

Project Title

EXPEDITE QI: Reducing Average Length of Stay (ALOS) in a Geriatric Ward

Project Lead and Members

Project lead: Aroos Rana

Project members: Hong LY, Lai SF, Wong B, Ong LM, Seow A, Ng SL, Woon E, Lim TK, Singhal S, Yeo Derrick, Seetharaman SK.

Organisation(s) Involved

Alexandra Hospital

Healthcare Family Group(s) Involved in this Project

Medical, Nursing

Applicable Specialty or Discipline

Geriatric

Project Period

Start date: Feb 2022

Completed date: Aug 2023

Aims

To reduce average length of stay (ALOS) from 12.3 days in Aug 2022 to 9.81 days by Aug 2023.

Background

- Delayed discharge due to non-medical reasons result in prolonged hospitalisation and high bed occupancy rates with negative health and economic implications.

- We aimed to improve system level factors that lead to delayed discharge of patients who are medical cleared but continue to remain hospitalised. Such patients experience the adverse outcomes associated with prolonged hospitalisation with limited added medical benefit.

Methods

See poster appended/below

Results

- ALOS reduced from 12.3 days to 9.1 days (3.4 days)
- 91.8% of patients (n=154) now have a documented medical clearance date
- Communication on discharge plans initiated within 3 days from admission

Conclusion

See poster appended/below

Project Category

Care & Process Redesign

Value Based Care, Length of Stay, Discharge Planning

Keywords

Nurse-Led Discharge, Discharge Care Coordinator, Healthy Ageing Programme

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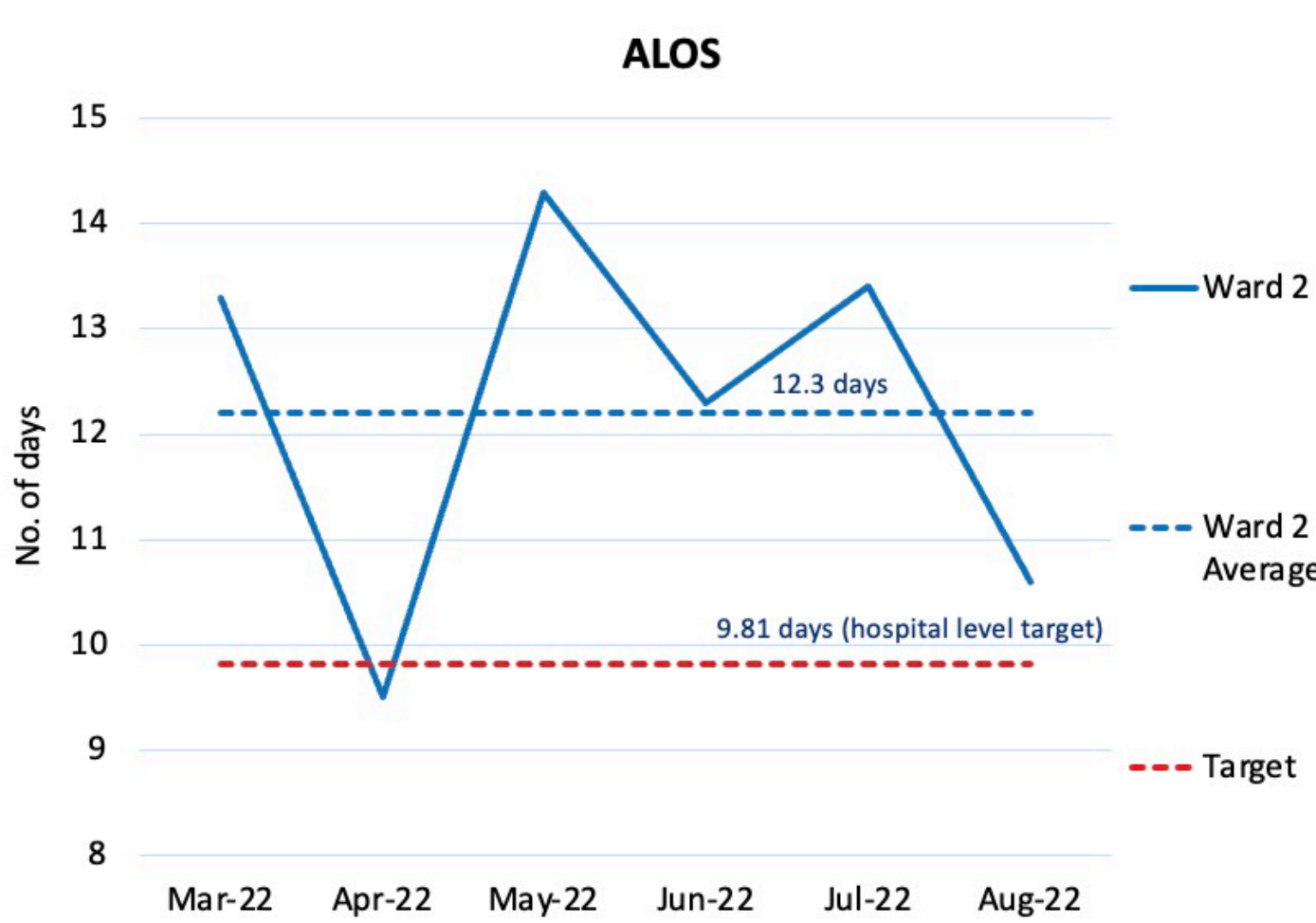
Aroos R, Hong LY, Lai SF, Wong B, Ong LM, Seow A, Ng SL, Woon E, Lim TK, Singhal S, Yeo Derrick, Seetharaman SK.
Alexandra Hospital, Singapore

Background

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Baseline Data

- Patients admitted to the Geriatric ward of AH from 28 Feb to 31 Aug 2022 (n = 299):
 -ALOS of 12.3 days. A hospital level target ALOS of 9.81 days was set due to rising national pressure for beds.
- Potential contributory factors:
 98% did not have a documented medical clearance date
 3.54 days required to decide for medical social worker referral
 9 days before discharge plans are communicated to family.



