Luton and Dunstable University Hospital (L&D)
NHS Foundation Trust

Background
Nearly 350,000 patients currently spend over three weeks in acute hospitals each year. Many are older people who after prolonged stays in hospital see a decline in their health resulting in serious consequences for many of them. The benefits of reducing hospital bed occupancy are clear but achieving it has proven difficult.

As part of NHS' Long Term Plan, NHS England and NHS Improvements launched an initiative called 'Reducing long length of hospital stays – supporting national improvement.'

This Long Length of Stay (LLoS) ambition, aims to reduce avoidable patient harm and ensure that patients are being treated correctly. Trusts are advised to carry out weekly ward-based reviews of patients with a stay in hospital for 21 days and over, in line with the national guidance to capture and tackle thematic issues and delays as well as ensuring individual patient's journeys are expedited. Rigorous application of the approach is resulting in Trusts seeing some impressive reductions in the numbers of their patients suffering delays in their journey through hospital.

To ensure that the national effort is also informed by the data coming from these reviews, each region is introducing an additional measurement which summarises the key reasons for delay and the number and type of patients being affected. This summary, the Discharge Patient Tracking List (DPTL), is created by the information collected during ward-based reviews.

As the first NHS Foundation Trust in Bedfordshire, Hertfordshire and Buckinghamshire, Luton and Dunstable Hospital's top priority is to offer the best possible patient experience.
It serves a highly diverse geography close to London and is a highly performing Trust with flagship emergency services and a reputation for consistent operational and financial delivery. As the first hospital in England to be selected by the Health Foundation for their work on improving patient safety, an area in which they continue to excel, the L&D continue to be an agent for change by involving patients and Foundation Trust members in re-designing and improving their services.

Background to the L&D approach to Discharge Management
Prior to the development of the Patient Discharge Management System in conjunction with 'Phew', L&D used Excel spreadsheets to create a Patient Tracking List (PTL), documents and reports for the Hospital and Local Authorities.
Twice weekly all wards would manually compile this information and forward it to the Discharge Administration Team to be merged into one master PTL and then split down to be shared with the Local Authorities, with their specific patient view.
In addition to this, a daily Situation Report (SITREP) was collected from acute trusts each weekday to highlight pressures on the service such as A&E closures, cancelled operations, bed pressures or ambulance delays.

Challenge
Operationally critical to the Hospital and Local Authorities to help with patient discharge, the Patient Tracking List (PTL) assists and informs patient flow, throughput and bed availability, while the SITREP is used to help with improving Hospital internal operations, decision making, identification of problems and improving processes.

The major challenge with the ward data being collected, merged and reported via Excel documents, was that it was almost immediately out of date the instant it was collected and a manually merged single view took the administrative staff a lot of time and had the risk of data input errors.

The PTL manual data gathering process performed regularly over many years was subject to error, which meant the processes followed by the Discharge Management team to help mitigate mistakes and confusion was taking up to 6-8 hours per week.

The SITREP was also a time consuming daily process for the Discharge Officers who enter their hand-written patient notes into an Excel sheet, as well as another patient tracking system. Using this information to reach out to District Nurses, Local Authorities, Care Homes, Transport and other hospital departments, they used this information to see which patients were fit, detailing their requirement and managing their discharge to help free up a bed.

Not only important to the Discharge staff, Discharge Management touches nearly everybody in the hospital and beyond. From Ward Clerks, the CEO and Exec Team; right through to Local Authorities, Social Care workers, Care Homes, District Nurses, GP's and relatives. Discharge planning is the heart and core of a hospital.

The Discharge Management System in its former structure, manual and paper based, was constrained by technology and did not allow or permit the Discharge Management Team to shape and create a solution that matched their operational needs.

Solution

The introduction of the Patient Discharge Management System has brought about changes as shown in the 'Features and functionality' and 'Results' sections shown below; this is not an exhaustive list, just the obvious and immediate results.

The benefit of digital transformative technologies is that it is the start of a journey, as the transition is made to real-time data, decisions can be made based upon this information and opportunities to make further process efficiencies.

The non-obvious benefits to other departments and service users will become more apparent, as will become the benefits to the DMS team.

Features and functionality

- Live real-time actionable patient data.
- Speed and efficiency of data entry through mobile technologies.
- Live SITREP and PTL reports.
- Situational awareness for clinicians.
- Management of in-surge and extreme situations.
- Patient 'Length of Stay' statistics.
- Local Authority and GP area views.
- Any Notices against the Patient (Notice of Assessment, Delayed Transfers).
- Full patient, ward, bed, process history from which further operational insights can be derived.
- Overall visibility of the hospital processes, bottlenecks and challenges.
- Eliminating Excel spreadsheets, or significantly reducing the number required.
- Service user initiative shaped by the DT to deliver a more effective and efficient service.

Results

Effectiveness

- Saves time and resources
- Delivers improved patient care and outcomes.

- Boosts team morale, eliminating admin to focus on better patient care.
- Eliminates paper and process inefficiencies - saving huge amounts of manual data entry.
- Reduces errors interpreting hand-written notes.

Efficiencies

- At the L&D this has assisted in reducing "Super Stranded Patients" (patients in hospital for more than 21 days) from an average of 113 patients to 69 Patients saving 44 beds.
- At the L&D this system has helped reduce our Length of Stay (LoS) from 3.5 to 2.7
- We have reduced our discharge staff costs by over £50K per annum by removing the manual processes

Clinical

- Enables early visibility of patients awaiting next level of care or treatment and where this hasn't occurred provides for early escalation
- Helps identify mis or missed communication between all those involved in ensuring the patient receives the right care both whilst in hospital and when the patient is discharged
- Maintains a situation to enable safety and avoids the risk of deconditioning

Feedback

'Given the recent winter pressures, the tool has enables us to regain control more quickly, supporting better patient outcomes.'

Cathy Jones, Deputy Chief Executive, Luton & Dunstable Hospital FT

'The development of the system has released one whole time equivalent band 7 post to undertake other duties. Equally the Discharge Officers are no longer disturbed to the extent that they were previously, this then enables them to manage their work more effectively.'

Marilyn George, Head of Discharge Planning, Luton & Dunstable Hospital FT

Phew

With over 20 years of experience in website and software platform design, Phew create market-leading solutions for the public and health sectors. They have expertise in delivering a Patient Discharge Management System, online Audit tools, Learning Management Systems, Procedure Manuals and website design and development.
Pro-active and agile, they aim to deliver projects on-time and to budget that empower their clients to help others.

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