**Quality Improvement Abstract**

The following information will be used on the Academy website and in the graduation materials. It will also form the basis of the information for online voting in the ‘Best Project’ category.

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| **Quality Improvement Title** | Identifying our nursing workforce needs in Acute Medical Initial Assessment (AMIA) |
| **Quality Improvement Presenter(s)** | Jemma Baker  Advanced Clinical Practitioner  AMIA and AEC |
| **Quality Improvement Team** | Johanna Barnes, Advanced Nurse Practitioner, AMIA and AEC  Dr Chris Custard, Acute Medical Consultant  Sara Lees, Modern Matron AMIA and AEC  AMIA nursing team |
| **Abstract**  Maximum of 300 words total. Please write in plain English. | |
| ***Background & Problem:***  *Describe the department where the work was done, the team involved and the patient group that is the focus of your work. Outline briefly the specific problem that you aimed to improve, what baseline data you collected and whether you completed a library evidence search.* | *AMIA facilitates admission avoidance for medical patients requiring immediate clinical assessment and intervention, but without admission to a bed, seeing over 50 patients daily. The challenge is defining safe nursing staffing in an environment with potentially acutely unwell patients and no bed with a frustrated and demoralised nursing team whilst trying to proactively manage the flow of our emergency admissions.*  *A library evidence search was not completed; this project coincided with us representing the South West of England at an NHS England Conference in October 2019*  · |
| ***SMART Aim:***  What were you trying to improve, by how much and by when? | Aim to achieve and sustain 30% of the medical take through AMIA by January 2020. |
| ***Method:*** *Describe the process undertaken including stakeholder engagement, and the tools used to test and implement changes and measure improvement.* | A variety of methods were used:   * safety huddles daily * regular staff feedback * 3 month Trust investment * Patient feedback |
| ***Results:***  *Analysis of your data - what was the impact, describe the benefits. Did the changes result in improvement?* | 30% of the medical take was seen through AMIA from October 2019 to March 2020  Risk was reduced with higher staffing numbers  Staff became actively engaged  Patients had a lot of positive feedback about their journey through AMIA, describing it as very good, clean, private and being involved in their care decisions, but that visibility of staff was sometimes an issue |
| ***Lessons Learnt:***  *What lessons were learnt, what could others learn from your work? What are the opportunities for scale up and spread?* | Effectively managing the staffing numbers reduces risk for patients and enhances flow, with patients triaged and seen appropriately in a time effective way. A senior coordinating role is pivotal for this. |
| ***Next steps:***  *What are you next steps as part of your project?* | * Revisiting the trial currently * Balancing our nursing staffing with patient numbers with the right shift times * Patient safety net advice * Use of the Advanced Practitioner team to facilitate streamlining flow * Using telephone/virtual clinic concepts * Sharing our findings nationally * Live dashboard * Pull improvement to weekends |

Please ensure that you have not exceeded the 300 word limit for your abstract, check for errors and then submit via email to [ghn-tr.gsqia@nhs.net](mailto:ghn-tr.gsqia@nhs.net)