

SECONDARY CARE CASE STUDIES

Urgent care, acute pathways, stroke reconfiguration and clinical improvement

BETTER PATHWAYS. BRIGHTER LIVES.

DESIGNED FOR WEBSITE DOWNLOADS AND CLIENT CONVERSATIONS

A curated set of TMPM case studies grouped by work area for ongoing communications.

FOCUS	USE	FORMAT
Portfolio examples grouped by delivery context, with place and organisation names removed for wider promotion.	Suitable for website downloads, LinkedIn follow-ups, client introductions and targeted business development.	Landscape PDF pack with a matching cover, individual case-study pages and a contact page.

4 case studies

- Emergency Care UEC Review
- Acute Stroke Unit HASU Reconfiguration Programme
- 27 Gastroenterology

URGENT & EMERGENCY CARE (UEC) REVIEW

Urgent and emergency care / System review and delivery planning

BETTER PATHWAYS. BRIGHTER LIVES.



STRONGER
TOGETHER FOR
BRIGHTER TOMORROWS.

KEY INSIGHT

UEC improvement starts with shared priorities, visible flow challenges and a plan partners own.

UEC

REVIEW

PROGRAMME PLAN

FLOW



THE CHALLENGE

Urgent and emergency care pressures needed a structured review, shared priorities and a practical plan for improvement.



TMPM ACTIVITY

TMPM reviewed activity, gathered stakeholder input and shaped a sequenced delivery plan with clearer governance and ownership.



WHAT CHANGED

The review produced sharper priorities and stronger partner alignment around implementation across the urgent care system.

BENEFITS & EVIDENCE



SHARED PRIORITIES

The review clarified the urgent care improvement agenda.



PRACTICAL SEQUENCING

A delivery plan connected actions, governance and ownership.



PARTNER ALIGNMENT

Stakeholder input strengthened the route to implementation.

HYPER ACUTE STROKE UNIT (HASU) RECONFIGURATION

Acute stroke services / Reconfiguration and service design

BETTER PATHWAYS. BRIGHTER LIVES.



STRONGER
TOGETHER FOR
BRIGHTER TOMORROWS.

KEY INSIGHT

Service reconfiguration needs clear evidence, clinical alignment and disciplined programme grip.

STROKE CARE

RECONFIGURATION

CLINICAL INPUT

WORKSTREAMS



THE CHALLENGE

Stroke services faced insufficient patient volumes, specialist staffing gaps and delays in diagnostics and treatment.



TMPM ACTIVITY

TMPM coordinated workshops, programme workstreams, risk management and stakeholder engagement to shape a future service model.



WHAT CHANGED

The work strengthened the evidence and operational planning needed for safe, clinically credible reconfiguration decisions.

BENEFITS & EVIDENCE

5 WORKSTREAMS

coordinated through the reconfiguration programme



OPERATIONAL CLARITY

The future service model and requirements were mapped.



INFORMED DECISIONS

Clinical, financial and operational risks were considered together.

Finance, Quality, Rehabilitation, Mimics and Repatriation, IT and Communications.

LEADERSHIP PROGRAMME

Acute care / Leadership, management and improvement

BETTER PATHWAYS. BRIGHTER LIVES.



STRONGER
TOGETHER FOR
BRIGHTER TOMORROWS.

KEY INSIGHT

Consistent management routines help complex organisations turn improvement ambition into everyday delivery.

ACUTE

IMPROVEMENT

LEADERSHIP

GRIP



THE CHALLENGE

A leadership programme needed support to embed a consistent management approach across a large acute trust.



TMPM ACTIVITY

TMPM supported stakeholder coordination, programme structure, delivery planning and governance arrangements.



WHAT CHANGED

The programme gained a clearer delivery rhythm and stronger alignment around sustainable management and improvement practices.

BENEFITS & EVIDENCE



CONSISTENT MANAGEMENT
Programme structure supported a trust-wide management approach.



STRONGER ALIGNMENT
Stakeholder coordination connected programme aims to delivery.



SUSTAINED IMPROVEMENT
Governance and reporting supported an ongoing delivery rhythm.

GASTROENTEROLOGY

Clinical pathways / Gastroenterology review and delivery

BETTER PATHWAYS. BRIGHTER LIVES.



STRONGER
TOGETHER FOR
BRIGHTER TOMORROWS.

KEY INSIGHT
 Clinical pathway improvement is stronger when delivery controls and clinical ownership work together.

CLINICAL CARE

PATHWAY REVIEW

CLINICAL DELIVERY

RIGHT CARE

THE CHALLENGE

A gastroenterology programme needed structured project management to support pathway review and better use of clinical resources.

TPM ACTIVITY

TPM coordinated stakeholders and created a framework to track actions, risks, decisions and improvement opportunities.

WHAT CHANGED

The programme gained clearer clinical ownership, stronger delivery control and better visibility of Right Care priorities.

BENEFITS & EVIDENCE


CLINICAL OWNERSHIP
Stakeholders were connected around pathway priorities.


VISIBLE DELIVERY
Actions, risks and decisions were tracked in a shared framework.


RIGHT CARE FOCUS
Review activity supported better use of clinical resources.

LET'S BUILD DELIVERY GRIP.

People. Partnerships. Lasting change.

TMPM helps health and care organisations diagnose delivery challenges, strengthen governance and turn ambition into measurable progress.

EXPERT CONSULTANCY

Independent senior support for complex health and care change.

PMO & ASSURANCE

Governance, reporting, risk and benefits tracking that leaders can use.

TRANSFORMATION DELIVERY

Pathway, commissioning and system redesign from idea to implementation.

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