

Getting Home in Time for Tea: Streamlining Discharges from a General Paediatric Ward

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Introduction

- Due to the increasing demand on hospital services, bed pressures are becoming more of an issue in the NHS.
- Discharges are often delayed due to clinical tasks taking priority which results in further backlogs in acute areas such as A&E and assessment units.
- The later the discharge, the fewer medical, nursing and pharmacy staff are available to facilitate the discharge potentially leading to patient safety issues.
- By getting children home earlier in the day, their families can get back in to a routine and children can get to bed at a reasonable time.
- The NHS improvement SAFER patient flow bundle aims for 33% of patients to be discharged before midday¹.
- In April 2019, Leeds Teaching Hospitals NHS Trust (LTH) set up a hospital wide discharge collaborative with an ultimate aim of getting 80% of patients discharged home before 4pm.
- L09 is a general paediatric ward at Leeds General Infirmary, made up of 14 cubicles and was included in the initial pilot study.
- At the offset L09 had a median percentage of 43% of patients discharged before 4pm.
- This study looks at how we tried to increase the number of patients discharged before 4pm, therefore freeing up bed spaces earlier in the day.

Aims

- To increase the median percentage of patients on L09 discharged before 4pm, ultimately to 80% by end of 2020.
- To establish a team of discharge “champions” who would promote the work on L09 across the Leeds Children’s Hospital.

Methods

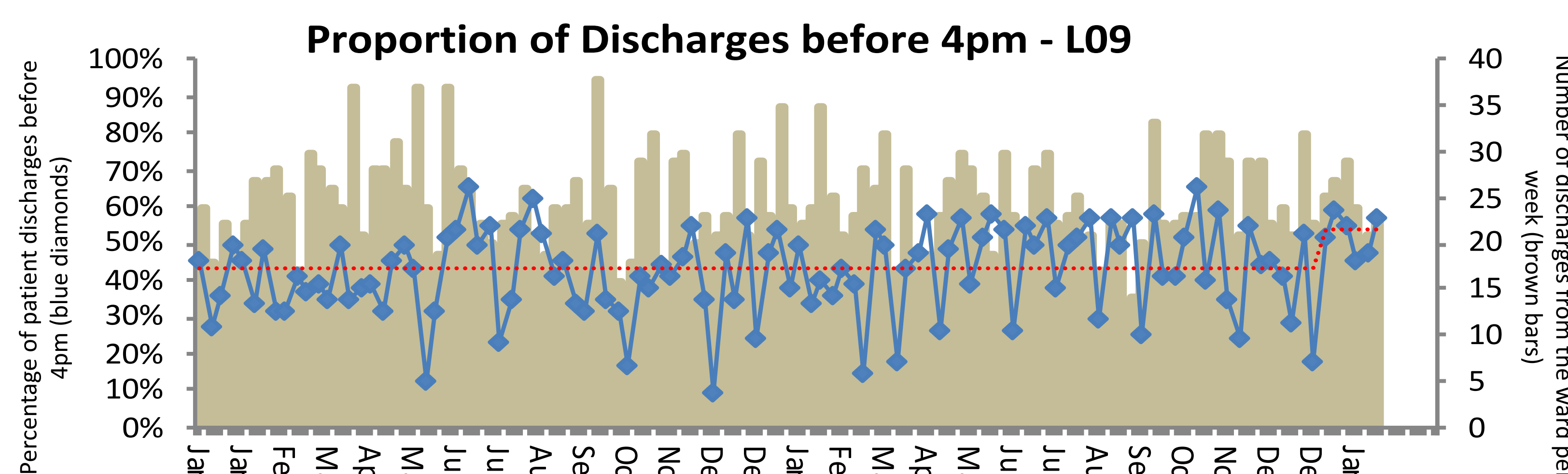
- A multidisciplinary team (MDT) was set up within the Leeds Children’s Hospital comprising of a leadership fellow, nursing staff, a trainee advanced care practitioner, a pharmacist and discharge co-ordinators.
- A member of the paediatric MDT met with the Trust’s discharge collaborative on a fortnightly basis.
- The Trust’s discharge collaborative comprised of 24 wards across LTH encompassing a variety of specialities, the majority of which were adult wards.
- The collaborative group met every 2 weeks and shared ideas, discussed successes and areas for improvement through a series of PDSA cycles.
- The ideas were implemented and reviewed on ward L09.
- Each week Patient Administration System (PAS) data was collected and circulated by the informatics team including the number of discharges per week, the percentage of patients discharged home before 4pm and the timing of discharges throughout the week.
- The results and metrics were displayed on ward L09 for all staff to see.

