

TRANSIT LOUNGE REMODEL

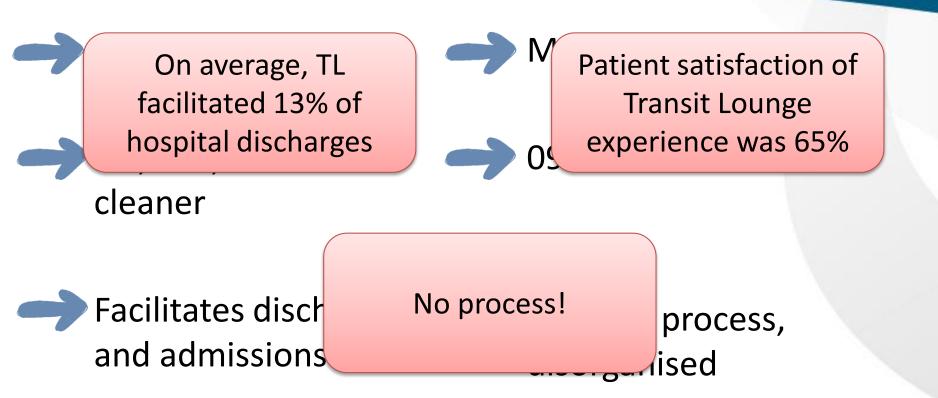
"WINTER WONDER LOUNGE"

RNSH

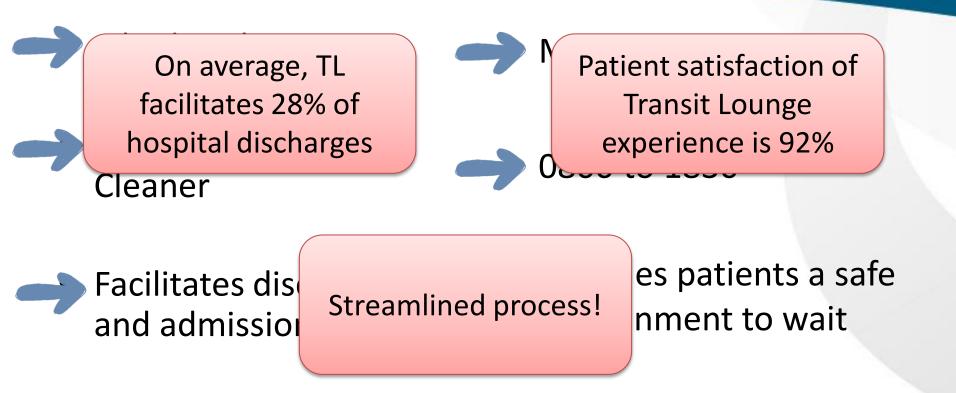
Charlotte Mills Matthew Graham



What <u>WAS</u> the Transit Lounge?



What is the Transit Lounge <u>NOW</u>?



Why did we Remodel it?

Patient Flow

Patient Experience

Admitted ETP target
 currently on average
 35%



I've been sitting here all day with nothing to eat

🧊 Only are

Only 9% of discharges are before 10am

Admission to bed ready goal of 45 minutes

I haven't seen a nurse all day

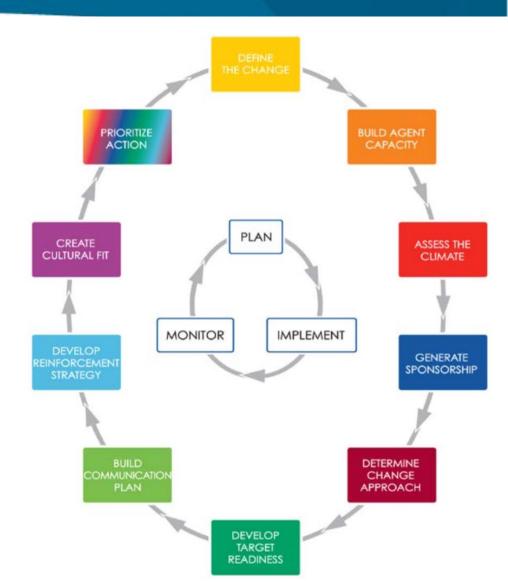


Why did I have to leave my bed to come and be dumped here

How did we do it?

