

The ABCD of discharge planning

“Keeping it simple”

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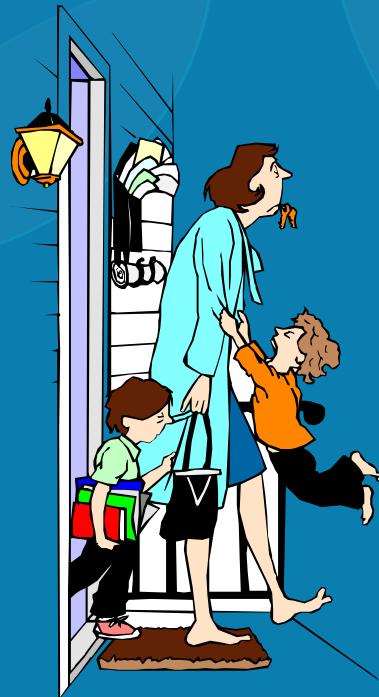
Overview of presentation

- Background
- ABCD
- Methodology
- Results
- Practice implications
- Limitations/challenges
- Outcomes

Background

- The impact of discharge planning
- Context of care
 - Paediatric oncology health care setting
 - Complex needs patients
 - Chronic health care needs
 - Coordination is essential
- Role of the Clinical Nurse Coordinators
- Addressing the fundamentals – “ABCD”

Potentials



What is “ABCD”?

- A: Appointment with oncology medical staff
- B: Blood test
- C: Chemotherapy plan
- D: Drugs

Methodology

- Ethics approval as a clinical audit project
- Intervention study comprising three phases
 - Pre-audit evaluation
 - Implementation of Intervention
 - Education
 - Posters
 - Post-audit evaluation
- Analysis of data

Evaluation processes

- Evaluation tool – questionnaire
- The process
 - IP/OP
 - Time frame
 - Numbers
 - Exclusion criteria
- Pre and post audit



Education strategies

- Posters
- Communication
- Ward education
- Engaging consumers
- Engaging the multidisciplinary health care team
- Time frame – one month period