Methods

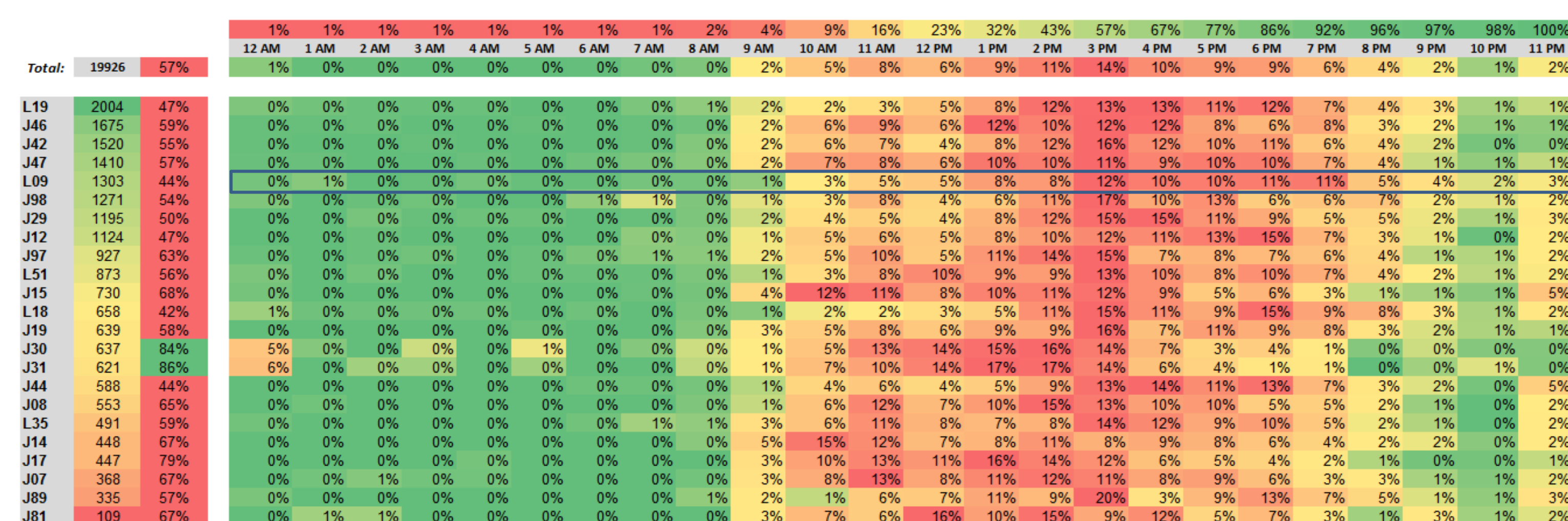
- The interventions introduced included:
 - Discharge boards
 - Discharge slips
 - Discharges discussed in every huddle
 - eDAN mnemonic posters
 - eDAN myth buster
 - Increasing the number of discharge medicines on L09
 - Priority delivery from pharmacy to L09

Results

- The run chart below shows the number of discharges per week on ward L09 and the percentage of those which occurred before 4pm
- Prior to the interventions set out, 43% of patients were discharged home before 4pm
- Through a series of PDSA cycles, the median proportion of patients discharged before 4pm increased to 53%.
- The median number of discharges per week on L09 is 24 which varies depending on the time of the year



- The heat map below shows the percentage of discharges at each hour for each of the wards at LTH in the discharge collaborative for the year of 2019 with L09 highlighted.
- L09’s yearly average of discharges before 4pm for 2019 was 44%, an increase of 10% from 2018.



Conclusions

- Through MDT working, sharing ideas and simple interventions, there has been a 10% increase in children being discharged home before 4pm.
- Further interventions are needed to engage rotating doctors and the wider MDT to make this change sustainable.
- Feedback from ward staff and parents about the changes which have been implemented has been very positive.
- We aim to further increase the number of patients discharged before 4pm to 80% by the end of 2020 now that we are fully established in the collaborative and have seven discharge “champions” in paediatrics.
- We have started on disseminating the positive impact across the remaining wards within the Leeds Children’s Hospital – four paediatric wards are now involved in the collaborative.

