Strategic Direction: Patient Experience

Seamless Transitions

John Ross, Director, Medicine, Patient Flow and Partnerships
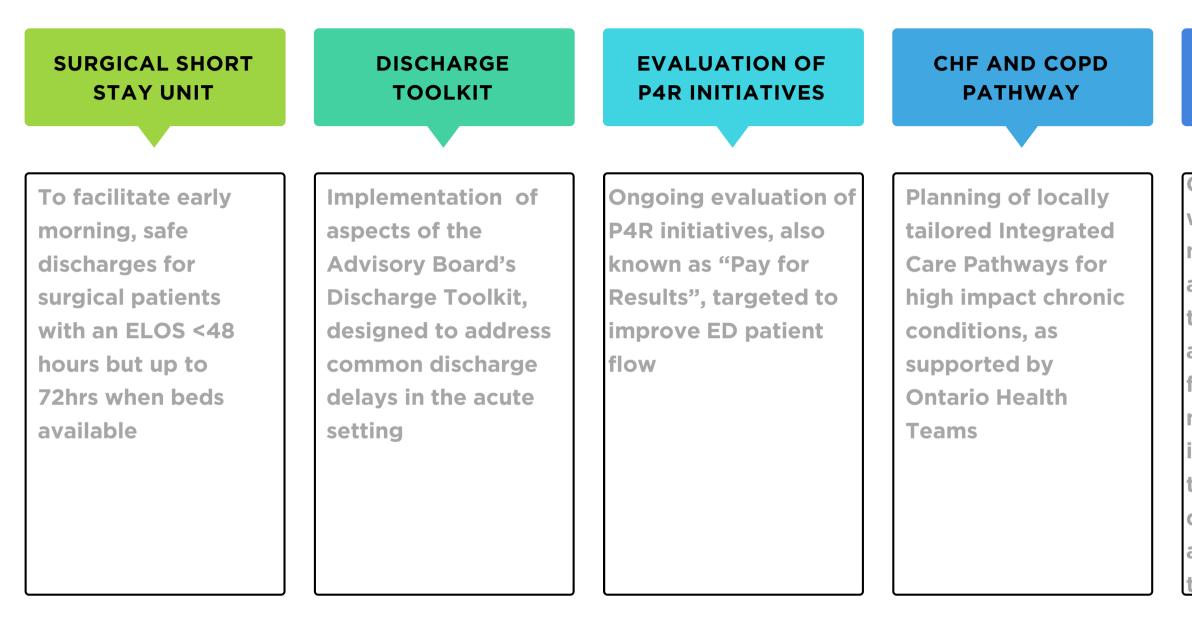*Laura Lee Barrie, Director, Surgical and Ambulatory Services*

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Seamless Transitions: Areas of Focus

SURGICAL SHORT STAY UNIT	DISCHARGE TOOLKIT	EVALUATION OF P4R INITIATIVES	CHF AND COPD PATHWAY	CLINICAL DECISION UNIT
To facilitate early morning, safe discharges for surgical patients with an ELOS <48 hours but up to 72hrs when beds available	Implementation of aspects of the Advisory Board's Discharge Toolkit, designed to address common discharge delays in the acute setting	Ongoing evaluation of P4R initiatives, also known as "Pay for Results", targeted to improve ED patient flow	Planning of locally tailored Integrated Care Pathways for high impact chronic conditions, as supported by Ontario Health Teams	Care pathway in which ED patients may be formally assigned following their initial ED assessment, to allow for short term monitoring, investigation and treatment to support disposition decisions and avoid admission to Hospital

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Project Successes and Next Steps

Clinical Decision Unit — Continue with stakeholder engagement and model of care planning to trial CDU and formally evaluate the program

Surgical Short Stay Unit — Surgical Short Stay Unit is live. Next step is to implement a Standard Operating Practice (SOP) development regarding surgical short stay unit practices

Discharge Toolkit — Successful implementation of discharge toolkit and increased engagement with bed round meetings, now occurring in person. Continue with education and communication regarding discharge toolkit and predicting date of discharge

P4R Initiatives — Ongoing review and engagement with ED team regarding P4R initiatives

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QIP Indicator 2024-25: Access and Flow

Measure   90th percentile emergency department wait time to inpatient bed

Current Performance
34.3 hours (as at December 31, 2023)
33.6 hours for peer average group (2021-22)

Target   30 hours

Methods for Improvement
- Revise Bed Utilization Management policy
- Daily bed rounds (forum to discuss/resolve bed flow challenges)
- Ensure all inpatient beds including blocked beds are assigned with a timely manner by the admitting clerk
- Improve the 1100 hr. discharge time
- Share and seek guidance from Patient Flow Steering Committee for improvement opportunities

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