

Criteria Led Discharge for Concord Hospital

Prepared by **Tracy Millen**

Whole of Health Program Project Lead

November 2015



Health
Sydney
Local Health District

Overview

- Case for change
- Engagement with selected departments
- Current progress
- Challenges
- Where to from here



Case for Change

Weekend Discharges and Discharges Before 2pm



Patient Experience Tracker Results

- 9% of Patients knew their estimated date of discharge
- 36% of Patients knew what was expected of them before they get discharged from hospital
- 55% of Patients always or mostly received daily updates about their care in hospital
- 82% of Patients knew who to ask if they had a question about their care in hospital
- 37% of patients said they were involved in their discharge plan



Staff Experience Tracker Results

- 41% of staff advised they understood what was involved in CLD
- 86% of staff advised they involved the patient/ family in developing a management plan
- 70% of staff advised they update the patients EDD throughout their hospital stay
- 89% staff advised they knew who to contact if they had concerns about a patients discharge plan
- 67% staff advised they almost/ mostly used the transfer of care checklist when planning for a patients discharge



Feedback from Consumer Representatives Group

- *“is this not what we do already???”*



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Engagement

- Departments such as Ambulatory Care Endoscopy Unit and Day of Surgery Admissions has utilised CLD processes for many years
- Selected departments were engaged through meetings with DMS, WoHP Lead, Department Head and CNC
- Criteria devised by Department Head, Senior Registrar/ Advanced Trainee, CNC and Allied Health Staff
- All criteria taken to departmental meetings and signed off by all consultants
- Focus groups with NUM's, CNC's and CNE's of wards to put together a plan and identify resources required to implement program
- Presentations on CLD for BPT's, AT's and Registrars



Current Progress

- CRGH has 14 live Criteria Led Discharge since 28th September 2015 under the newly revised system
- Specialties involved:
 - Neurology
 - Neurosurgery
 - Orthopaedics
 - Rheumatology
 - Respiratory
- 35 Patients discharged from hospital using CLD



Current Progress Continued...

- Acute non-specific lower back pain
- Cellulitis
- Cervical Spinal Surgery (not including fusions)
- Lumbar Spinal Surgery (not including fusions)
- CPAP Acclimatisation
- Distal Radius Fracture
- Total Knee Replacement
- Gout
- Induction of IVIg
- Lumbar Puncture
- Osteoporotic Crush Fracture
- Shoulder Surgery
- TIA's
- Total Hip Replacement





Holes Punched as per AS2828.1: 2012
BINDING MARGIN - NO WRITING

SI 80 30007004NS

	FAMILY NAME	MRN
	GIVEN NAME	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
	D.O.B. ____/____/____	M.O.
	CONCORD REPATRIATION GENERAL HOSPITAL	
ADDRESS		
CRITERIA LED DISCHARGE CPAP ACCLIMATISATION		
LOCATION / WARD		
COMPLETE ALL DETAILS OR AFFIX PATIENT LABEL HERE		

Part A: Medical Review (Consultant/ Advanced Trainee/ Senior Registrar to complete)		Estimated
<input type="checkbox"/> I agree for this patient to be discharged once the milestones in Part B and C have been met		Date of
<input type="checkbox"/> Please do not discharge until medical team review for the following reason/s:		Discharge (EDD)
Name: _____	Signature: _____	Date: ____/____/____

Part B: Specific patient interdisciplinary team (IDT) discharge criteria (to be completed by IDT)				
IDT agreed specific milestones	(√) When milestone completed	Name	Designation	Signature
Patient tolerating CPAP >4 hours / night				
Latest machine printout and overnight oximetry reviewed by sleep registrar				
Follow-up plans documented and referrals made				
Patient at usual level of function or supports in place				
Discharge summary and scripts completed				
Patient education provided				

Responsible Person: CLD competent staff member

Part C: Patient Criteria	Y/N	Name	Signature
All observations Between the Flags within the last 24 hours or within the documented Altered Calling Criteria for this patient			
<i>If no, refer to senior medical clinician</i>			
Transfer of care (discharge) checklist completed on Adult Admission & Discharge Assessment Form (AMR806.001)			

Reason patient not discharged using CLD protocol:

I confirm that the criteria in Part B and C have been met and achieved:

Name: _____ Designation: _____

Signature: _____ Date: ____/____/____ Time: _____

CRITERIA LED DISCHARGE
CPAP ACCLIMATISATION

MRO12.004



Challenges

- Staff confidence:
 - Nursing Staff
 - Medical Staff
- Interdisciplinary communication mistaken for deficiency in CLD process
- Communication of process to patient/ family
- Identifying key drivers outside business hours



Benefits

- Positive staff feedback
- Positive Patient feedback
- Facilitation of effective communication around the discharge planning process



Where to From Here

- Initial departments reviewing expansion within their own department
- Facility CLD Committee determined further departments to take part in phase 2
- Initial evaluation of process March 2016
 - PET's
 - Case reviews
 - Comparison data



Questions????