References:

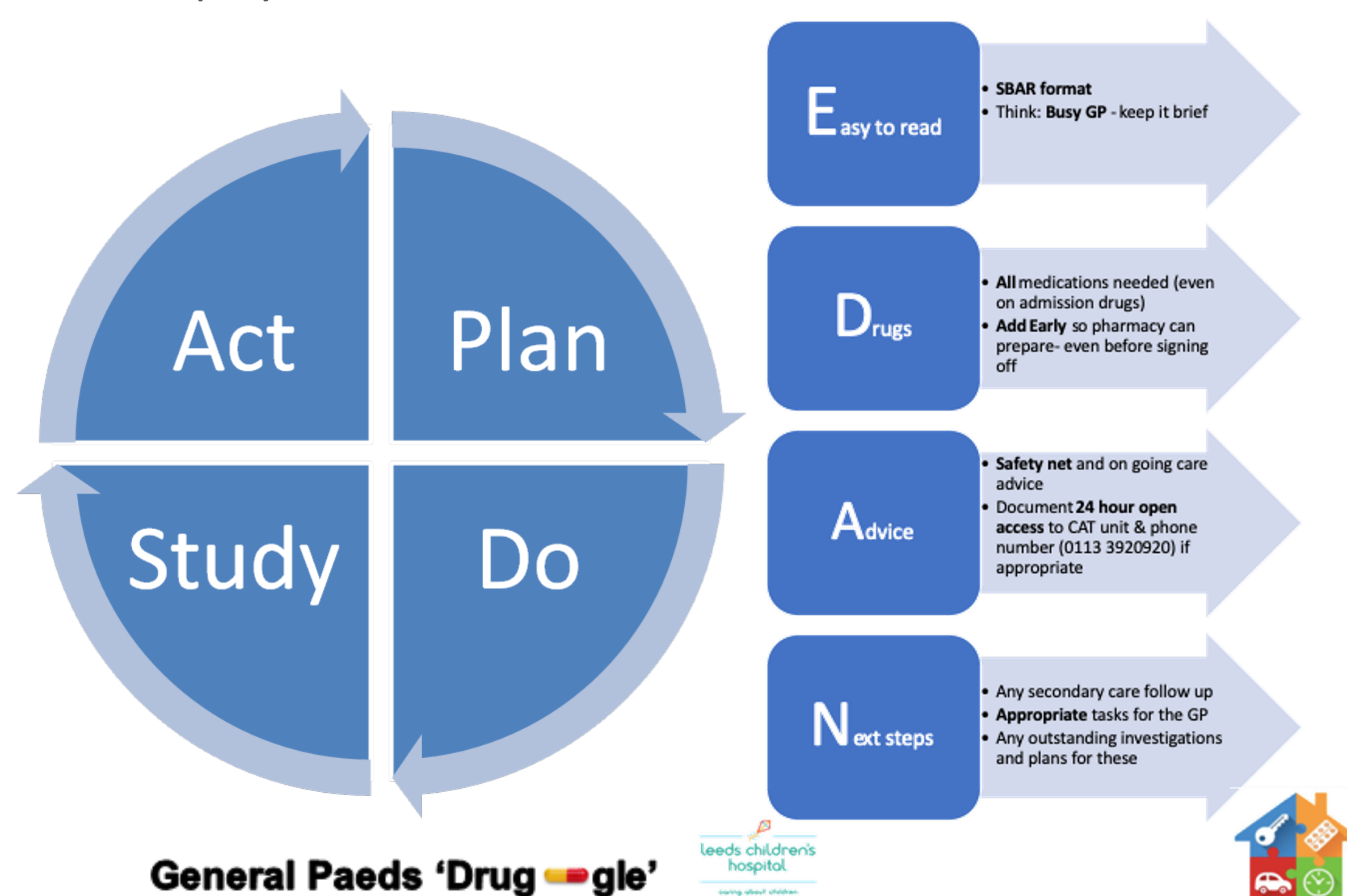
- SAFER Patient Flow Bundle. NHS Improvement. Sept 2016.

Acknowledgements:

With special thanks to Anna Winfield, Viv Lewis, Craig Pattison and Catherine Bell

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HOT TOPIC
Discharge collaborative
eDAN mythbusters special

- You can add medicines to the discharge tab at any point – not just when completing eDANs (remember to use the discharge reconciliation button!)
- If you are fairly certain that the medicines will not change before the patient’s discharge then finalise the medication and let pharmacy know – this means they can be ordered in advance and reduce waiting time
- Pharmacy don’t have alerts set for eDANs – if you have finalised and authorised one please let us know to make sure it doesn’t get forgotten
- Please remember to exit the ‘tasks’ screen and the eMeds chart to ensure other members of staff can access them (we can override eMeds if necessary but not the tasks page!)
- Once an eDAN has been sent to pharmacy and dispensed it can be returned to clinician for additional clinical details to be added