CENTRE FOR HEALTHCARE INNOVATION

CHI Learning & Development System (CHILD)

Project Title

To Improve Patient's Satisfaction by Enhancing Discharge Process for Complex Cases in NHCS Wards

Project Lead and Members

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Organisation(s) Involved

National Heart Centre Singapore

Healthcare Family Group Involved in this Project

Nursing

Specialty or Discipline

Cardiology

Project Period

Start date: Jun 2019

Completed date: Aug 2019

Aims

• 80% Caregivers Confident in Taking Care of Complex Care Patients at Home



CHI Learning & Development System (CHILD)

 80% Complex Care Patients Complete Discharge Process within 1 Hour on Discharge Day

Background

See poster appended / below

Methods

See poster appended / below

Results

See poster appended / below

Lessons Learnt

See poster appended / below

Conclusion

See poster appended / below

Additional Information

Singapore Healthcare Management (SHM) Conference 2021 – Shortlisted Project (Patient Experience Category)

Project Category

Care & Process Redesign, Quality Improvement, Workflow Redesign, Access To Care, Turnaround Time, Value Based Care, Discharge Planning, Patient Satisfaction, Productivity, Training & Education

Keywords

Caregivers, Discharge Checklists



CHI Learning & Development System (CHILD)

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To Improve Patient's Satisfaction By Enhancing Discharge Process For Complex Cases In NHC5 Wards



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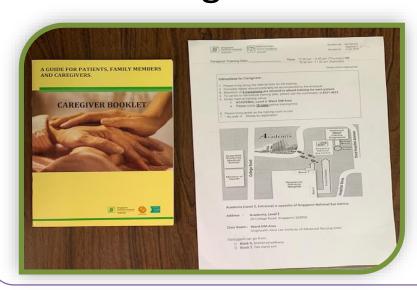
BACKGROUND





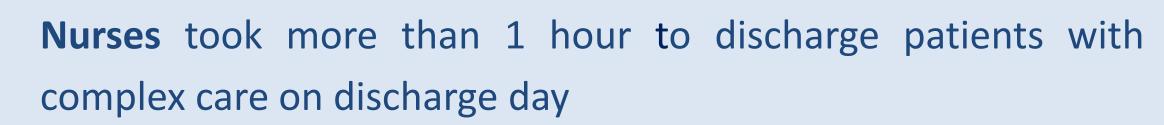


Patients are getting more complex in their care upon discharge. Definition of patients with complex care are patients who are unsuitable for step-down care in any institutions. in view that they are supported on special medical devices or treatments e.g. patients discharged with feeding tubes, tracheostomy and assistive devices. Hence, they need to be discharged to home with the help of caregivers.



Caregivers were typically sent to Academia for Caregiver Training (CGT); with the cessation of CGT at Academia in Jan 2019, individual wards were tasked to provide teaching support to caregivers. The basic skills taught, did not meet complex needs of the complex case cardiac patients.

Previous Situations





More than 50% of **nurses** shared that discharging complex care patients requires a lot of logistics planning and coordination prior to the actual discharge day



Caregiver felt stressed to bring patients home with complex care needs



80% Caregivers Confident In Taking Care Of Complex Care Patients At Home



METHODOLOGY



Redesigned workflow

Structured discharge teaching guideline for nurses Ensures important information given to patient/caregiver



REFERRAL OF

COMPLEX CARE

within 24 hours of

(Early discharge

planning

admission)

Team designed discharge checklists





Developed in-house teaching slides for complex cases

PLANNING

checklist with Staff Nurse

(SN) and the necessary

PN plan discharge

care giver training

Holistic teaching material is easy to understand Teachings on Different aspects of nursing care Catered for complex patient's needs

Patient given complete discharge information Teaching slides are compiled into one folder Tailored for individual patient's needs

Early discharge planning = Caregivers have ample time to prepare for discharge of patient to home Nurses prepare discharge arrangements in advance

DAY OF DICHARGE

Reinforce discharge instructions

SN arrange to collect new

with the prepared checklist

Smooth Hospital to Home

medications (if any).

