

Whole of Hospital Program

Mental Health Project

Dr Martin Cohen Clinical Lead

Rachel Mason

Senior Project Officer

16th October 2014, WOHP Master Class 5- Improving Access to Care





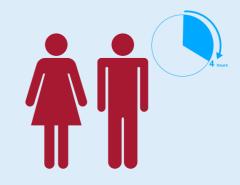


Whole of Hospital Program

- Working together to provide the right healthcare for people in NSW every day
- Health service ownership and leadership to improve and sustain access to care
- Development of local skills and capacity for organisational change
- Improving partnerships and connectivity at system and local levels

From January to November 2013 273,785 more patients

(compared with the same period in 2012) received the care they needed to either get home or into a hospital bed within 4 hours





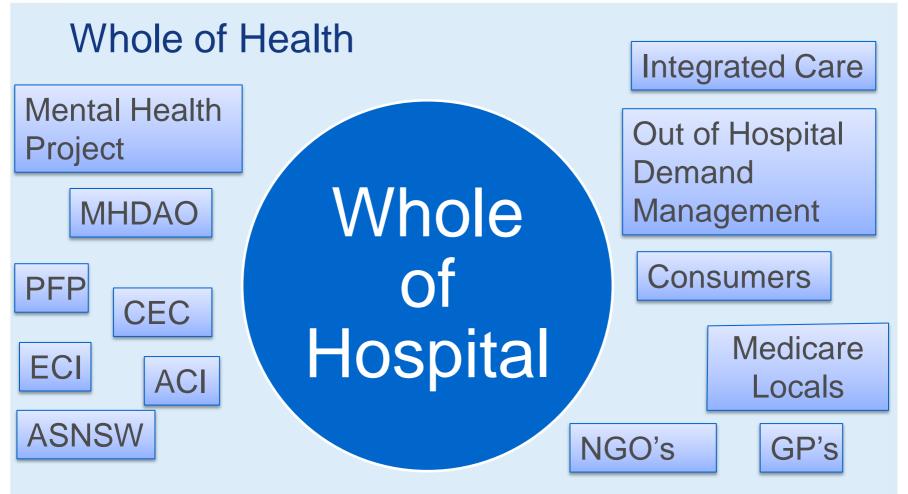
Why Mental Health?

- Clinician Expressed Need
- Improved Patient Flow
- Improved Patient Outcomes & Experience
- Holistic Patient Centred Care











YR

Whole of Hospital Program- Mental Health

- Build on the established success of the Whole of Hospital Program
- Engaging with LHD's
- Shared learning
- Communication
- Data analysis

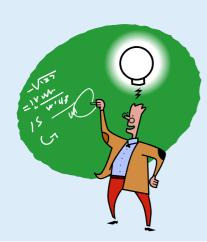


Shared Learning & Communication

WOHP Newsletter



WOHP Teleconferences



JEW:

WOHP Master Classes





Data Analysis

Facility Level Baseline Data

Т	Total Financial Year July 2013 - June 2014						
Total ED Presentations	ED MH Presentations (HIE)*	MH as % of Total Presentations	Total Seps MH IPU/PECC	ALOS PECC (hrs)	ALOS MH IPU (days) including PECC		
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Resource			
Total Funded MH IPU beds	PECC	ED 24 Hours MH Consult	
(Breakdown			





WHOLE OF HOSPITAL PROGRAM

Weekly Snapshot

Measurement / Performance Indicator	This Week	Last Week	Current Calendar YTD	Last Calendar Year
measurement / Performance indicator	28/04/2014 - 04/05/2014	21/04/2014 - 27/04/2014	01/01/2014 - 04/05/2014	01/01/2013 - 31/12/201
Transfer of Care	91.3%	92.4%	93.0%	92.4%
ED Presentations	831	960	15,882	43,590
Total Admissions to Facility	294	298	4,969	13,165
Total Admissions to Facility as a % of Presentations	35.4%	31.0%	31.3%	30.2%
% Count of ED Did not Wait / Left at Own Risk to total number of ED Presentations	0.60%	1.88%	1.43%	2.23%
NEAT All Patients	81.9%	80.9%	81.1%	76.5%
Admitted	57.8%	54.0%	54.3%	<mark>43</mark> .5%
Non - Admitted	95.2%	93.1%	93.2%	90.7%
ED ALOS hrs (admitted and discharged)	2.62	2.92	2.8	3.05
Number of patients staying in ED over 24 hrs (trimmed at 99998 min)	1	3	38	151
Admissions to EDSSU from ED	102	99	1706	4026
Admissions to EDSSUU from ED as a % of total ED Presentations	12.3%	10.3%	10.7%	9.2%
% EDSSU patients admitted to ward	10.8%	13.1%	13.9%	13.1%
Admissions to MAU from ED Admissions to MAU from ED as a % of total ED Presentations				
Total number of patients admitted to PECC (Bed Type 85)	0	o	0	0
Clinician Defined EDD's	72.6%	71.5%	70.7%	69.4%
Expired EDD's	23.5%	22.7%	19.6%	18.5%
Week Day Discharge Rates	82.5%	79.2%	81.2%	81.2%
Weekend Discharge Rates	17.5%	20.8%	18.8%	18.7%
Unplanned Representations within 48 Hours	6.1%	6.3%	6.5%	7.7%
Unplanned Readmissions (all)	7.2%	6.7%	8.3%	8.3%