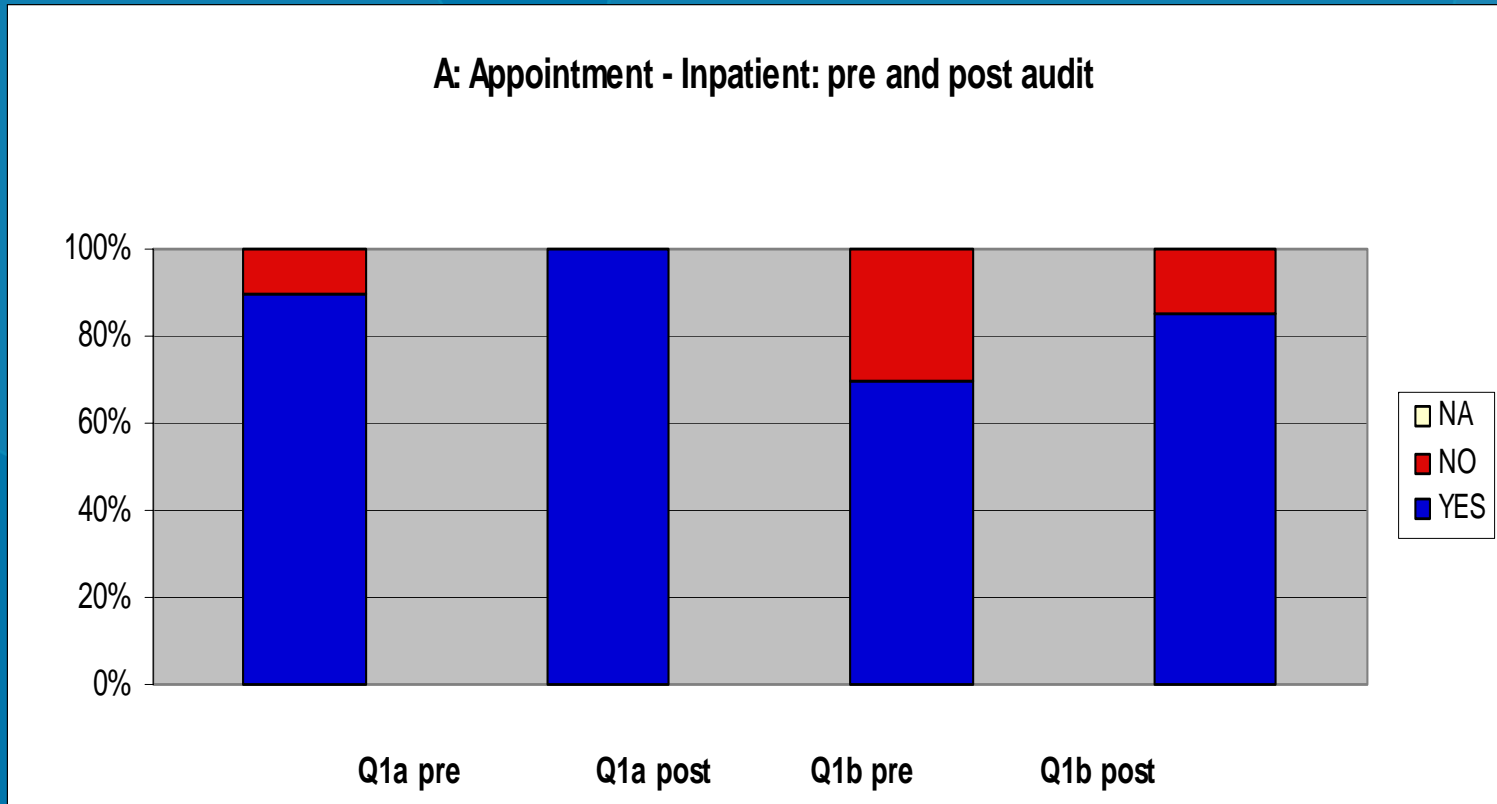
Ethical considerations

- Contacting families
- Pre-existing relationships
- Contingencies for unexpected events

Analysis

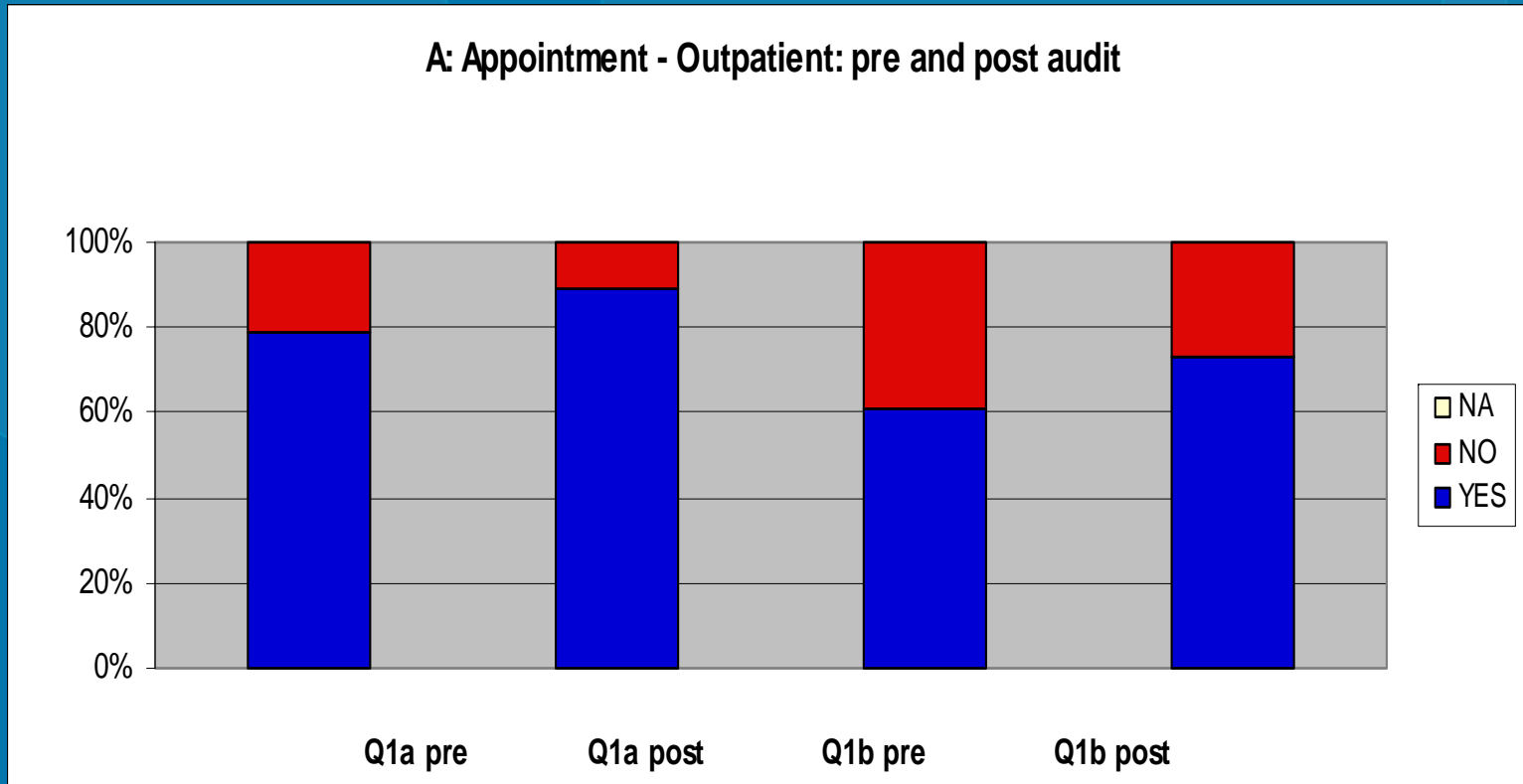
- Data entered into Microsoft Excel
- Descriptive statistical analysis performed
- Meeting with project team – discussion around influencing factors