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Criteria Led Discharge at Canterbury Hospital

Jenny Cubitt

Nurse Manager Operating Suite



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The Journey so far

- Multiple clinical guidelines for High Volume Surgical Short Stay (HVSSS) & a clinical variance record developed
- Nov 2014 start of CLD project
- Surgeons agreed in principle
- **CLD Committee-** Deputy Medical Director, Head of Surgery, NUM Surgical ward & paediatric ward, Ambulatory Care NUM, CNC Complex Care, Clinical Nurse educator.
- Policy developed and flowchart. Forms reviewed and modified. Phone call follow-up documented.



CANTERBURY HOSPITAL

**CLINICAL GUIDELINE:
LAPAROSCOPIC
CHOLECYSTECTOMY (TRIAL)**

SURNAME	MRN
OTHER NAMES	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
D.O.B. ___/___/___	M.O.
ADDRESS	
LOCATION	

COMPLETE ALL DETAILS OR AFFIX PATIENT LABEL HERE

PRE-ADMISSION CLINIC Date: ___/___/___

PLANNED PROCEDURE:

Allergies: _____ Observation: Weight: _____ kg Height: _____ cm Temp: _____ °C

Medical Assessment Yes No Anaesthetic Assessment Yes No Diabetic: Yes No If Yes: IDDM NIDDM BSL: _____

Nursing Assessment Yes No Bowel Preparation Instruction: Yes No N/A

Medication Chart Completed Yes No Does the patient live alone? Yes No

Pre-operative Mobility: _____ Risk Screen: _____ Waterlow Score: _____ Falls Risk: _____

Pre-operative Investigation (tick all that apply): ECG Bloods CXR/X-rays Other: _____

Pre-admission Nurse Name: _____ Signature: _____

DAY OF ADMISSION Date: ___/___/___

Discussed care & discharge needs with patient: Yes No Temperature: _____ °C Pulse: _____

Discussed care & discharge needs with carer: Yes No O₂ Sat: _____ % Resp. Rate: _____

Routine pre-hospital medications taken BSL: _____ mmol/L BP: _____ mmHg

Bowel prep: Yes No N/A Specify: _____ Result: _____

Pre-operative Investigation: ECG Bloods CXR/X-rays Other: _____

Locker No: _____ Property form completed by: _____ Old notes

Admission Nurse Name: _____ Signature: _____

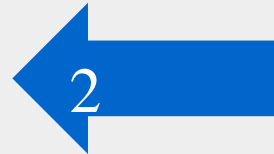
PRE-OPERATIVE CHECKLIST

	Y	N	N/A	OT1	OT2
Consent complete					
Operative Site Marked					
Premedication Given					
ID Bands X 2					
Name, MRN & DOB only					
Medical records present (old notes)					
Investigation result present					
X-Rays present					
Dental					
Does the patient have dentures/s					
Is denture removed (circle) upper / lower / partial					
Caps / crowns / braces present					
Pre-operative Clip attended (if necessary)					
Personal effects removed (glasses, contact lenses, hearing aides)					
Patient dressed for theatre					
VTE risk assessment completed & strategies for prevention commenced					
Strategies for fall prevention applied					
Waterlow score [] and visual skin inspection completed					
Makeup & Jewellery (please specify) removed or taped					
Nail polish removed					
Time last drink: _____ : _____ Time last food: _____ : _____					

OT: Clinical Handover #1 from Nurse: _____ to Nurse: _____

OT: Clinical Handover #2 from Nurse: _____ to Nurse: _____

This form has a reverse side



CLINICAL GUIDELINE: LAPAROSCOPIC CHOLECYSTECTOMY (TRIAL)

