



CASE STUDY: ACUTE HOSPITAL, DISCHARGE PLANNING & BED MANAGEMENT



16 Wards

~500 Beds

Project Duration:
20 calendar weeks

Management population: 28

Clinical Consultants: 44

BACKGROUND

During the summer, the hospital was anticipating the impending winter bed crisis.

The previous winter's bed crisis had seen much chaos with elective patients being cancelled for theatre on a daily basis.

Meridian was invited to carry out a study on the processes, structure and systems in place to manage the bed base at the hospital.

STUDY FINDINGS

Following a three week study, working with the local management team, clinical teams and nursing staff, Meridian identified a number of areas which, if addressed would substantially improve the overall productivity of the bed base.

The study evaluated the productivity of the bed base by carrying out a twice daily census. This census analysed the "active" activities happening with all beds on a daily basis. The outcome revealed that only 68% of beds were active on a daily basis.

There were many reasons for this low productivity; they ranged from "consultant unaware that patient was under their care" to "waiting on social services".

Following the study it was felt that the "bed managers" albeit they worked tirelessly

looking for beds were very much reactive to the problems facing them.

OBJECTIVES

From the study Meridian set out a project plan with the objective of:

Developing and implementing a "real time" and accurate patient status including:

- Patient location
- Expected discharge date
- Discharge check list

Restructuring the roles and responsibilities of the bed management team, with the goal of reducing the Average Length of Stay

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PROJECT ELEMENTS

Discharge Planning

The programme integrated into the current hospital systems and used the hospital's "Immediate Discharge System" to allow information on patient discharge dates and their location within the hospital to be recorded in a systematic and timely manner.

The additional information programmed onto the system included:

- Expected Discharge Date
- Confirmation of Expected Discharge Date
- Review Date
- Medically Fit Date
- Patient Checklist
- Ward Menu
- Allocation of beds
- Check List
- Ward List

Bed Management

A system of recording patients against a bed number was designed to allow patient transfers between wards and discharges to be recorded at ward level, allowing the location of each patient to be accurately traced. The Bed Management system generates reports in real time with location and discharge information including:

- Patients by Consultant by Ward.
- Patients due for Discharge Today or Tomorrow - confirmed discharge dates and whether the Immediate Discharge Paperwork is complete
- Patients without a Discharge or Review Date and who may not have been seen on a ward round
- Available Beds - Identifying beds available across the hospital by ward.

RESULTS

The delivery of the project was focused on two-pronged approach:

Developing and implementing the processes required to deliver real time patient information (which are integrated into hospital's "Immediate Discharge System"). Delivering the behaviour change required to get all stakeholders, including clinical teams, ward staff, ward management and bed management to use the system in real time.

This new way of working allows all stakeholders including the bed management team to have a live view of the actual status of the hospital bed base at any given time.

This system now enables the bed management team to anticipate delayed discharges and work out proactive solutions for their discharge in a timely fashion.

After only a few weeks of operation the programme is already showing a reduction in the length of stay in the "long stay medical category".



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