Audit results – Q1



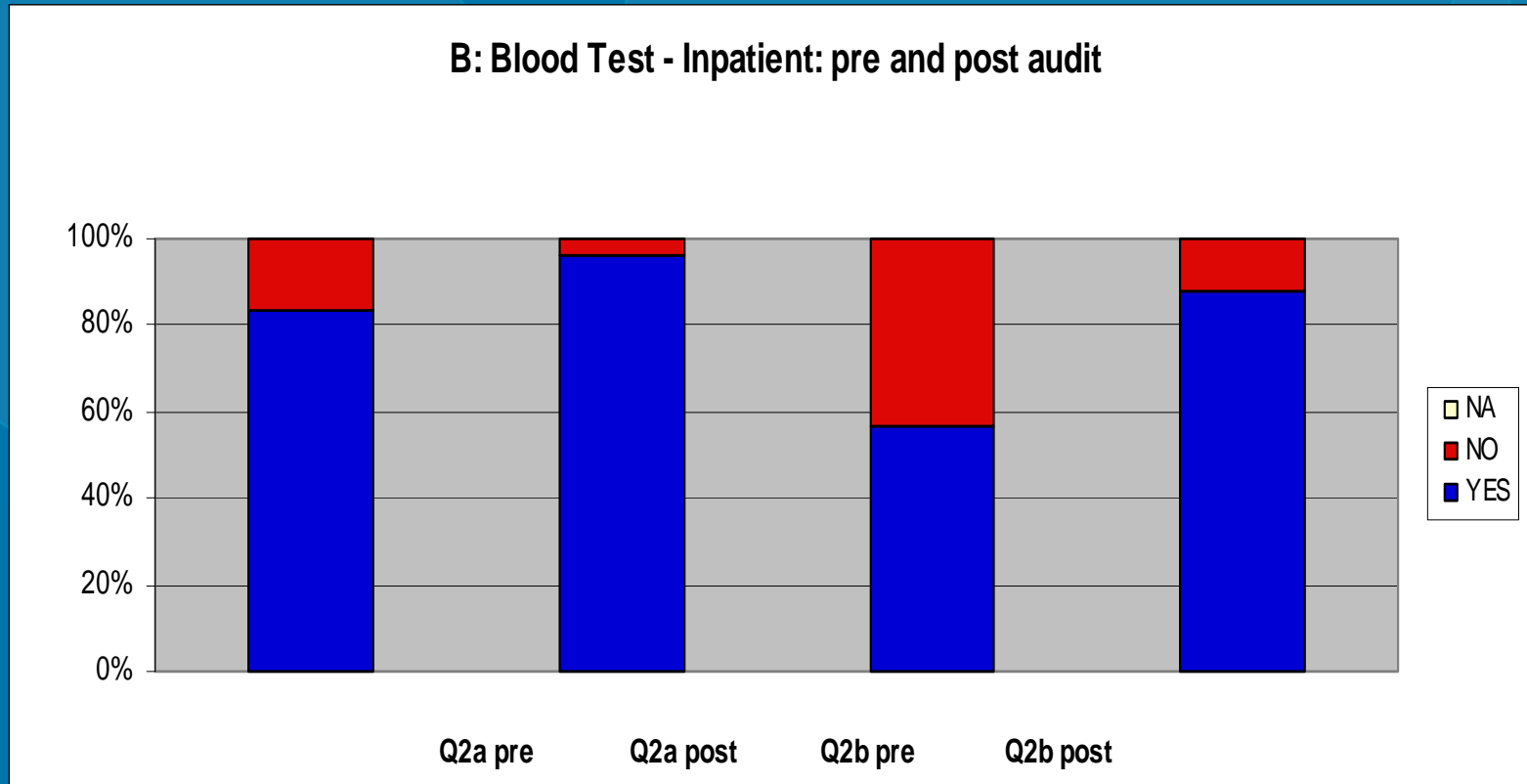
- Question 1a – At time of discharge, did you know the date of your child's next appointment?
- Question 1b – At the time of discharge did you receive a printed copy of this appointment?

