

Acute Hospital Discharge Rapid Improvement Event (RIE)

Sonya Sellar Adult Social Care

Health Scrutiny Committee - September 2013

Background



- Growing demand on the health and social care system means acute hospitals continue to be concerned about discharge
- Causes of delayed discharges are often multi-agency and complex
- Delays are not good for people's health and wellbeing, cost the acute hospitals unnecessary resources and block vital beds

RIE - aim and objectives

'Improve the patient experience and discharge process by working together as partners to ensure that as soon as patients no longer need acute hospital care they are discharged safely'

- Establish a shared understanding of, and identify joint solutions to, the issues/obstacles associated with the hospital discharge pathway across Surrey
- Define consistent discharge pathways, wherever possible
- Agree common standards across Surrey hospitals to underpin the discharge pathway and arrangements
- Agree performance indicators which will track and assess collective performance in hospital discharge across Surrey

RIE held recently and work is at an early stage

RIE - areas of improvement identified

- Proactive multi disciplinary teams
- Standard operating framework
- Patient information and expectations
- Read only access to systems
- Continuing health care
- Transport home
- Community providers 'pull' people out
- Create capacity in the community
- Performance measures

RIE - transport home

Continue to work with SECAmb to improve services

- Work to secure best value from existing contract
- Support existing Patient Transport Service Improvement Programme
- Ensure staff understand SECAmb eligibility criteria and are equipped to have brave conversations
- 'Going Home Discharge Plan' is started from admission (wherever possible) and will include transport home arrangements



RIE - transport home

Make more transport home options available

- Explore possibility of growing volunteer transport home services
- Make better use of all transport options by working with providers, the voluntary sector, the public etc