MR 11D



BINDING MARGIN - NO WRITING

April 15 1.0

CANTERBURY HOSPITAL

**CLINICAL GUIDELINE:
LAPAROSCOPIC
CHOLECYSTECTOMY (TRIAL)**

SURNAME	MRN
OTHER NAMES	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
D.O.B. ___/___/___	M.O.
ADDRESS	
LOCATION	

COMPLETE ALL DETAILS OR AFFIX PATIENT LABEL HERE

POST PROCEDURE				
	0-6 Hours	6-12 Hours	12-18 Hours	18-24 Hours
ADLs	<input type="checkbox"/> Post-op void			
Nutrition	<input type="checkbox"/> Free fluids	<input type="checkbox"/> Full fluids <input type="checkbox"/> Light diet	<input type="checkbox"/> Light diet	<input type="checkbox"/> Full diet <input type="checkbox"/> Cannula removed
Observations	<input type="checkbox"/> 1/24 (4 hrs) then 4/24	<input type="checkbox"/> 4/24	<input type="checkbox"/> 4/24	<input type="checkbox"/> 4/24
Medication	<input type="checkbox"/> Analgesia as ordered	<input type="checkbox"/> Analgesia	<input type="checkbox"/> Analgesia	<input type="checkbox"/> Analgesia
Treatment	<input type="checkbox"/> Check dressing <input type="checkbox"/> Check drain output	<input type="checkbox"/> Check dressing <input type="checkbox"/> Check drain output	<input type="checkbox"/> Check dressing <input type="checkbox"/> Check drain output if drainage > 30mL / bile noted - notify M.O.	<input type="checkbox"/> Check wound <input type="checkbox"/> Drain removed when output < 30mL / no bile
Patient Education			Understanding of: <input type="checkbox"/> Post-op complications	Understanding of: <input type="checkbox"/> Post-op care <input type="checkbox"/> Regular diet <input type="checkbox"/> No driving 1 week <input type="checkbox"/> No lifting or straining 2 weeks
Follow Up				<input type="checkbox"/> Rooms 2-3 weeks
Nurse Name & Signature, Date:				

ANAESTHETIC DISCHARGE CRITERIA			
Modified Post Anaesthetic Discharge Scoring System (MPADSS)	1. Vital Signs		2. Ambulation
	<i>The patient is clinically fit for discharge when the MPADSS score is ≥ 9</i>	<input type="checkbox"/> 2 = Within 20% of pre-operative value	<input type="checkbox"/> 1 = 20-40% of preoperative value
<input type="checkbox"/> 1 = >40% of preoperative value			<input type="checkbox"/> 1 = With assistance
<input type="checkbox"/> 0 = Severe			<input type="checkbox"/> 0 = None / dizziness
3. Nausea / Vomiting	4. Pain		5. Surgical Bleeding
<input type="checkbox"/> 2 = Minimal	<input type="checkbox"/> 2 = Minimal	<input type="checkbox"/> 1 = Moderate	<input type="checkbox"/> 2 = Minimal
<input type="checkbox"/> 1 = Moderate	<input type="checkbox"/> 1 = Moderate	<input type="checkbox"/> 0 = Severe	<input type="checkbox"/> 1 = Moderate
<input type="checkbox"/> 0 = Severe	<input type="checkbox"/> 0 = Severe		<input type="checkbox"/> 0 = Severe
SCORE: []	Nurse Name: _____	Signature: _____	Date: ___/___/___ Time: ___:___

MEDICAL REVIEW if MPADSS is < 9:	DISCHARGE CRITERIA
<input type="checkbox"/> Pain <input type="checkbox"/> Not tolerating diet <input type="checkbox"/> Wound swelling / bleeding / oozing <input type="checkbox"/> Drain output > 30mL <input type="checkbox"/> Notified M.O.: Name: _____ Time: ___:___	(Patient must meet all criteria to be discharged without medical review) <input type="checkbox"/> Mobile <input type="checkbox"/> Maintaining light or full diet <input type="checkbox"/> Passed urine <input type="checkbox"/> No wound swelling / bleeding / oozing <input type="checkbox"/> Drain removed, drainage < 30mL

Patient Accompanied by:
Nurse Name: _____ Signature: _____ Date: ___/___/___ Time: ___:___

DISCHARGE MEDICATION STANDING ORDER	
<input type="checkbox"/> Analgesia	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Antibiotics	_____

ADDITIONAL NOTES



CHLUBAT ON - NDIS/PA CHRONIE

Compliance Audit – 3months

	Cases	Did meet CLD Criteria	Variance noted	LOS longer
Lap Cholecystectomy	50	47	3	13
Hernia repair	50	47	3	6

- Data gathered
 - Date & time of surgery
 - Surgeon
 - Type of surgery
 - CLD eligible
 - Date & time of discharge
 - Comment



Barriers, challenges, opportunities

- Medical engagement
- NUM secondment/relief person(s)
- Ensure education of all new staff – Medical, Nursing
- Paediatric ward keen to participate
 - ENT :Tonsillectomy +/- Adenoidectomy



STARS Report

<http://stars.sswahs.nsw.gov.au/0/vAIAZ/c/ope.doc.htm?document=Us...>
Performance Monitoring, Case...
Acute Admitted Activity.qw...