Audit results – Q1



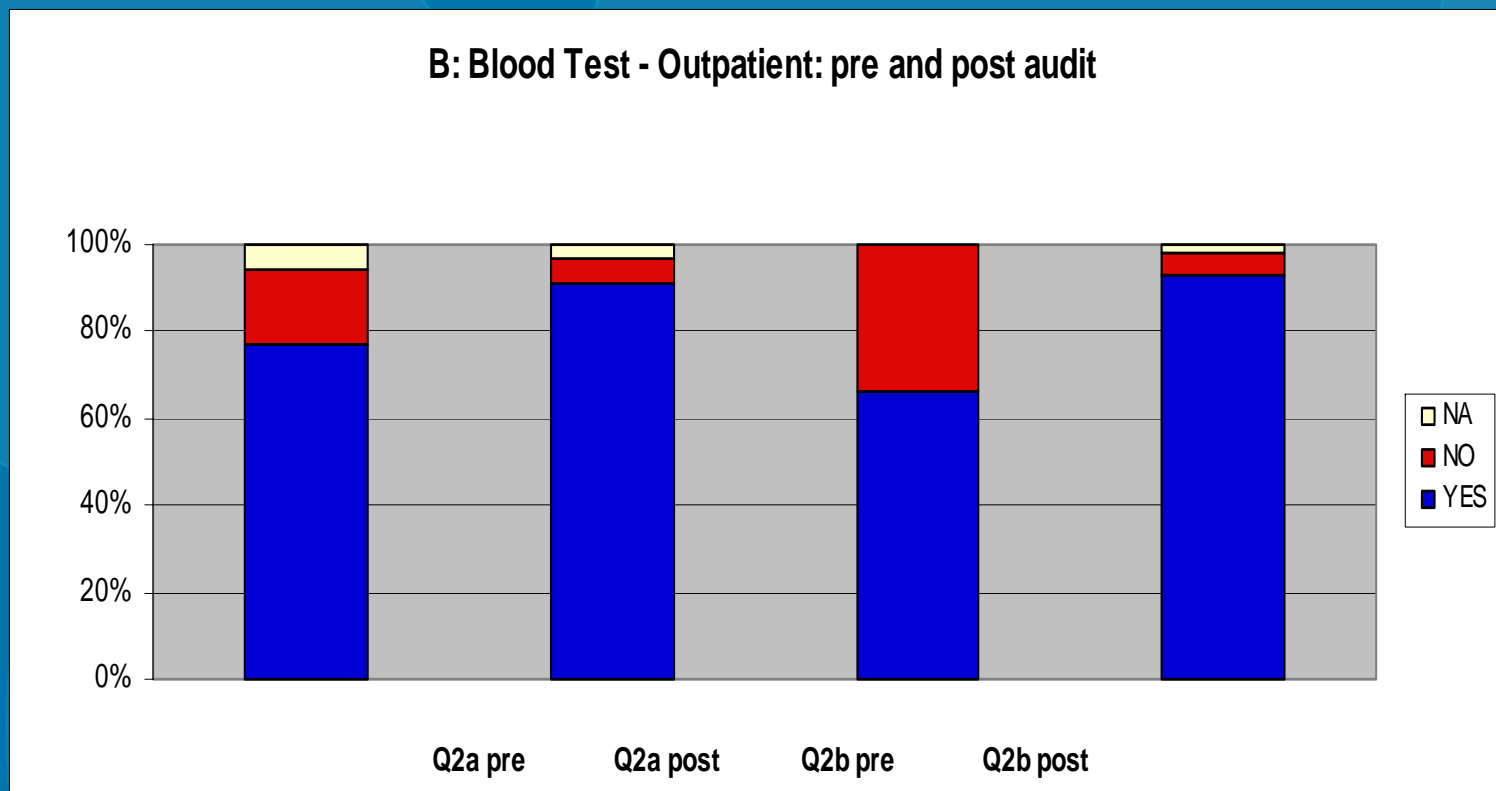
- Question 1a – At time of discharge, did you know the date of your child’s next appointment?
- Question 1b – At the time of discharge did you receive a printed copy of this appointment?