ACI Redesign School

Accelerating Implementation Methodology (AIM)



Project Goal



Provide an efficient, patient centred Transit Lounge model of care, that improves patient flow whilst completing a positive hospital journey.





Objective 1: Increase usage to aid in hospital patient flow

By December 2017, 35% of RNSH in patient discharges will flow through the Transit Lounge



By December 2017, 100% of patients transferred to the Transit Lounge will have a positive experience that completes their hospital journey

Key Stakeholders



T Sponsor – Patient Flow Manager

Steering Committee – DNMs, Medical Representative, Deputy Director of Pharmacy, Redesign and Innovation Manager

\star Clinical Champions

- NUMs/RNs
- Enrolled Nurse TL
- After hours Team Leaders



Diagnostic Phase

• Focus groups

- NUM/ nursing attendance (n= 19)
- Pharmacy (n=6)

• Site visits

- Liverpool Hsp
- Westmead Hsp

Surveys

- Nursing (n= 62)
- Pharmacy (n=15)
- Medical (n=42)
- Patients (n=52)

• Data



Diagnostics issues log



Diagnostic Phase summary

Food Service

40% of patients reported an issue with having no tea and coffee service

65% of patients reported an issues with having no hot meals for lunch

Closing hours

36% of staff raised concerns regarding limited opening hours

Clinical Scope

51% of ward staff stated they were unsure of the clinical scope in the TL

Physical Layout

50% of patients reported concerns around the chaired area being far from the toilet and unable to visualise staff

100% of TL staff reported an issue with lack of visibility of patients in the chaired area.

