

Leading improvements for a patient-centred effective discharge process



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Introduction and Aims: Discharge process is an essential part of patient care and safety. Patient survey revealed dissatisfaction with discharge process and delays in TTO (To Take out medications). Therefore, I aimed to deliver change and lead improvements with collaboration from Medicine Group and Pharmacy specialty. The aims included:

- (a) Understanding discharge processes.
- (b) Identifying area of improvements.
- (c) Removing waste.

Method: Process was mapped to identify areas of improvement including when can we tell patient time of discharge. Process waste was identified. Interventions were planned keeping patients at centre and 'Proof of concept' was ran with 4 wards for 3 weeks.

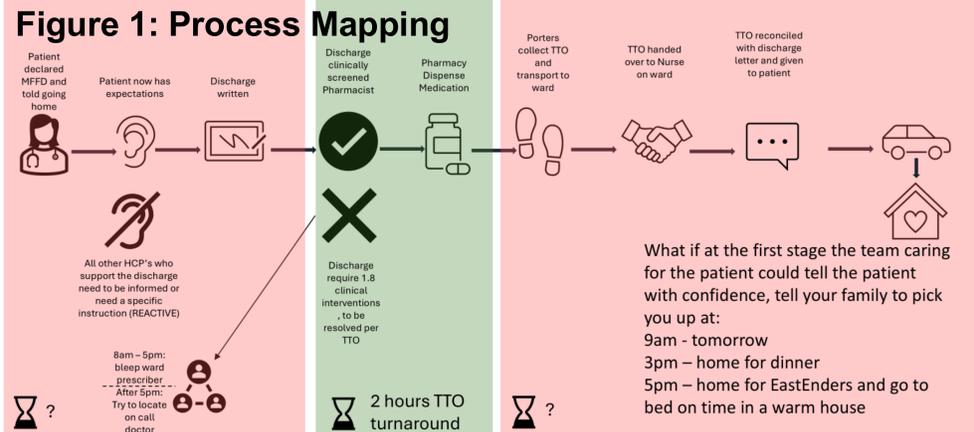
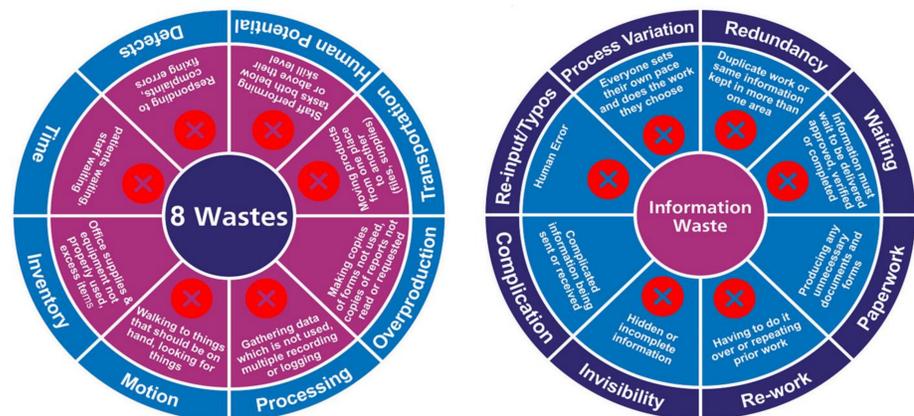


Figure 2: Identifying waste



Interventions: Multi-disciplinary approach was utilised for change to include nurses, doctors, pharmacists, managers and patients.

Standard operating procedure for discharge process

Discharge standards for TTO processing by Pharmacy

Submitted by Prescriber	Clinically Screened by Pharmacist	Dispensed by Pharmacy
Before 15:30*	Same Day	Same Day
Between 15:30 and 17:00	Same Day	Next Day
After 17:00	Next Day	Next Day

Digitally live patient status board access

TTO champions for each ward

Pharmacy assistant to review every patient awaiting discharge and avoid medication duplication