Audit results – Q2



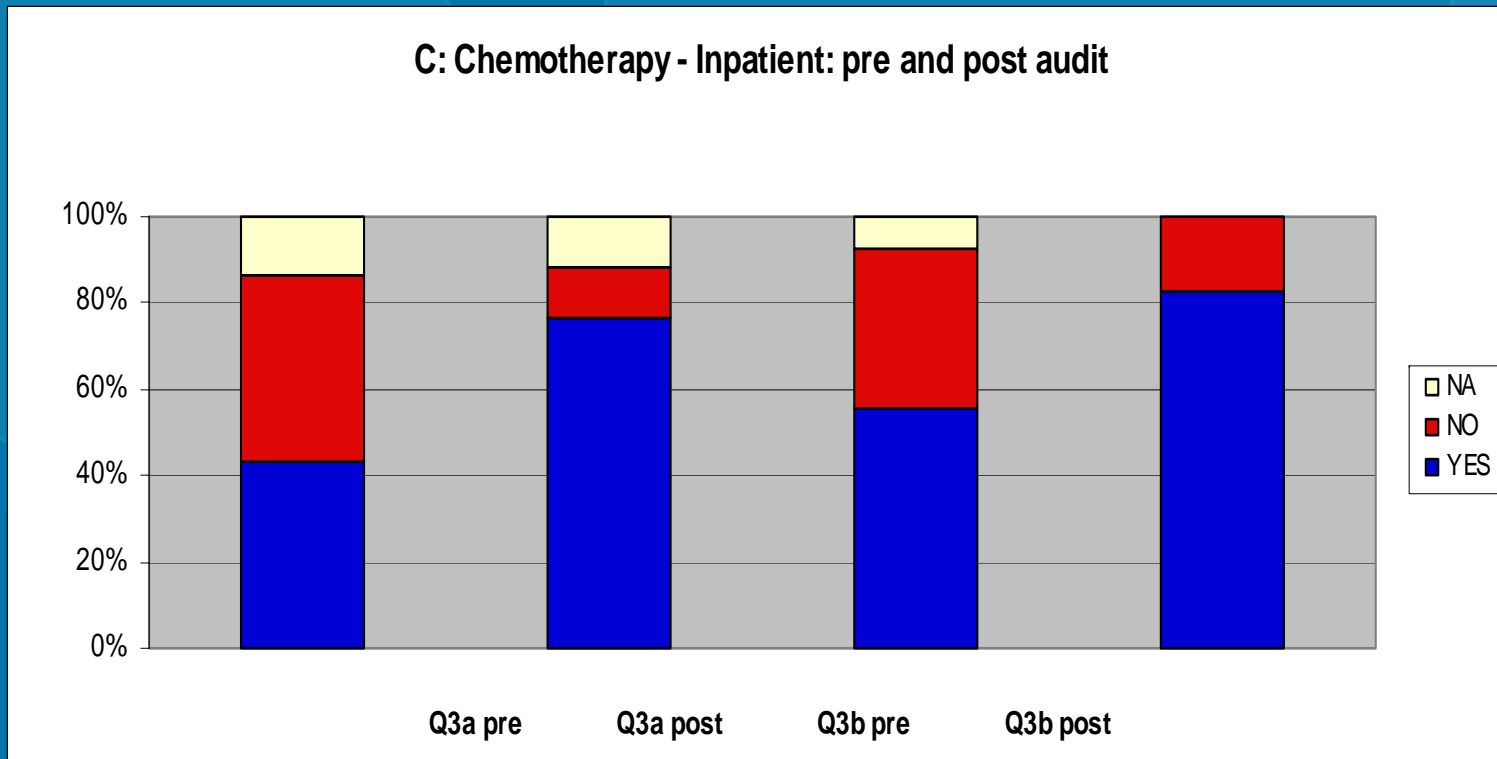
- Question 2a – At the time of discharge, did you know when your child next needed a blood test?
- Question 2b – At the time of discharge, did you receive a pathology request slip for this test?

Audit results – Q2



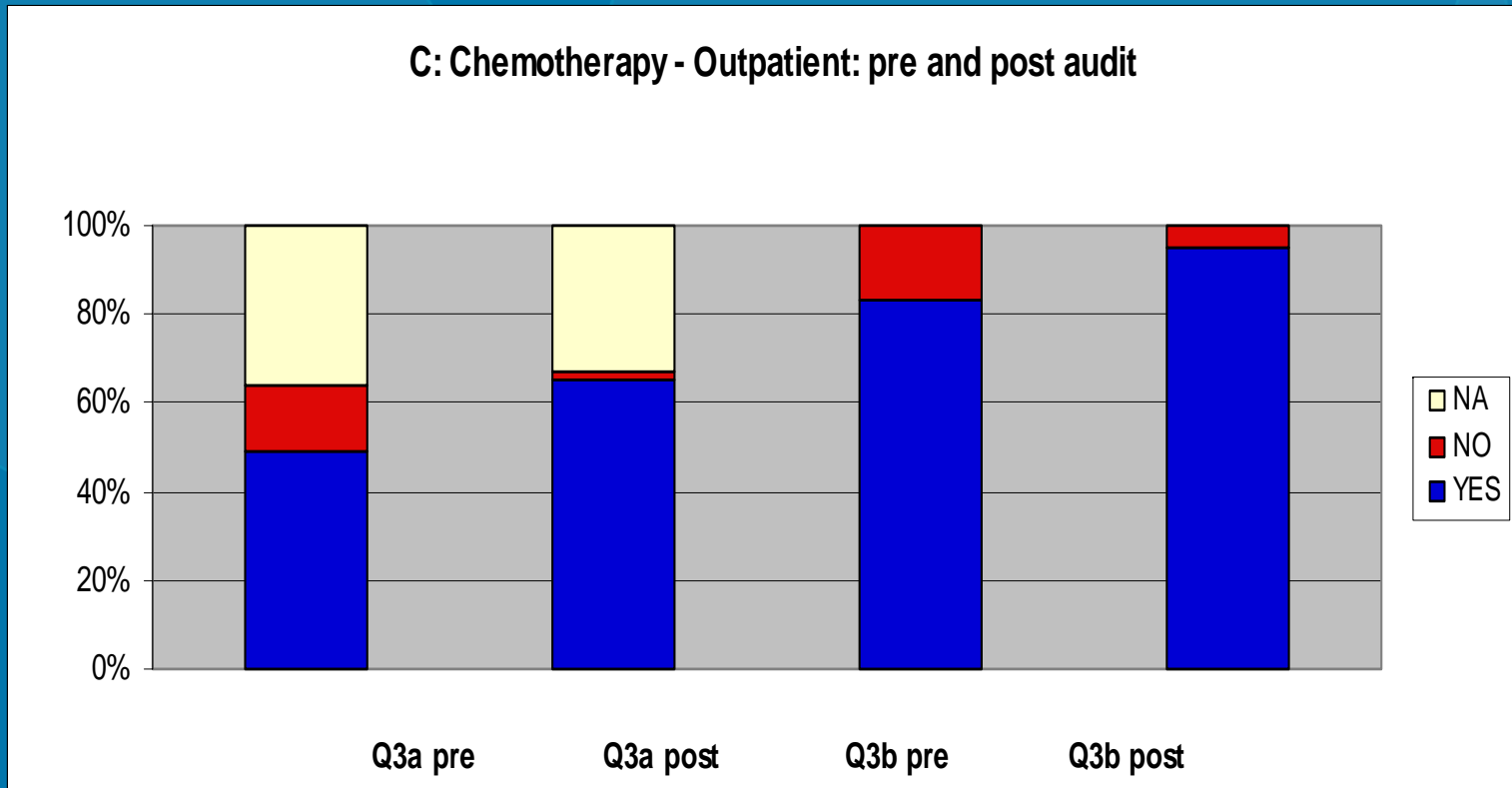
- Question 2a – At the time of discharge, did you know when your child next needed a blood test?
- Question 2b – At the time of discharge, did you receive a pathology request slip for this test?