File Edit View Favorites Tools Help

X Find: Previous Next Options

Clear Select Bookmark Select Report Share session More

Welcome Acute LOS Dashboard Acute Measure Dashboard **Comparison - Tables** Comparison - Charts Quick Report Details Patient Details Glossary How To

Health Sydney Local Health District

Performance Monitoring, Systems Improvement & Innovation

Coded Episodes % 97.63%

Last refresh: 24/11/2015 7:51:42 AM

Current Selections
 Measure ALOS

Measure
 ALOS Avg Cost Wgt

Group 1
 FinancialYear
 Year
 Month
 Facility

Group 2
 FinancialYear
 Year
 Month
 Facility

Comparison

Facility	Group 1 ALOS	Group 1 % Total ALOS	Group 2 ALOS	Group 2 % Total ALOS	Change	Change %
Balmain Hospital	5.85	23.86%	5.85	23.86%	0.00	0.00%
Canterbury Hospital	3.16	12.86%	3.16	12.86%	0.00	0.00%
Concord Hospital	4.12	16.80%	4.12	16.80%	0.00	0.00%
Royal Prince Alfred Hospital	4.26	17.37%	4.26	17.37%	0.00	0.00%
RPAH Institute of Rheumatology & Orthopaedics	3.35	13.65%	3.35	13.65%	0.00	0.00%
Tresillian Family Care	3.79	15.46%	3.79	15.46%	0.00	0.00%
Canterbury/Willoughby/Wollston...	4.04	100.00%	4.04	100.00%	0.00	0.00%

Clinical Stream
 A MISSING CLINICAL STREAM
 Aged Care
 Cancer
 Cardiovascular
 Critical Care

Specialty Unit
 Breast & Surgical Oncology
 Breast/endocrine
 Burns
 Cardiology
 Cardiothoracic Surgery

Ward
 1E
 1N
 1S-RADU
 1W-ACE

DRG
 801A - OR Procedures Unrelated to
 801B - OR Procedures Unrelated to
 801C - OR Procedures Unrelated to
 960Z - Ungroupable
 A01Z - Liver Transplant

DRG Type
 Medical
 Other
 Surgical



<http://stars.szwahs.nsw.gov.au/QueryAJAXZfc/ependoc.htm?document=Usi>
 Performance Monitoring, Case... Acute Admitted Activity.qvw

File Edit View Favorites Tools Help

X Find: Previous Next Options

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Welcome Acute LOS Dashboard Acute Measure Dashboard **Comparison - Tables** Comparison - Charts Quick Report Details Patient Details Glossary How To

Performance Monitoring, Systems Improvement & Innovation

Coded Episodes % 100.00% Search Last refresh: 24/11/2015 7:51:42 AM

Current Selections
 DRG: G10B - Hernia Procedures W/O CC
 Facility: Canterbury Hospital
 Specialty Unit: General Surg

Measure
 ALOS Avg Cost Wgt
 Episodes
 Outlier Episode
 Uncoded Episodes

Group 1
 Financial Year
 Year
 Month
 Facility

Group 2
 Financial Year
 Year
 Month
 Facility

Comparison

Facility	Group 1 ALOS	Group 1 % Total ALOS	Group 2 ALOS	Group 2 % Total ALOS	Change	Change %
Canterbury Hospital	1.48	100.00%	1.48	100.00%	0.00	0.00%
	1.48	100.00%	1.48	100.00%	0.00	0.00%

Clinical Stream
 Gastroenterology and Liver
 A MISSING CLINICAL STREAM
 Aged Care
 Cancer
 Cardiovascular

Specialty Unit
 General Surgery
 Breast & Surgical Oncology
 Breast/endocrine
 Burns
 Cardiology

Ward
 Acacia
 Banksia
 Boronia
 DPU
 Grevillea

DRG
 G10B - Hernia Procedures W/O CC
 801A - OR Procedures Unrelated to
 801B - OR Procedures Unrelated to
 801C - OR Procedures Unrelated to
 B05Z - Carpal Tunnel Release

DRG Type
 Medical
 Other
 Surgical



Where to from here?

- Hospital executive support
- Plan to increase medical engagement
- Use of KPIs
 1. LOS surgeon specific
 2. Readmission rate
 3. Benefit e.g. first case start on time
 4. Discharges before 1000
 - Roll out to other specialities