Solution Design Phase



Peer Observation

- Liverpool and Westmead Hospitals



Blitz Brainstorming

- NUMs, CNEs and RNs



Weighted Voting

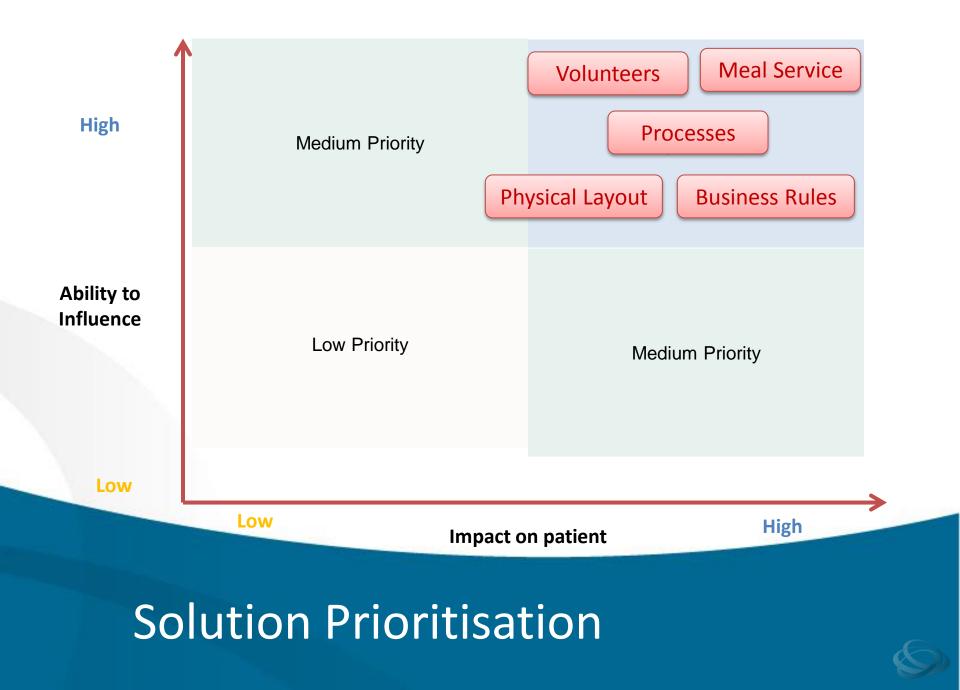
- NUMs, CNEs and RNs



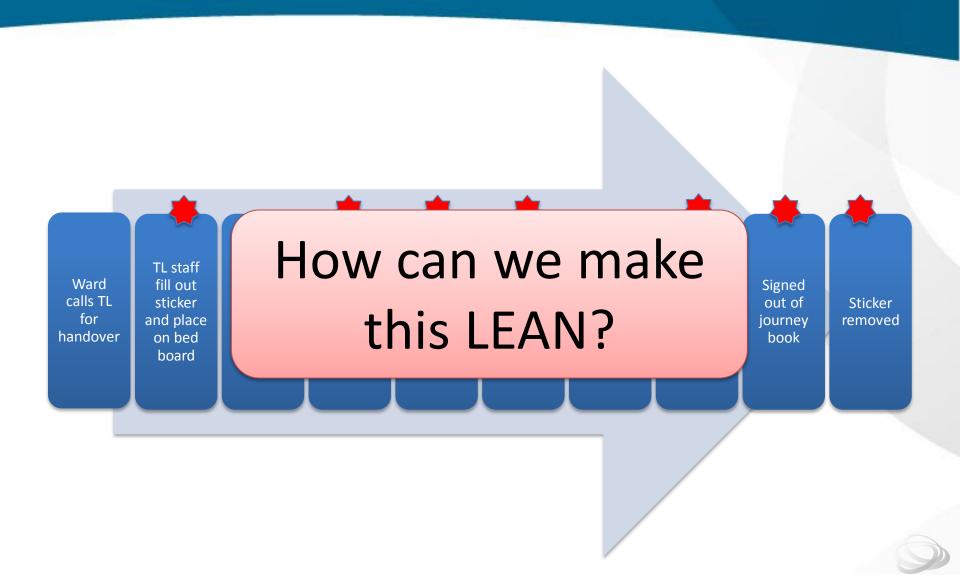
Issues Prioritisation

- NUMs, CNEs and RNs

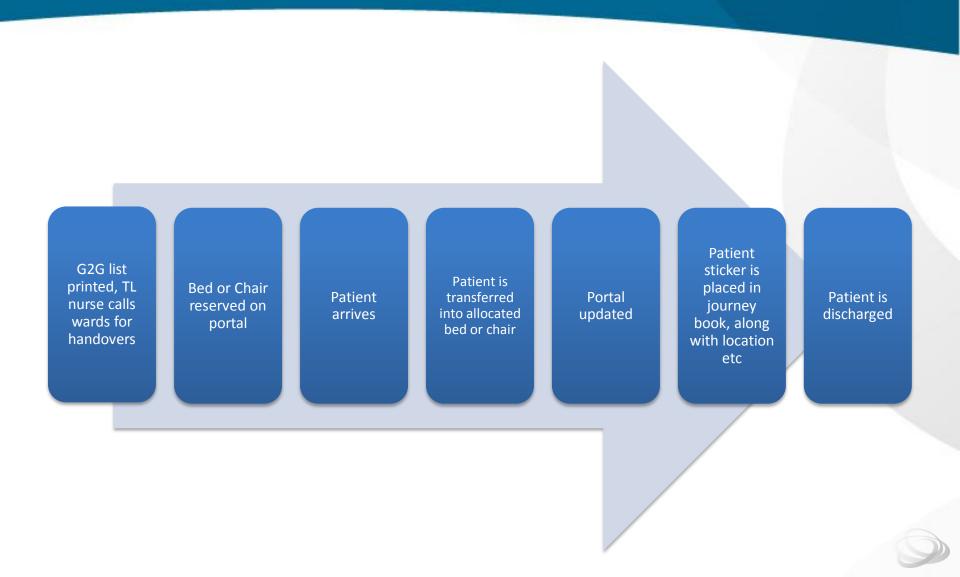




'As is' Diagnostic Process Mapping



Our *NOW* process



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06						ADMISSION			Not started		JMO will R'v soon			
07			45761 Michael	15-11-17	Yes	Ester health n/h	.	Completed	Completed	FULL				
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Facility List

Royal North Shore Hospital

As At 15/11/2017 17:00

Filters used: ED accessible wards only - Good_To_Go: Yes

Ward	Bed	Patient ID	Gen der	Name	Medical Officer	MO Specialty	Age	PTS Status
5WC	16	1036350	М	Reeve, Martin	Hartin, Nathan	Orthopa edics	59 yrs	
5eC	08	1492791	M	Besson, Douglas	March, Lynette	Rheumat	86 yrs	Planned
5eC	30	1847144	M	Moore, Rodney	Wines, Andrew	Orthopa edics	77 yrs	
6BR	07	1840678	М	Harrison, Robert	Bassin, Levi	Cardioth oracic Surgery	80 yrs	
6BR	23	1854722	М	Cain, Frederick	Marshman, David	Cardioth oracic Surgery	80 yrs	
6BR	26	1500916	M	Mortimore, William	Harden, Michael	Cardioth oracic Surgery	88 yrs	Planned
6DR	11	1704455	M	Morrow, Carol	Brady, Peter	Cardioth oracic Surgery	84 yrs	
6DR	12	883778	M	Johnstone, Bradley	Hansen, Peter	Cardiolo gy	58 yrs	
