

Standard Operating Procedure (SOP)

Your Next Patient (YNP) – County Hospital

Date of Issue 21st November 2022

Version Number 3



University Hospitals
of North Midlands
NHS Trust

The purpose of this SOP is to set out the process of proactive clinical pathway management of patients from the Emergency Department (ED) into the bed base at County Hospital. The priority is to ensure timely, safe and effective care delivery for patients in the ED, those arriving by ambulance and those members of the public waiting for an emergency response

This SOP seeks to distribute risk throughout the Trust in order to ensure that no one group of patients or staff are adversely affected

Scope: Applicable to all UHNM staff involved in the clinical management of non-elective patients including UHNM Patient Transport Management Team and Estates & Facilities

Part A: Business as Usual

No.	Description of Procedural Steps:
1	Daily senior Ward/Board Round (AM) & Board Round (PM)
2	Application of SAFER/Red2Green principles to ward planning in relation to discharge
3	Discharge Lounge facility to be utilised (ward based Day Rooms) where there is no documented clinical exception
4	Estimated Date of Discharge (EDD) to be maintained as a LIVE state via the WIS system
5	Discharge delays to be escalated and expedited in a timely fashion

Part B: YNP – Escalation Triggers

No.	Description of Procedural Steps
1	The YNP SOP can be enacted during the hours of 08:00 – 18:00
2	The YNP SOP can be enacted on any day of the week
3	The YNP SOP will be triggered when ED have: <ul style="list-style-type: none">• 4 or > medical DTA's and/or,• 0 capacity in both Ambulance assessment and Majors cubicles <i>There should only be a maximum of 2 YNP per ward at any one time (Ward 7 - 1 YNP at any one time).</i>
4	The decision to trigger YNP SOP will be made by the Director of Operations for County Hospital or their nominated deputies (Gold on-call for Out of Hours) in conjunction with the Clinical Site Manager (CSM) based on an overall balance of risk
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No.	Description of Procedural Steps
	All moves should be made as per the YNP schedule (Appendix 2) in order to create capacity and reduce the risk to patient safety. The co-ordination of YNP is led by the CSM. Transfers will take place irrespective of the discharge profile at the time. <i>ED will proactively move patients based on the instruction to do so from the CSM</i>
6	Where wards have concerns regarding the ability to create capacity to admit a YNP, or have any safety concerns they should escalate these concerns to the Matron for the Medical Wards or the Matron for the Emergency Portals within working hours and the CSM out of hours
7	Patients remaining in an additional ward space require a plan to be agreed as a priority. These patient will be discussed at 13:00 hours with a plan to be in a bed space by 14:00 hours (morning YNP's) or 17:00 hours with a plan to be in a bed space by 19:00 hours (afternoon YNP's)
8	The duration that patients remain in an additional ward space will be digitally monitored via WIS and should not exceed 6 hours . Ward Manger/Nurse-in-Charge to escalate patients in additional spaces to their Matron at 4 hours
9	The CSM is responsible for logging each enactment of the YNP SOP and ensuring that: <ul style="list-style-type: none">• AMU identify YNP via the YNP schedule (Appendix 2) and in-conjunction with the YNP Ward Assessment Proforma (Appendix 3)• 1 datix incident is reported each day that the YNP SOP is enacted
10	Where possible YNP should be placed in a bed space and those patients who are a definite or potential discharge transferred to the Day Room or sat out in a chair if able to so. There should only be a maximum of 2 YNP per ward at any one time (Ward 7 - 1 YNP at any one time). If there is a need to consider a third YNP, this will require a risk assessment and executive agreement
11	If an area is restricted due to IPC reasons but is able to admit on clinical need then they may be able to accept a YNP. These cases must be discussed with the IP team prior to transferring a patient.

Part C: YNP – Portal Actions

No.	Description of Procedural Steps
1	Once YNP SOP is triggered the relevant Portal Ward Manger/Nurse-in-Charge will action a pre-prepared list of patients (Appendix 1) ready to transfer to the base wards. *Your Next Patient – Letter for Patients (to be issued to patients' in the Emergency Department, as required)
2	The relevant Portal Ward Manager/Nurse-in-Charge will notify the Facilities Team of the Portering requirements

Part D: YNP – Ward Actions

No.	Description of Procedural Steps
1	Once YNM SOP is triggered all relevant Ward Manager/Nurse-in-Charge need to identify the appropriate space to receive the additional patient (Appendix 3)
2	Where appropriate YNP should be placed into a bed space and those patients who are a definite or potential discharge should be transferred to the Day Room, with their belonging packed to allow YNP to occupy the bed space
3	Where wards are unable to identify an appropriate definite or potential discharge suitable to move out, the Ward Manager/Nurse-in-Charge should escalate to the Matron to undertake a review of the patient

