospital Patient Flow” delivery.
- Requested support from Infection Control (IC) to support RTDC roll-out

# Outcomes

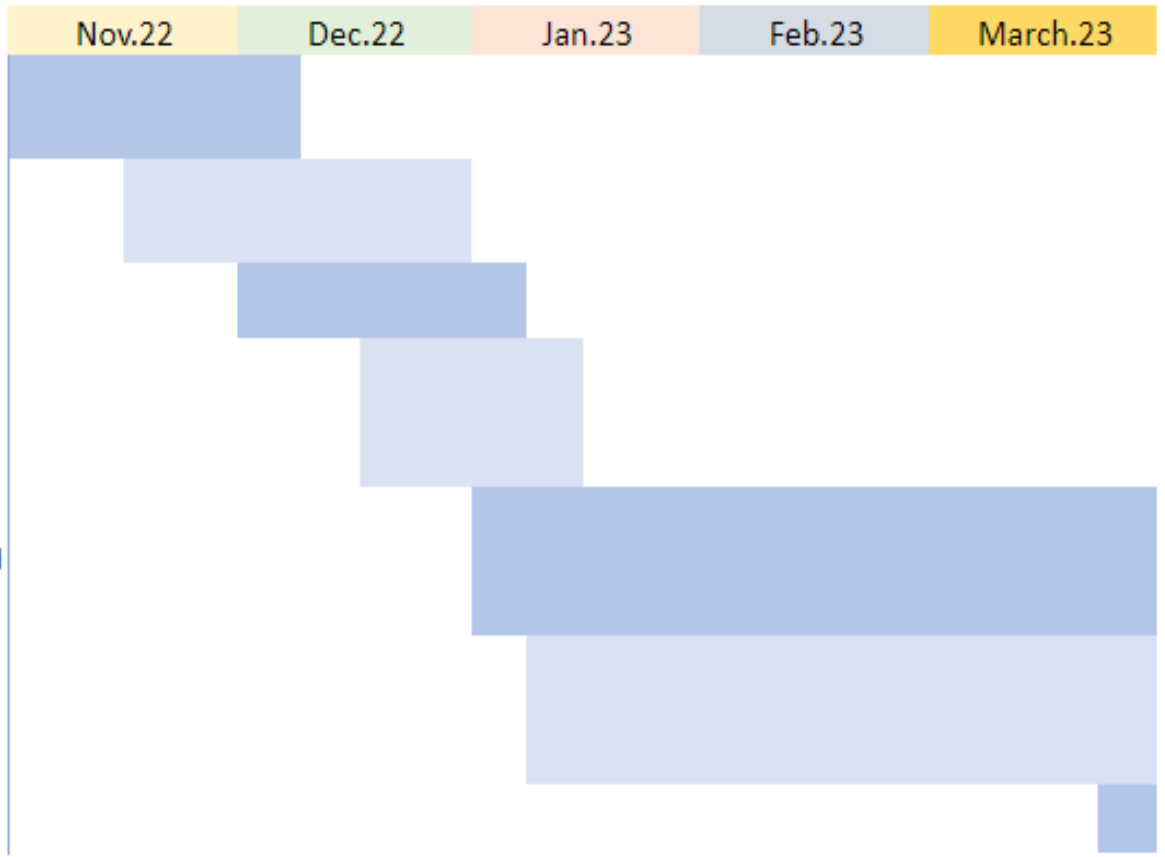
## Discharge Times



# RTDC Implementation

## HDUHB RTDC Implementation Timeline

- Mapping RTDC enablers across 4 acute sites as part of TUEC Goal 5 (board rounds/ afternoon huddles/ bed meetings). Commence data collection (including baseline data)
- Operational and clinical leadership engagement (including HDUHB Goal 5 Delivery group/ IC site visit/ Safe Care Partnership collaborative events) and identification of acute sites RTDC clinical and operational leads
- Wider MDT engagement sessions and identification of RTDC champions
- Confirm HDUHB SOP for board rounds/ afternoon huddles/ bed meetings including RTDC principles as part of Goal 5 TUEC Delivery Group programme (based on national requirements for Goal 5 "Optimal Hospital Flow" and identified enablers i.e. SAFER, Red2Green, preventing deconditioning, D2RA pathways)
- Commence weekly local implementation meetings and data review to support roll-out led by local clinical and operational lead supported by the Quality Improvement and Service Transformation team. Site and health board implementation will form part of the HB Goal 5 Delivery Group work programme.
- Phased and supported site based implementation plan and roll out of "Optimal Hospital Flow" enablers (board rounds/ afternoon huddles/ patient flow meetings focussing on SAFER, R2G, D2RA, prevention of deconditioning) which will support embedding RTDC principles as part of Goal 5 Delivery group workstream
- RTDC implementation completed and ongoing monitoring arrangement in place



# Recommendation

- For Quality, Safety and Experience Committee to receive assurance from the update provided on the implementation of the RTDC approach.