6DR	18	1358326	М	Bicknell, John	Hansen, Peter	Cardiolo gy	66 yrs	
6DR	28	162959	F	Coote, Margaret	Choong, Yoon Pin	Cardiolo gy	92 yrs	Pt At Origin - Pick-up 15-11- 17 17:03
6DR	V1	1302673	М	Teosian, Nishan	Washington, Harvey	Cardiolo gy	68 yrs	
7DR	10	1560245	F	Dorman, Joan	Assaad, Nazih	Neurosu rgery	89 yrs	
7DR	30	1034520	М	Geerin, Kevin	Curtis, Jonathon	Neurosu rgery	71 yrs	Planned
7FR	06	72515	F	Neely, Pamela	Liang, Christina	Neurolog y	86 yrs	
8DR	17	510300	М	Wilson, Grahame	Sandanayake, Neomal	Gastroe nterolog y	82 yrs	

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07	204961	WILCON	45761 Michael	15-11-17		Open		O Infe	ctious Clean			
	L	WILSON	43701 Michael	13-11-17	Notes:	Pt Off Ward						
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Solution Summary



Transit Lounge Business Rules

- Develop Business Rules that are easily accessed & supported by in-services, posters and marketing



Establish profile with Healthshare for Transit Lounge

- This will enable hot meals to be delivered and allow Transit Lounge to have a morning/afternoon tea service

Summary of key solutions



Utilise Hospital Volunteers

- Help with Orientating patients to the Transit Lounge, talk with patients and assist them if needed. Improving contact and visibility of hospital staff



Removal of Partition Wall

- Allow a more open environment with improved site lines, opportunity to improve capacity and layout

