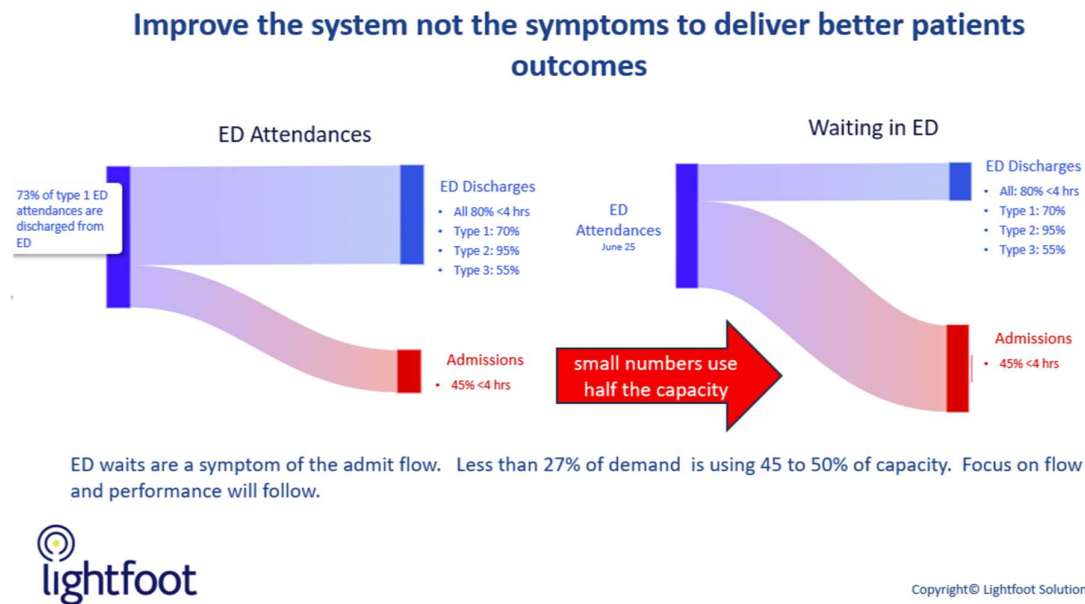


## Lightfoot Launch their 72-Hour Modelling Tool: Planning with Purpose for the Hours That Matter Most



Lightfoot Solutions is proud to introduce their 72-hour modelling tool - a new simulation capability within *sfn*, built to support NHS organisations as they prepare for the rollout of national clinical and operational standards for the **first 72 hours of care**.

With rising acuity, constrained capacity, and increasing demand on urgent care systems - the first 72 hours of a patient's care journey have never mattered more. This is where outcomes are shaped, resources are stretched, and flow is either enabled or blocked.

Lightfoot's new model helps NHS leaders simulate, compare, and design services that work clinically, operationally, and financially.

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### The first 72 hours of care matter

NHS England has made it clear - from winter 2025, new standards will define expectations for care in the first 72 hours of an acute episode. These standards are intended to improve coordination, reduce delays, and ensure high-need patients - particularly those living with frailty - receive the right care, fast.

Changing care models carries risk. Without the right tools, new configurations can unintentionally increase activity for lower-acuity cohorts. They can disrupt complex pathways and inflate running costs without improving outcomes.

The 72-Hour Modelling tool provides a way to test these changes safely. It allows NHS systems to explore different care scenarios before committing - bringing assurance, clarity, and foresight to urgent care planning.

## 72 Hour of Care Simulation Model

This **dynamic** and **configurable** model enables users to test and optimise “*what if*” scenarios across the Emergency Department and its connected pathways, assessing the resulting impact on the 72-hour model of care

The model helps you explore how changes in **patient demand**, **flow proportions**, **time spent in each location**, or **capacity constraints** influence key outcomes such as:

- **Occupancy** levels and the capacity required to meet demand
  - ED **4-hour** performance
- Downstream **impacts** on **admissions**, **discharges**, and **patient flow** through the system
  - Adapt for **future** increase in **demand**



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### What the model offers

Developed by Tim Eavery working in close collaboration with Lightfoot’s consulting team, the 72-Hour Model blends technical simulation expertise with deep operational knowledge of NHS frontline challenges.

Now fully embedded within *sfn*, the model is built for real-world complexity - modelling variation in acuity, staffing, estates, and population need.

Key features include:

- **Discrete event simulation** across Emergency, SDEC, and medical pathways
- **Real-time benchmarking** across all acute trusts in the South East- allowing organisations to compare themselves with better-performing peers and identify realistic improvement opportunities
- **Scenario modelling** that supports local redesign, including variations in workforce models and site configuration
- **Integrated population forecasts**, enabling long-term planning based on changing demographics
- **Visual outputs** that support decision-making from operational teams to boards

Whether you're preparing for winter, redesigning a frailty pathway, or developing a system-wide urgent care strategy, the 72-Hour Modelling tool brings clarity and control to transformation planning.

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### **A system-wide view of opportunity and risk**

The NHS must deliver more for patients with fewer resources. That means focusing on changes that improve care for those who need it most - without creating new pressure elsewhere in the system.

The 72-hour modelling tool enables trusts and systems to:

- Focus on **high-need, high-impact patient groups**, including those living with frailty who occupy the majority of acute bed days
- Test the likely effect of service changes before implementation
- Quantify and compare performance using a consistent regional benchmark
- Forecast future demand based on population change - not just historical trends
- Build robust, data-led business cases with a clear line from investment to outcome

The model gives transformation teams, clinical leads and ICB planners a shared platform to evaluate risk, opportunity and system impact - supporting governance and investment decisions with transparency and evidence.

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### **Built into sfn - fast, transparent, and trusted**

This capability is now live within *sfn*, Lightfoot's in-memory platform used by NHS organisations across England. The tool offers all the speed and depth the platform is known for- now extended to cover forward-looking simulation and scenario testing.

The 72-hour modelling tool is already helping NHS systems get ahead analysing performance, identifying what's possible, and modelling the steps required to deliver it.

Because in the first 72 hours of care, every decision matters. And with the right model, every decision can be better informed.