Lessons learned

- Have a good representation of different multidisciplinary members in the QI team:
 - views the problem from a different perspective and helps in the development of innovative solutions
- To maintain close communications with those on the ground
 - Obtain regular feedback from those implementing the proposed solution
 - Listen to their feedback and review processes accordingly
 - Helps to maintain morale
- Stay positive! Persist with your efforts and you will find your rewards

AIM

- To reduce average length of stay (ALOS) from 12.3 days in Aug 2022 to 9.81 days by Aug 2023.

SOLUTIONS

EXPEDITE Discharge Huddle (Nurse Led)

- Purpose: enhance communications with the team
- Duration: 15 – 20 min, on Wed, Thu and Fri initially. Later reduced to 1x/week post PDSA cycles.
- Registrar and nurse will review EXPEDITE huddle template for all patients. Template modified following feedback.

OTHERS

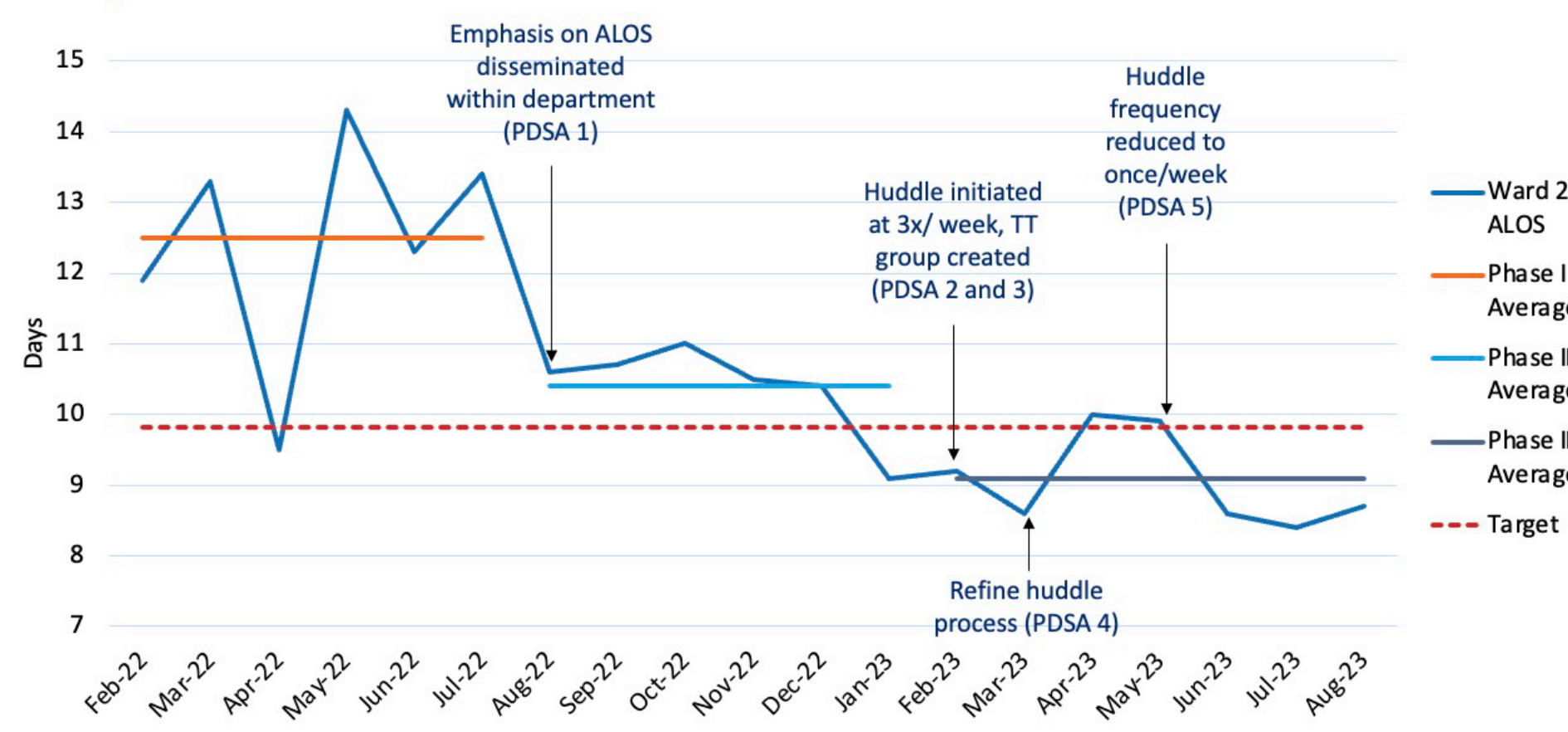
- A group chat created amongst all the members of the care team in hospital messaging system.
- Weekly reminders to the consultants about longstayers
- ALOS updates at monthly department meetings (facilitated by the Operations team study representative).

OUTCOMES

Results

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Impact Measurement: Run Chart



Sustainability:

- A discharge care navigator (DCN) to lead the discharge planning efforts was offered by the hospital to the Geriatric service.
- The EXPEDITE huddle (now led by the DCN) continues and ALOS has remained within target.

