Enhanced Patient Transfers (Back End) – CCLHD and NSW Ambulance

A Joint Project between Central Coast Local Health District and NSW Ambulance

Project Team:
Mel Willis
Deb Scott
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What was the challenge?

• To improve the patient experience and overall patient flow by reducing delays in discharge transfers of patients being transported by NSW Ambulance from CCLHD facilities

• To successfully undertake a collaborative project between the two services (CCLHD & NSW Ambulance) involved in the transfer process

• To improve communication between both services
It started by chance...

- The idea for this initiative arose by chance during a meeting attended by NSW Ambulance and CCLHD staff.

- During the meeting it became clear that everyone was frustrated with the delays caused by the existing discharge transfer process.

- It also became clear that no-one had an understanding of the process, the transport options available, the impact delays were having and, most importantly, the real cause or impact of the delays.
Practical Steps

1. The Redesign Leads from NSW Ambulance and CCLHD proposed to their respective Executive Teams that a collaborative project team be formed to take the challenge as a project to the NSW Centre for Healthcare Redesign (CHR) 20 week Diploma Program.

2. Executive Leaders from both NSW Ambulance and CCLHD endorsed the initiative.

3. Project teams members were selected and accepted the challenge.

4. Clinical Redesign Methodology was applied during the 20 week program in a supported learning environment which not only addressed the challenge but built the capacity of the project team members to apply robust methodology when addressing a challenge.

Governance Structure set up

- Project Sponsor: Jamie Vernon, NSW Ambulance
- Project Sponsor: Martin Malone, CCLHD
- Joint NSW Ambulance & CCLHD Steering Committee

- Redesign Projects Steering Committee
- Tier 2 weekly Patient Flow Meeting

- Major Project Executive Steering Committee
- Senior Leadership Team Meetings

- Project Team:
  - NSW Ambulance: Craig Stevens, Mel Willis
  - CCLHD: Deb Scott
Common Goals were identified

To improve stakeholder communication regarding patient discharge timeframes

To ensure appropriateness of transport options for patients

To provide a streamlined booking and scheduling process for patients

To improve patient and staff satisfaction with the process
Stakeholders were consulted

Working Parties
- Northern Control Centre Solution Workshop
- Gosford Hospital Solution Workshop
- Wyong Hospital Solution Workshop

Attendees
- SOCO
- DOCO
- ACCM
- Paramedics
- NUMs
- Nurses
- Booking Clerks
- PATU

Patients

Staff
Key Issues were identified

- 4% of discharges (average 9/day) CCLHD transported by ambulance
- Total ART hours CCLHD, August 2012 - 291 hours, costing approx. $65000
- 63% of transport booking requests were made on day of discharge
- 56% of requests are for transport between 1200 and 1500
- 59% of ambulance transports picked up within 2 hours of request time
- 38% variance in entering CCLHD request time into VisiCAD
- NSW Ambulance unaware which transports are priority for patient flow
- 94.4hrs of delay for ED patients waiting for ward bed (over 2 week period)
- CCLHD staff understand time on PATU Form to be a booking ‘Pick Up’ time but NSW Ambulance staff consider it to be a ‘patient ready from’ time
Solutions were designed

- Discharge prioritisation on a daily basis from CCLHD sites
- Reinforcement of dispatch procedures, not multi-assigning cases to resources
- Development of an education package regarding Patient Flow and Patient Transport for Control Centre staff
- Maintenance of PTS rosters on the Central Coast
- Movement of PTS roster to the northern end of the Central Coast
- Process to follow when transport arrives but patient not ready for pick up
- Development of a risk assessment tool for discharge mode of transport
- A single point of pick up for all non-emergency patient transfers from CCLHD facilities
- Revise and reinforce the discharge planning process for all patients within CCLHD
- Redesign of ambulance transfer request form

Green = Quick Wins  Blue = Solutions for NSW Ambulance  Red = Solutions for CCLHD
What We Are Implementing

Communication
Discharge prioritisation on a daily basis from CCLHD sites.

Improving Patient Flow
A single point of pick up for all non-emergency patient transfers from CCLHD facilities
Process to follow when transport arrives but patient not ready for pick up.

Improving Processes & Service
Revise and reinforce the discharge planning process for all patients within CCLHD facilities
Redesign of ambulance transfer request form and process of booking

Increasing Service Capacity
Maintenance of PTS roster on the Central Coast
Movement of PTS roster to Morisset Station.

Education
Reinforcement of dispatch procedures, not multi-assigning cases to resources.
Development of an education package regarding Patient Flow and Patient Transport for Control Centre staff
Development of a risk assessment tool for discharge mode of transport.
New Forms
The NEW Patient Journey

All processes are working efficiently to eliminate any delay in the discharge of patients.

A process that sees the appropriate method of discharge for the patient.
Lessons learned

- Continued ownership of the project is very important to maintain focus towards the objectives
- Engage with staff – putting all the process owners in the room together was invaluable
- Redesign leads are an extremely valuable resource for project success

Though NSW Ambulance is responsible for only 4% of discharge transports from CCLHD there is such demand on both our systems that any slight delay either in transport pick up, discharge planning, patient readiness, booking process etc. impacts on patient flow.

Add to this any increase in Triple Zero (000) calls, other NEPT requests, presentations to ED, acuity of patients and staff sick leave and the system ultimately experiences increased OS time, TOC and ART hours.
Lessons learned

‘The program is well worth participating in if you are prepared to put the effort in. I would highly commend this program to other staff. The collaborative project was brilliant. The buy in we all got (as project team) with stakeholders was magnified due to the collaboration’. (Project Team Member)

‘Accolades to the team. Their work has gone a long way in reinforcing the relationship between NSW Ambulance and LHD as well as providing a positive no-blame direction for improvement’. (Sponsor)

‘Our goal is to deliver better care as a system, not as individual organisations. Seeing this team working together to improve patient care and breaking down historical barriers is very encouraging, and we hope to have more collaborative projects participating in the Centre for Healthcare Redesign Program’. (Manager from the Centre for Healthcare Redesign, ACI)

Acknowledgements

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Central Coast Local Health District staff, PATU staff and NSW Ambulance staff