## Implementation of Weekend HITH SLHD





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Mar2018



#### Data 15/16

- 640,000 population
- 156,000 ED presentations
  - Concord 35,000
  - RPA 70,000
- Concord Hx 750 beds
- RPA 1000 beds
- 1.7m community occasions of service
- 43% speak language other than English
- 22,000 with disability



• 4,875 Aboriginal and Torres Strait islander people

# Before

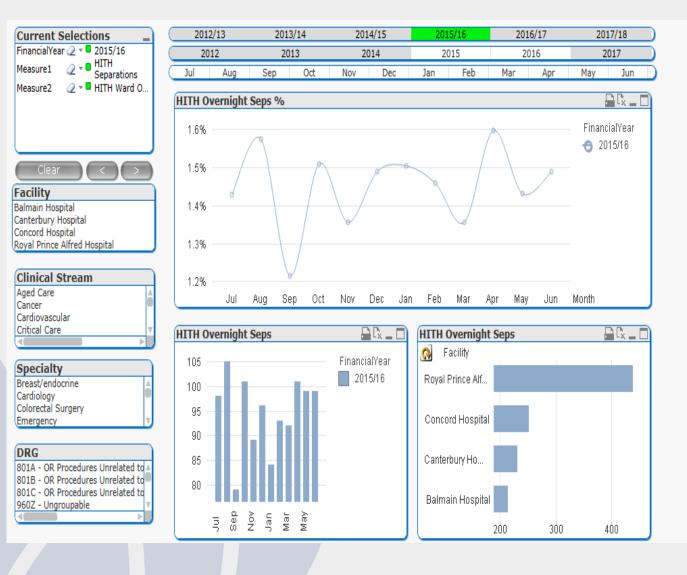
- 5 yrs of HITH
- Weekend inequity of care new and current patients
- Mx of IVDU,OS,homeless
- Issues with troubleshooting community patients
- Monday madness



#### HITH before

- Mon- Fri 8-4.30
- ED return and wait next day or admit or .....
- 1.47% overnight HITH separations







#### Plan

- Executive and MoH support
- Funds
- Recruitment
- Protocols
- Communication with ED
- Evolution



### Resourcing

- RN for Sat and Sun embedded in ED RPA and Concord
- Staff Specialist ED/HITH weekend recruited
- On call medical roster
- Space
- Pharmacy
- HITH Program Manager developed plans, recruited, set up meetings, drew up policies/protocols, collected data



#### HITH Weekend Implementation Plan

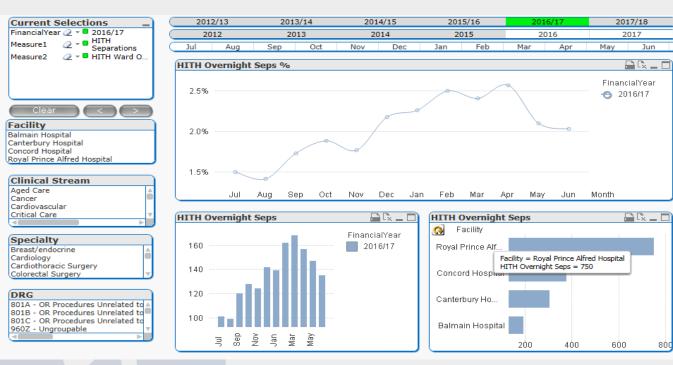
Yet to be commenced	N/A				In progre	ss	Complete	
Action	Person	Target	SLHD	RPAH	CRGH	Progress/Con	nment	
Memo to Staff	DD	c		omplete				
Memo to District	DD	0		Complete				
Meeting with ED department	VT,A-MC, ED	Complete				Follow up pla	Follow up planned for week before roll out	
Brief to CE for stafflink and recruitment	DD		C	omplete				
Recruit nursing staff	ML	Complete					Interviews complete, successful candidate identified and undergoing employment checks	
Recruit medical staff	A-MC	Complete				Extension of t	Extension of temporary contract underway	
Update nursing PD's for 7 day rotating roster	JM	Complete				Nil further fee	Nil further feedback from staff. New PD's complete	
Request nursing volunteers for Dec/Jan roster	ML	Complete				Feedback rec	Feedback received	
Organise equipment/COW for weekend use, including safe storage from Friday night to Saturday morning	PA, TS		C	omplete		Trolley ordere	ed for Concord	
Engage with pharmacy regarding supply of weekend drugs	ED, A-MC	Complete		Concord to us RPAH to use E	se HITH stock, stored in Asset office ED stock			
Engage with SDN to confirm logistic's for weekend referral	ML	Complete				Normal referr contact in cha	ral process to be followed, referral to ACT and ACT to arge at centre	
Organise model of care, include medical, nursing and admin responsibility	TS, A-MC	Complete		Draft of Model of care circulated internally, for ED review				
Educate ED on new model	VT, A-MC	Complete		Operations finaldraft sent				
Educate staff on new model	VT, A-MC	Complete				Operations fir	nal draft sent	
Develop new information flyer for HITH weekend	ML	Complete				Modified pt in	nformation brochure, stickers ordered	
Communicate start date internally, memo and bulletin board	JM DD	Complete				Memo sent Bulletin board	d to go in New Year Changed to 16/01/17 – closer to	

#### Jan 21- Weekend Admissions

- New admissions EDdoctor to HITHdoctor phone call
- Emr admissions and scheduled appts
- Red chairs
- Space in ED including drawers for documents, purple box
- Working collaboratively with ED RNs



#### After





#### After

- 2.32% overnight separations (vs 1.47%)
- Smoother workflow
- 152 episodes of care
- Better symbiotic relationships with ED
- Assistance to Sydney District Nursing WE
- Triage direct referrals enabled
- Recruitment spinoffs RNs and Drs

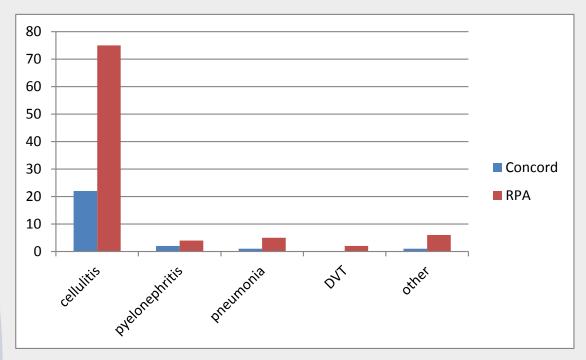


#### Outcomes

- MOH target 67 weekend overnight admissions by June 31
- Achieved **97** (RPA +Concord)
- 6/12 overnight admissions = **108** (82+26)
- Patient satisfaction surveys for 3/12 very positive
- Ongoing funding- SLHD 0.5FTE for Concord
- Referred to SDN 32/82 RPA 11/26 Concord= 39% overall
- Conditions managed



#### WE Conditions managed





#### Are we there yet?

- Challenges- RN orienting to ED workflows
- Changing ED culture re admissions
- Difficult to find doctor in ED due to emergencies
- Weekend working roster difficulties
- ED doctor not referring by phone to HITH due to other pressures
- Admin issues emr for admitted ED ,transfer to HITH
- On call HITH dr busier, trust factor with ED drs
- Increased importance handover



#### HITH Torino, northern Italy 2018