Mental Health Weekly Snapshot

Maaauramant (Danfarmanaa kudiaatar	This Week	Last Week	Current Calendar YTD	Last Calendar Year
Measurement / Performance Indicator	03/03/2014 - 09/03/2014	24/02/2014 - 02/03/2014	01/01/2014 - 09/03/2014	01/01/2013 - 31/12/2013
ED MH Presentations				
Total ED MH Presentations as a % of Total ED				
Presentations				
ED MH Admissions to Facility				
Total MH Admissions to Facility				
Total ED MH Admissions as a % of Total ED Presentations				
ED MH Did not Wait / Left at Own Risk				
Total ED NEAT All Patients				
Admitted				
Non - Admitted				
Total MH NEAT All MH Patients				
MH Admitted				
MH Non - Admitted				
ED MH Time referred to time seen				
MH ED ALOS hrs (admitted and discharged)				
Number of MH patients staying in ED over 24 hrs				
MH Admissions to EMU from ED				
MH Admissions to EMU from ED as a % of total ED Presentations				
MH Admissions to GMU/CDU from ED				
MH Admissions to GMU/CDU from ED as a % of total ED				
Total number of MH patients admitted to PECC (Bed Type 85)				
PECC % occupancy				

Themes

- Transportation in Rural Areas
- Management of Complex Clinical Needs and Challenging Behaviour
- Physical Assessment of Mental Health Patients
- Children and Adolescents
- Access to State-wide beds
- Governance Structures
- Lack of Suitable Discharge Options



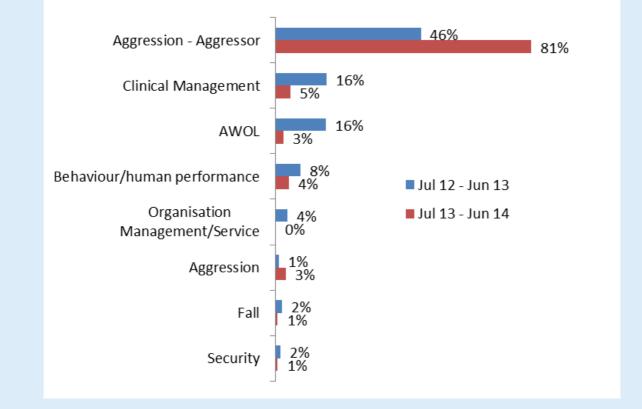


2. DATA REQUESTED

Description of information required (please be as specific as possible): Incidents which occurred in NSW Emergency Departments +/-Mental Health Medically • Intoxicated/Drug Affected compromised/medically Scheduled Under Mental deteriorating patient • Health Act Use of Physical Restraint and/or . seclusion Deliberate Self Harm/Suicide Transfer of Care • Violence and/or Aggression • Absconding/AWOL (Absent . without leave)/Left at own risk

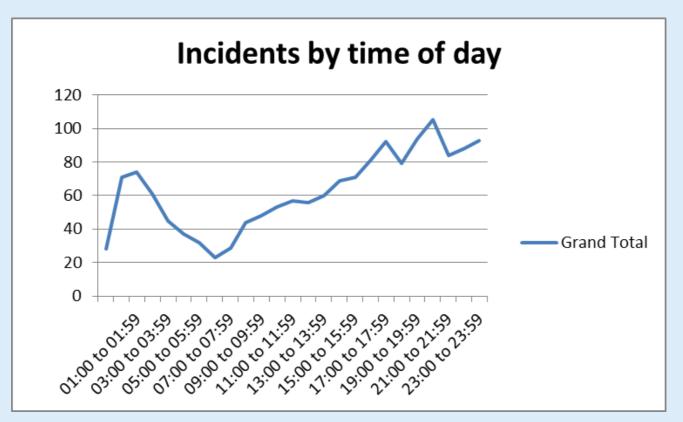


Incident by classification





Incidents by Time of Day





Data Themes

- Causes of aggression
- Complexity of incidents
- Utilisation of resources
- Patient and staff safety



WHOLE OF HOSPITAL PROGRAM

Moving Forward

- LHD Engagement
- Data Reporting
- Solution Design
- Whole of Health





YR

"We do not need more...beds. We need people to talk to us about what we need. We know 'more beds' does not work. It's the easy and convenient thing to say. We need to connect people to their families and communities. Let's start talking about this please."

Tim Heffernan, NSW Consumer Advisory Group



Questions...