Arrange for equipment delivery & consumables

Experience

1 DAY BEFORE DISCHARGE

prepares doctor's appointments,

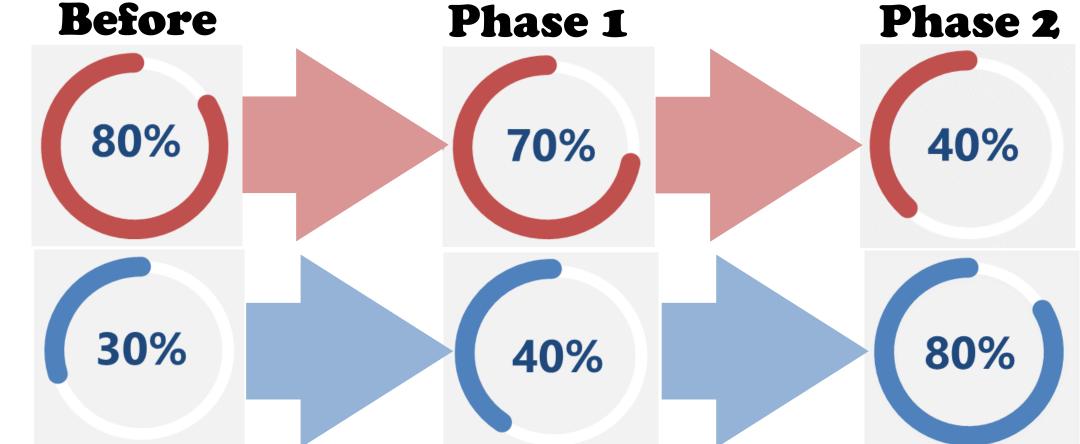
SN: arranges transport,

collect medications,

RESULTS

Percentage of caregiver stressed to care for complex patients at home

Percentage of caregiver confident to bring patient home



Target Met Phase 1 Trial from 15 Jun 19 - 7 Jul 19 | Phase 2 Trial from 1 Aug 19 - 14 Aug 19

80% Caregivers Confident In Taking Care Of Complex Care Patients

95% Complex Care Patients Complete Discharge Process Within 1 Hour

The increase in caretakers' confidence to care for patients at home had led to a Decrease in Waiting Time to Discharge and a Reduction in Length of Stay.

| | 2019 | 2020 |
|---------------------------------|---------------------|---------------------|
| No. of Complex Cases discharged | 10 | 10 |
| Length of stay | 2 weeks – 12 months | 2 weeks – 13 months |
| Waiting time to go home | 38 days | 28 days |
| Unscheduled Readmission | 0 | 0 |



HOSPTIAL BED COST SAVINGS \$10,000



HOSPITAL BEDS SAVINGS 200 BED DAYS

REDESIGNED CHECKLIST, SLIDES AND DISCHARGE FOLDER

ENHANCED WORKFLOW

03

DISCHARGE

TEACHING

discharge teaching hand-outs,

provide all necessary info in

PN prepares in-house

the discharge folder

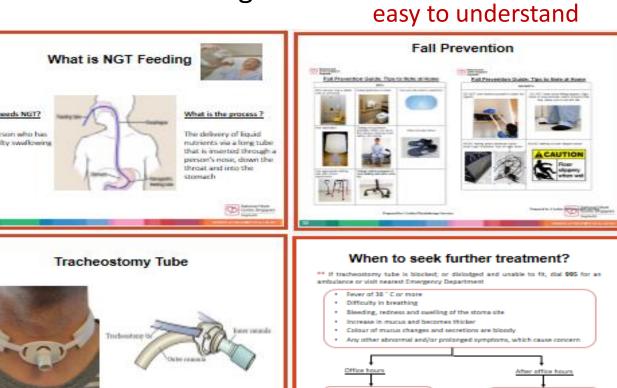
Discharge Checklist

Checklist and structured guidelines for caregiver to follow up includes:

- NGT feeding
- Elimination (Urinary & Bowel)
- **Blood Glucose Monitoring**
- Skin Care & Protection Tracheostomy & Suctioning
- Equipment