Audit results – Q3



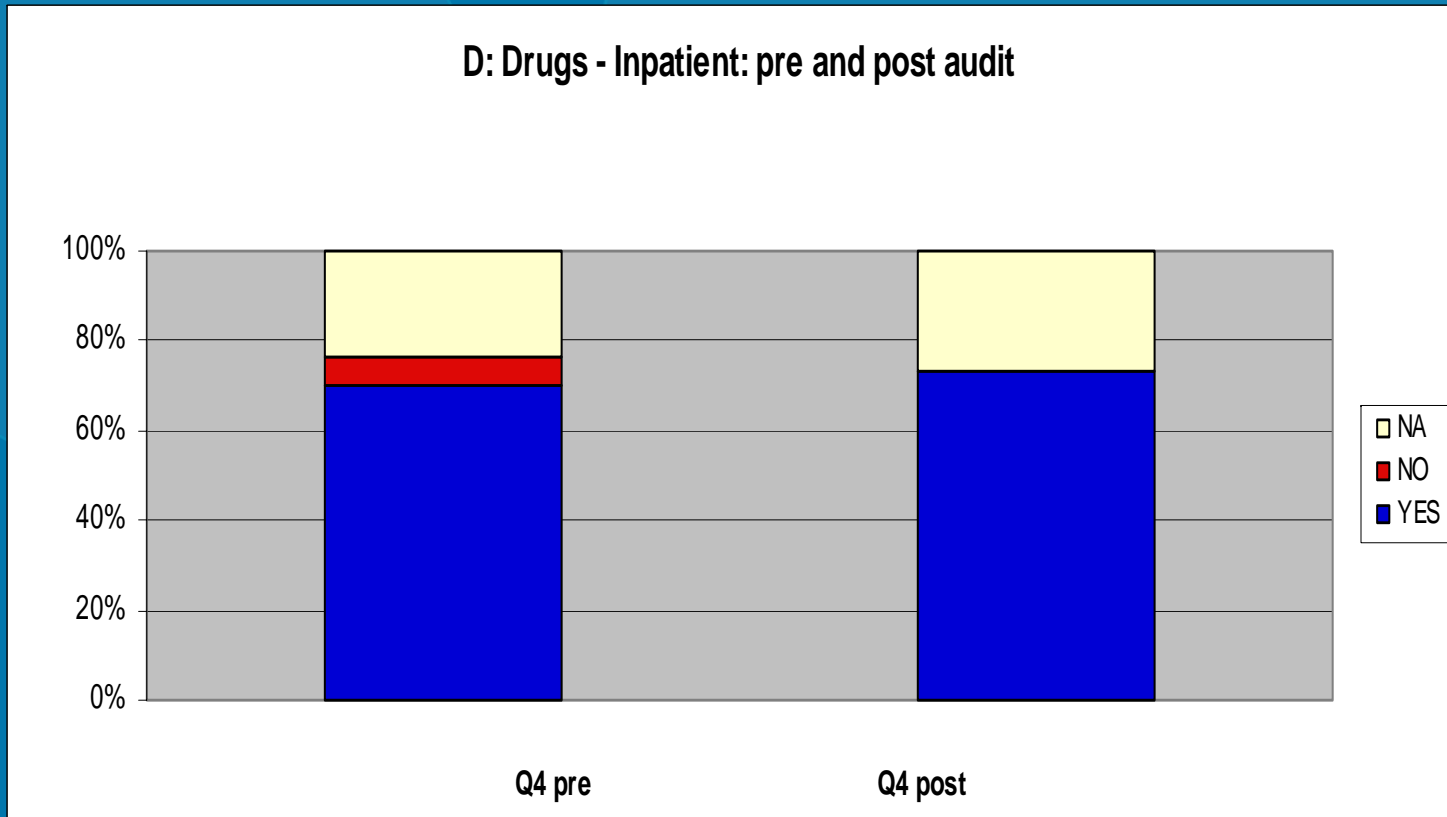
- Question 3a – At the time of discharge, did you know when your child was next due for chemotherapy?
- Question 3b – At the time of discharge, did you know if your child's next treatment was to be given as an inpatient or an outpatient