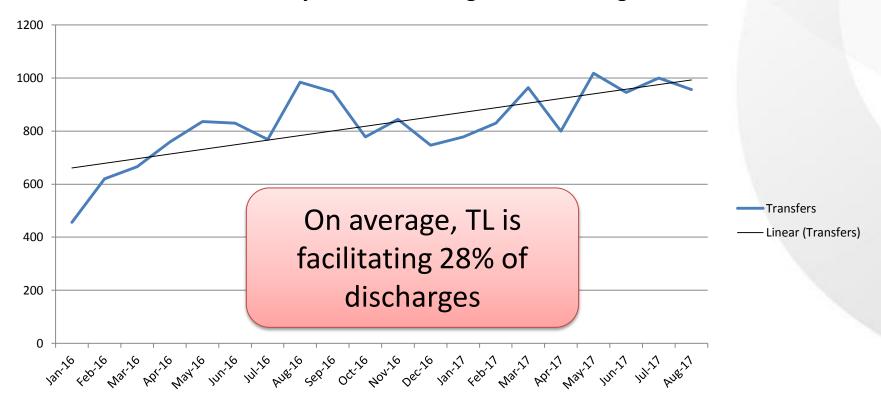


What have we done so far?

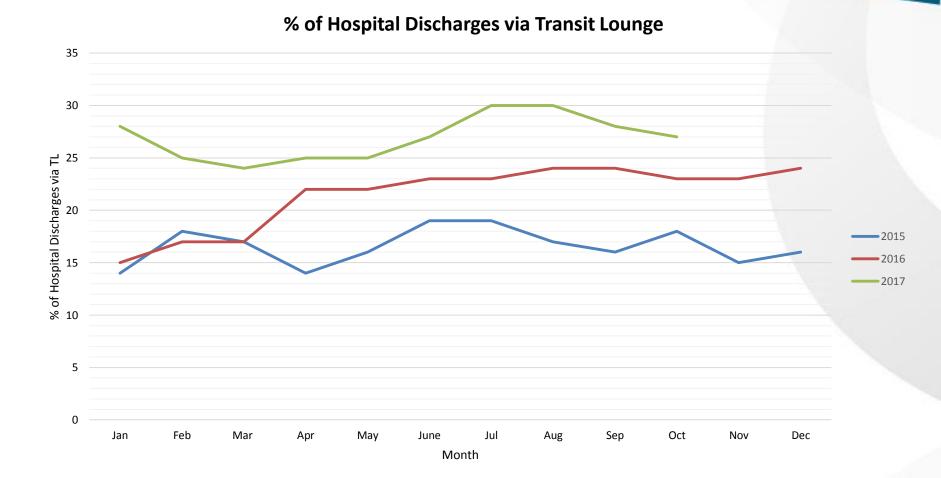


What are the results so far?

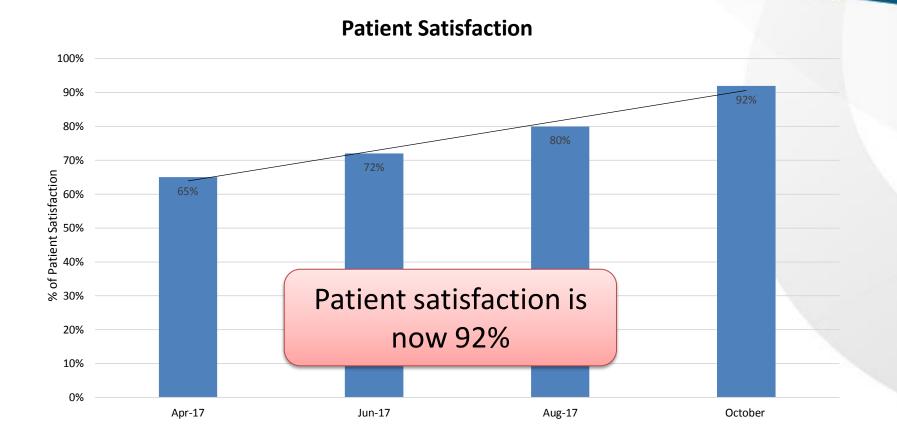
Monthly transfers through Transit Lounge



What are the results so far?



What are the results so far?



What is next?