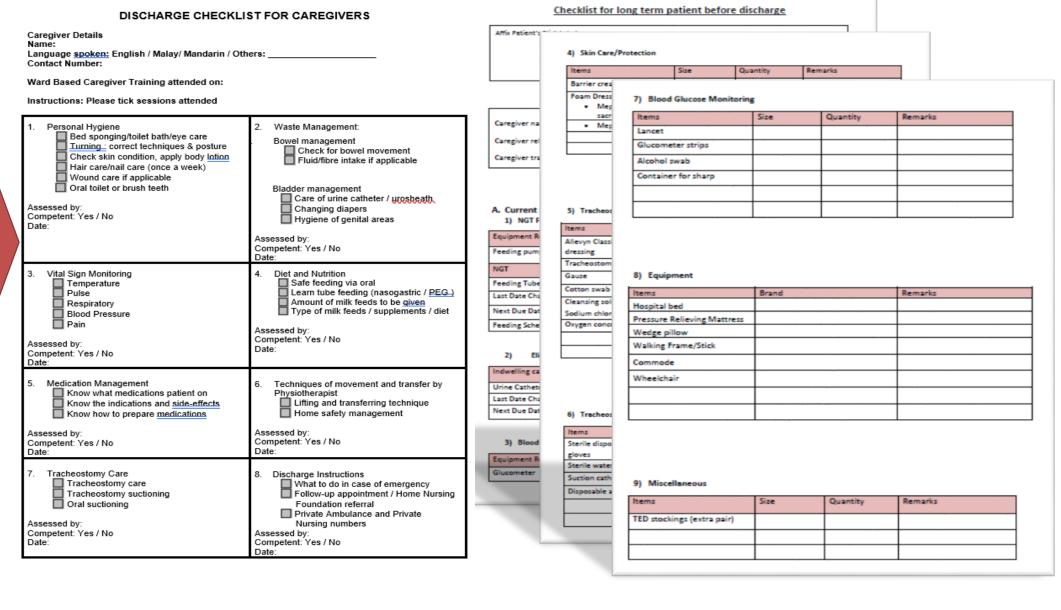
In-house Caregiver training (CGT) Slides

- 7 modules were created: Personal Hygiene
- limination needs Vital Signs monitoring
- Diet and Nutrition
- **Medication Management** What is NGT Feeding

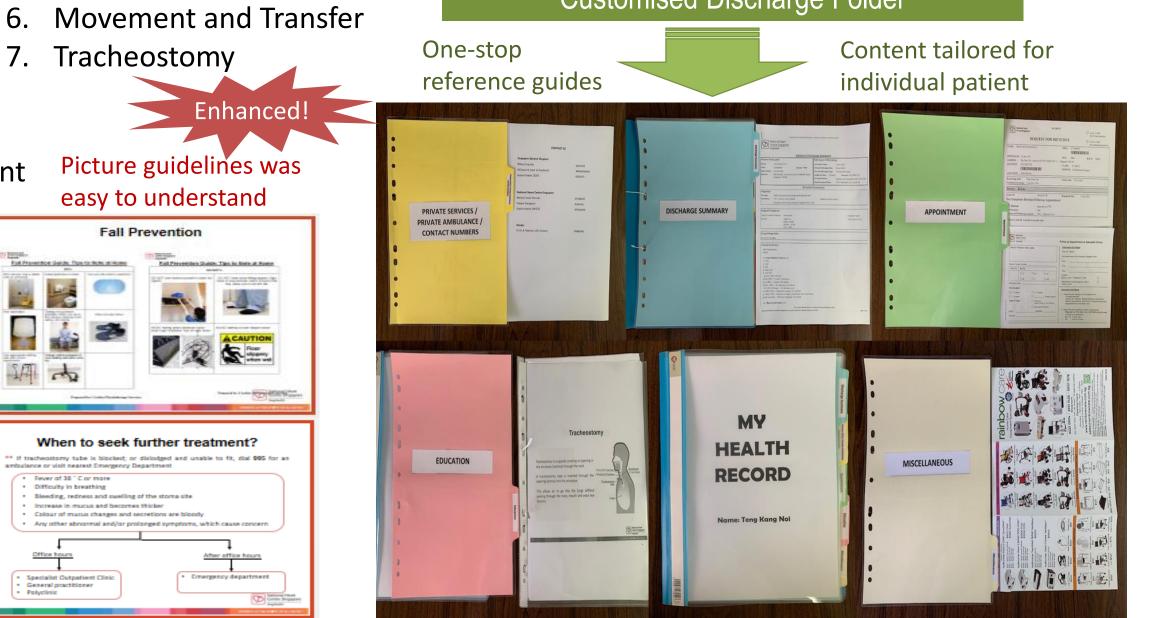


7. Tracheostomy

Picture guidelines was



Customised Discharge Folder



Intangible Benefits

- Patient and caregivers receive standardised teaching
- Increase patient & caregiver satisfaction and experiences
- Improved teamwork and work efficiency amongst staff
- NHCS as a preferred healthcare organization
- Supports NHCS strategic objective: Improving care for all patients
 - "I am more confident to bring my mom home after the caregiver training"

"Comprehensive information were provided in 1 folder and it was very useful to carry around"



"The discharge checklist had saved me precious time organizing my patient's discharge. I am very confident that I will not miss out on any discharge instructions that is required for my patients"

> " My patients are able to be discharged safely and timely"

SUSTENANCE

- Regular audit to ensure staff are aware of sourcing for the teaching slides
- Training for existing and new staff
- Continuous monitoring of patient and nurse satisfaction
- Monitoring of improved time of discharging patients with complex care
- Regular feedback with staff on implementation