Audit results – Q3



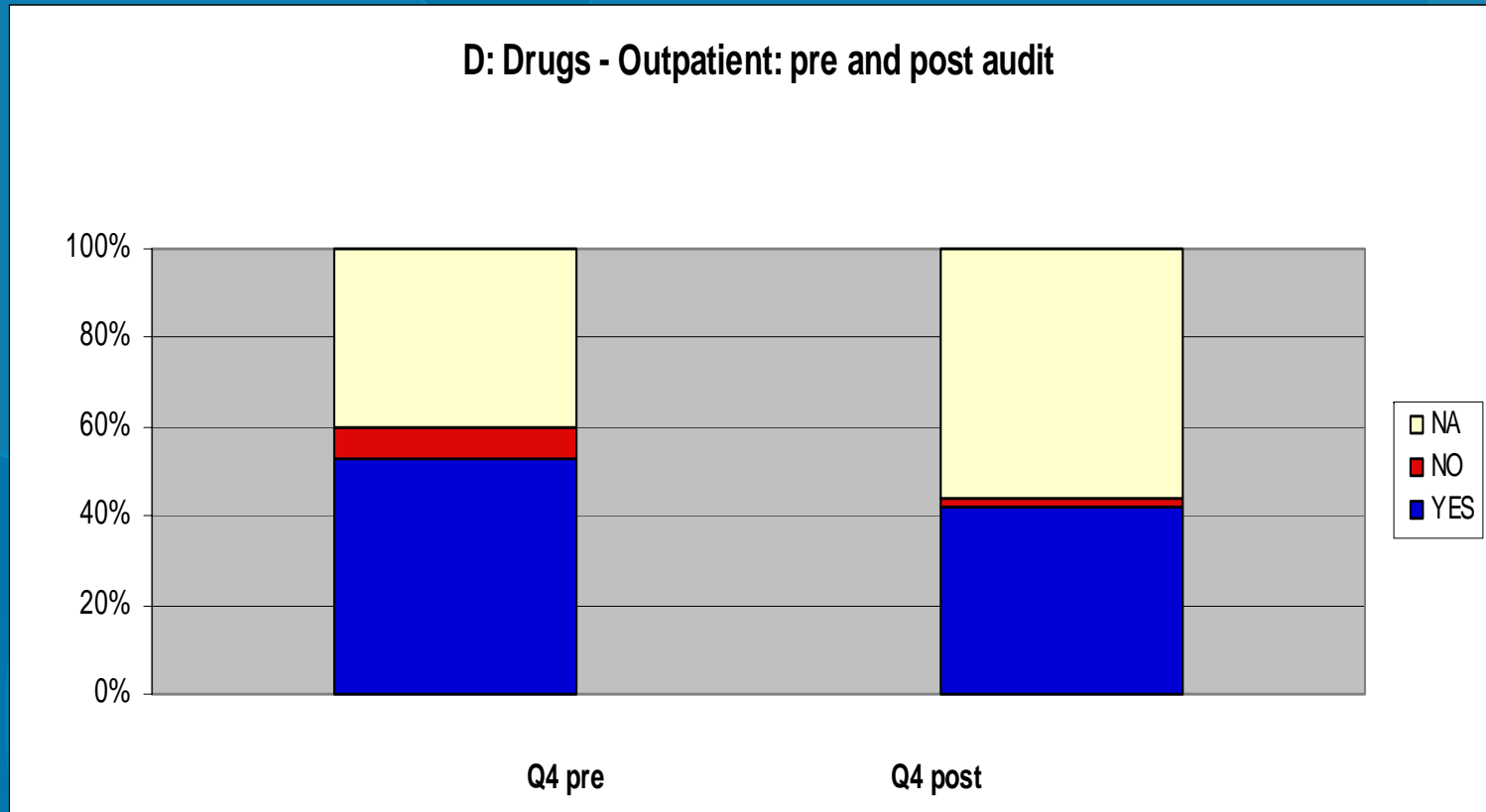
- Question 3a – At the time of discharge, did you know when your child was next due for chemotherapy?
- Question 3b – At the time of discharge, did you know if your child's next treatment was to be given as an inpatient or an outpatient