Results: (n=300) -Figure 3: Behaviour change

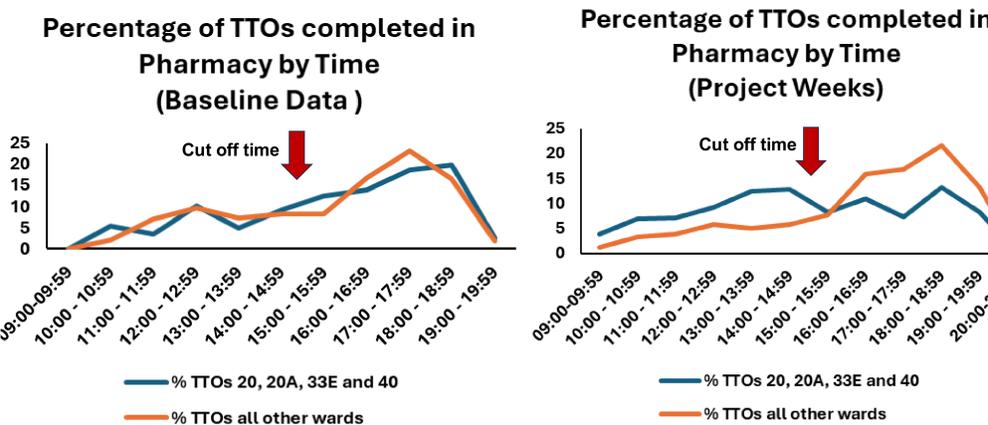
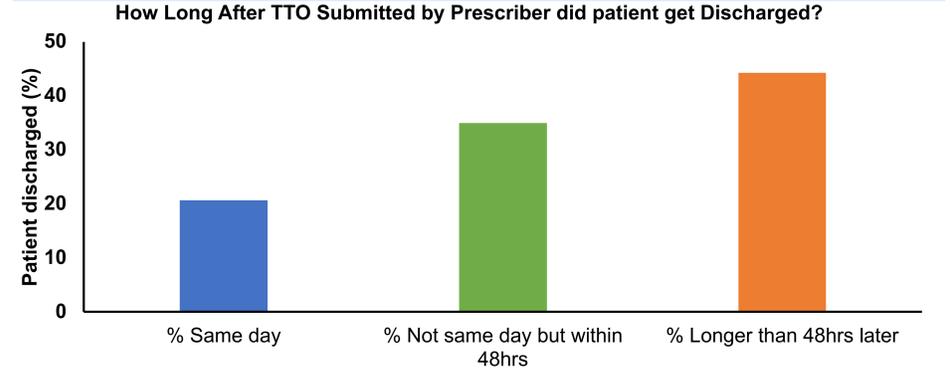


Figure 4: Waste removed

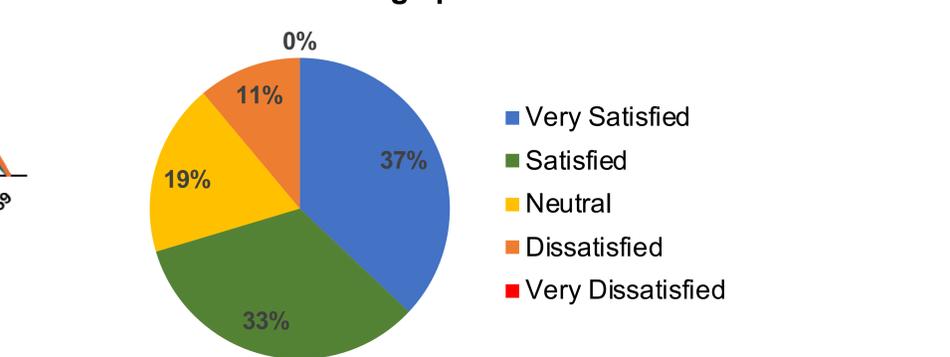


Results: (n=300)-Figure 5: Impact



Significant improvement was noticed in TTOs being submitted before cut off-(Figure 3) leading to 60% patients being discharged within 24-48 hours of being declared medically optimised-(Figure 5). Using patients own medication and non-duplication avoided £3407.62 in costs during the project. Patient feedback (n=27) showed 70% satisfaction rate-(Figure 6). Digitally live patient status board enabled easy access to updated data to all teams as per staff feedback.

Figure 6: How satisfied were you with the overall discharge process?



Conclusion: Patient-centred discharge standards and collaboration between teams allowed for the removal of waste, process and monetary. It also showed positive change in behaviour with TTO submission and processing, length of stay and patient and staff satisfaction. The project was widely recognised and has now rolled out to the wider-trust to improve patient care and safety.