

Drinking, Eating and Mobilising (DrEaMing)

in the first 24-hours following major surgery

What is DrEaMing?

Drinking, Eating and Mobilising (DrEaMing) within 24 hours of major surgery is associated with decreased length of stay for patients and a lower rate of postoperative complications (Oliver et al., 2022). Containing the core features of more complex enhanced recovery pathways, DrEaMing is a simple and patient-centred intervention aiming to revitalise efforts to improve patient’s recovery after surgery. DrEaMing has been a PQIP improvement priority since 2018 and is supported by the RCoA and Getting it right First Time (GIRFT). In addition to this, DrEaMing is now a renewed NHS England Commissioning for Quality and Innovation (CQUIN) indicator for 2023/2024.



Drinking Free Fluids



Eating a soft diet



Mobilising from bed to chair with max assistance of one

What are the benefits of implementing simple QI metrics like DrEaMing?

Supporting patients to DrEaM has **benefits for hospitals, staff and most importantly patients:**



Benefits for Hospitals: DrEaMing is now a renewed NHS England CQUIN. NHS Trusts in England will receive a financial incentive if they demonstrate 70-80% of eligible patients DrEaM. DrEaMing can also be implemented for more surgical procedures than those described in the CQUIN. This simple QI initiative can help to streamline elective pathways; something that is particularly important, when there is immense pressure on them.




Benefits for Staff: The multidisciplinary surgical team are invested in delivering exemplary care. By implementing DrEaMing initiatives, staff have the satisfaction of providing care that is evidence-based and improves outcomes. Additionally, there is evidence that staff who work in hospitals with a positive QI culture are more engaged, satisfied, benefit from professional development and indirectly benefit patient safety by establishing more effective teams.




Patient Benefits: The most crucial group to benefit from DrEaMing: improving patient care should be at the centre of everything we do. Engaging patients in their perioperative pathways and empowering them to drink, eat and mobilise can not only reduce their length of stay – and complications – but it also humanises the whole experience of being in hospital.

How can hospitals work to implement or improve DrEaMing?

We know that even with robust evidence, implementing QI is challenging. PQIP is endeavouring to support sites to implement DrEaMing with a series of collaborative webinars to share evidence, CQUIN updates and share ideas from sites to aid implementation. These webinar recordings are freely available on the PQIP website. Email PQIP@RCOA.ac.uk for more information on gaining a PQIP website login.



Use and share the readily accessible DrEaMing Data for your chosen surgical specialty on the PQIP website.



Access you local PQIP reports to explore how your hospital is performing with key PQIP metrics



Join our collaborative webinar series to find out the most up-to-date data coming out of PQIP



Collaborate and work together as a team to deliver DrEaMing to your patients. See our top tips for QI success!

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Patients as advocates for DrEaMing

Work we have done through PQIP involved looking at DrEaMing with the RCoA patient voices group. Analysis of a DrEaMing focus group revealed that:

- **Educating patients early** on in their perioperative journey about expectations for recovery, including DrEaMing is incredibly important. Patients want to do anything to avoid complications and prolonged hospital stays, education gives them the tools to be active participants in their own recovery.
- Education **empowers** patients and allows them to be actively involved in shared decision making and their own post-operative recovery.
- Every patient interaction with the perioperative MDT, should also be used as a chance to **reinforce** why DrEaMing is important for their recovery. This not only supports the patients to retain pertinent information, at what can be a very stressful time, but also reassures them that the whole team are working cohesively around the same evidence-based goals and that their care is not being "fast tracked" due to hospital pressures.

RCoA Patient Voices member:

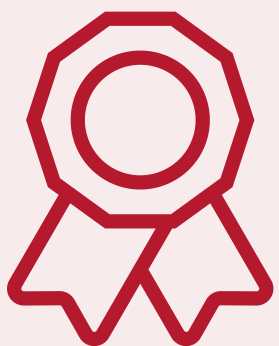
"I think DrEaMing has many benefits from a patient's perspective. If patients are aware of DrEaMing from the pre-assessment stage, it manages their expectations and engages and empowers them in discussions about their own healthcare planning. Also patients will do anything to avoid complications and prolonged hospital stays so DrEaMing, once explained, just makes good sense"

"Engage, Educate and Empower Patients"

Patients
Voices
@RCoA

"Involve patients, collaborate with patients and empower patients"

Top tips to help support patients to DrEaM



- **Find a local champion to drive the process:** collaborate with a permanent member of staff with connections across the MDT such as a Clinical Nurse Specialist to help facilitate connection and engagement across the whole MDT
- **Use data that is already available** e.g., from PQIP, to save time on data collection and move straight to QI. Reflect and share this data regularly with your team to assess if changes to your QI approach need to be made and celebrate success



- **Work collaboratively with the whole surgical MDT.** QI efforts are more likely to success when developed with, rather than imposed on teams.
- **Focus on improving the modifiable process** that limit a patient's ability to DrEaM after surgery: optimise preoperative anaemia, reduce use of abdominal drains and nasogastric tubes, and prevent postoperative pain.



- **Communicate with patients early in their perioperative journey** about DrEaMing. Empower patients to ask: "Why am I not DrEaMing?" or "When can I DrEaM?". Although DrEaMing is a standard QI metric, for patients, it needs to be delivered in a patient-centred way.
- Gain **institutional investment** by involving managers as well as clinicians. Highlight that DrEaMing is an NHSE CQUIN
- Start by **focussing on specific specialities** with the aim of DrEaMing becoming the standard of care and then scale up

Useful links and resources



- Delivery of drinking, eating and mobilising (DrEaMing) and its association with length of hospital stay after major non-cardiac surgery: observational cohort study
- 2023-24 CQUIN guidance ([england.nhs.uk](https://www.england.nhs.uk))
- DrEaMing Webinar May 2022 (pqip.org.uk)
- DrEaMing Webinar November 22 (pqip.org.uk)
- Commissioning for Quality and Innovation (CQUIN) - Getting It Right First Time - GIRFT
- Preparing for surgery – Fitter Better Sooner | The Royal College of Anaesthetists (rcoa.ac.uk)