Audit results – Q4



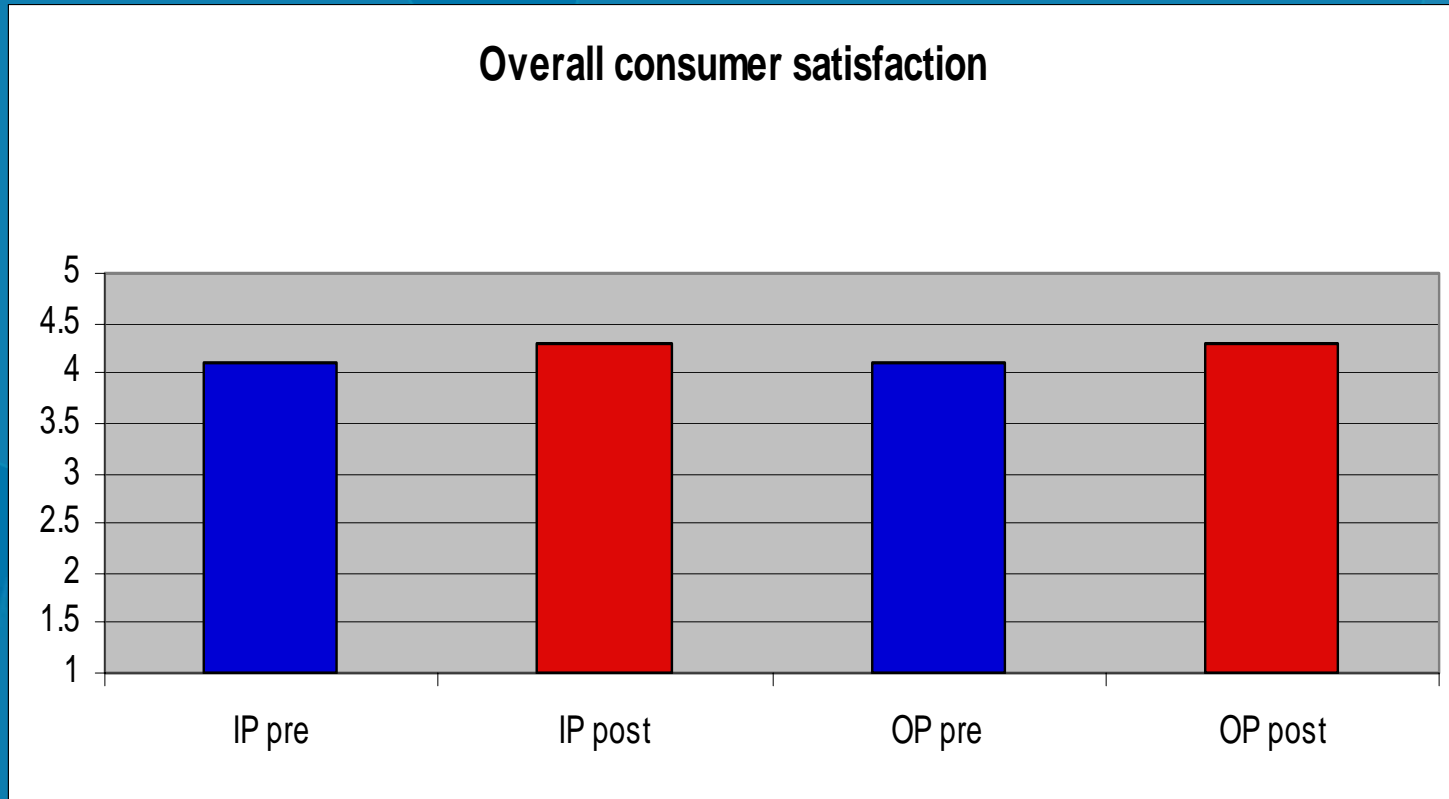
- Question 4 – At the time of discharge, did you receive all the medications your child required?

Audit results – Q4



- Question 4 – At the time of discharge, did you receive all the medications your child required?

Audit results – Q5



- Question 5 – At the time of discharge, how would you rate your satisfaction with communication about your child's plan?
- Score 1-5

Results

- Inpatients
- A - 90% to 100%
- A - 70% to 85%
- B - 83% to 96%
- B - 57% to 88%
- C - 43% to 77%
- C - 56% to 83%
- D - 70% to 73%
- Satisfaction - 4.1 - 4.3

- Outpatients
- A - 79% to 89%
- A - 61% to 73%
- B - 78% to 90%
- B - 66% to 93%
- C - 49% to 66%
- C - 83% to 95%
- D - 53% to 42%
(increased number of NA)
- Satisfaction - 4.1 - 4.3

Themes

- Overall improvement in outcomes ?due to increased awareness
- Improvement in clinical efficiency (eg pathology requests)
- Ongoing room for improvement relating to family awareness of chemotherapy plan
- Patient satisfaction influenced by other factors – levels not significantly altered by this process

Limitations/challenges

- Recruitment
- Limitations for resources
- Time constraints
- ? Skew towards positive
- Variable parental recollection
- New inpatient discharge planning role

Implications for practice

- Discharge planning is a multi-disciplinary exercise
- Education about discharge planning needs to cross inpatient/ outpatient boundaries
- Importance of communication about discharge plan cannot be underestimated
- Empowering families by providing simple prompts - leading to improved service provision as well as increased parent satisfaction overall
- Restoring some accountability for discharge planning to other members of the multi-disciplinary team

Outcomes

- Intervention recognised as a valuable process
- Ongoing use
- Modification of tools and process surrounding discharge planning
- Increased awareness of basic discharge planning principles for families, junior staff
- Foundation for further inquiry into discharge planning processes

