Quality Account midyear progress report for Integrated Governance Group

Name of group	*Improving Discharge Planning*
Monitoring/meetings held.	2
Chair	Geraldine Rodgers, Nurse Consultant
Summary of key outcome measures	*Length of stay in community hospitals* *Time patients spend with community nursing teams* *Numbers of incidents relating to discharge planning* *All team compliance with Admission to Discharge policy*
Key outcome measure results / progress made where data is not yet available	- The average length of stay (LOS) within community inpatient units has been significantly reduced. Initiatives which have been put in place to achieve this have been: - Admission criteria to community inpatient hospitals has been revised - A centralised admission screening process has been introduced at Brentwood Community Hospital to ensure the there is a consistent approach to deciding if admissions are appropriate and meet the needs of the patient - Multi-disciplinary meetings have been reformatted into discharge planning meetings which are attended by the Nurse Consultant for Adults and Older People on a weekly basis on each of the 3 wards - The Nurse Consultant for Adults and Older People undertakes weekly meetings with inpatient modern matrons to discuss the reasons for any patient delays - It is recognised that some patients needs could not be meet within the original 21 day ALOS criteria, therefore slow stream rehabilitation beds were introduced - Regular reports to provide the data for the quality account objective have been requested

	- Most recent average monthly LOS of inpatients: For July 2011, the average length of stay for each inpatient unit is as follows (excluding slow stream patients): - AFC – 22 days - BCH intermediate beds – 15 days - MCH – 12 days . - Average time patients spend with community nursing teams – *Data is currently being prepared* - Numbers of incidents relating to discharge planning – *A small number of incidents were reported that linked to the discharge of patients from community hospitals. Each incident is reviewed to ensure that we provide the highest level of care to patients* - Compliance with key criteria from audit of admission, transfer and discharge policy –*The audit is currently in planning*
Actions outstanding/delayed	There is currently no risk to future completion of this quality account. The group will further drive forward this piece of work by looking at any lessons to be learnt from the discharge related incidents and monitoring of readmission rates