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Trust Contact: Claire MacKirdy

Date of Review: 21st November 2022



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*Your Next Patient - Patient Letter. Located on the UHNM Internet Explorer

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No.	Description of Procedural Steps
	group with the Consultant. YNP will be transferred to the identified area on the ward, as per the YNP Ward Assessment Proforma (Appendix 3)

Appendix 1 – Patient Exclusion Criteria

- Delirium
- NEWS >3 (1 category)
- NEWS >5 (>1 category)
- >2 infusions
- >2 litres of a new oxygen demand
- End of life care
- Tracheostomy/Laryngectomy

Appendix 2 – YNP AMU Move Schedule

Ward	8am-9am	9am-10am	10am-11am	11am-12pm	12pm-1pm	1pm-2pm	2pm-3pm	3pm-4pm	4pm-5pm	5pm-6pm	Target YNP
1						Review YNP Status & Capacity Plan					0
7	x1						x1				1
12		x1		x1				x1	x1		2
14	x1		x1					x1	x1		2
15		x1		x1				x1	x1		2



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Appendix 3 – YNP Ward Assessment Proforma

County Hospital - YOUR NEXT PATIENT WARD ASSESSMENT PROFORMA

Ward	Risk Rating	Boarding Locations	Single Sex	Bed/ Trolley/ Chair	Screens available	Call bell accessible or ability to call	Oxygen Available	Suction Available	Access to a toilet	Restricting Fire Exit?	Senior Sister/Charge nurse Safety Assessment	IP safety assessment
AMU County	16 Severe	7 beds in AMU escalation area – 1 further room able to flex – currently used as a doctor’s office – also area currently plan for use for patients requiring stabilisation prior to transfer to Royal Stoke	Yes	Bed/ Chair	3 screens	Yes	Yes	Yes	Yes	No	<p>Plan to send/receive YNP’s rather than take additional patients</p> <p>Need to maintain area of holding of patients who are being stabilised by the aesthetic team</p>	3 bedded area in escalation area does not meet social distancing (2.7m) requirements



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Ward	Risk Rating	Boarding Locations	Single Sex	Bed/ Trolley/ Chair	Screens available	Call bell accessible or ability to call	Oxygen Available	Suction Available	Access to a toilet	Restricting Fire Exit?	Senior Sister/Charge nurse Safety Assessment	IP safety assessment
1	20 Severe	Not appropriate										
7	16 Severe	1 bed/chair space in Bay 13/14 (Bed 15)	yes	Chair/ bed	no	Yes	Yes	Yes	yes	no	Yes consider whether a patient pending discharge is safe to sit out, in first instance.	Consider social distancing /infection risks
12	16 Severe	A Patient ready for discharge is moved to a chair in day room 1 additional bed space in bariatric side room (room 27)	Yes	Chair Dayroom Bed in room 27	No	Hand bell	Portable Oxygen Cylinder	Portable Unit on Resus Trolley	Yes	No	Yes, patient in bed 27 requires patient letter explaining an additional patient in their room.	Social Distancing concerns



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Ward	Risk Rating	Boarding Locations	Single Sex	Bed/ Trolley/ Chair	Screens available	Call bell accessible or ability to call	Oxygen Available	Suction Available	Access to a toilet	Restricting Fire Exit?	Senior Sister/Charge nurse Safety Assessment	IP safety assessment
14	Severe 16	Patient ready for discharge is moved to a chair in day room	Yes	Chair Dayroom x 2	no	Hand bell	Portable Oxygen Cylinder	Portable Unit on Resus Trolley	yes	No	Yes if the patient pending discharge is safe to sit out.	Safe to use



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Ward	Risk Rating	Boarding Locations	Single Sex	Bed/ Trolley/ Chair	Screens available	Call bell accessible or ability to call	Oxygen Available	Suction Available	Access to a toilet	Restricting Fire Exit?	Senior Sister/Charge nurse Safety Assessment	IP safety assessment
15	Severe 16	<p>Patient ready for discharge is moved to a chair in day room</p> <p>1 YNP can be facilitated in Bay 7-10, between bed space 9-10 (cohort bay as a staff member is always in the bay)</p>	Yes	<p>Chair Dayroom</p> <p>1 Bed in Bay</p>	No	“Shop” style bell – not heard if no one at nursing station	Portable Oxygen Cylinder	Portable Unit on Resus Trolley	yes	No	Yes if the patient pending discharge is safe to sit out, particularly if activities co-ordinator is on shift.	Safe to use



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