

# Improving discharge at Northeast Health Wangaratta

## Case study

### Overview

In 2010 Northeast Health Wangaratta experienced a 400 per cent increase in the number of elective surgery patients cancelled due to a lack of beds in the surgical ward. This increase led the health service to target its discharge processes for improvement.

### Summary

The eight-month program involved meticulous tracking and monitoring of hospital processes to discover the key exit blocks. In keeping with the health service's expanded use of volunteers, the Homeward Bound Volunteer program was trialled in the high-discharge surgical/orthopaedic ward. The success of the program has spread to the inpatient medical ward.

Major improvements included:

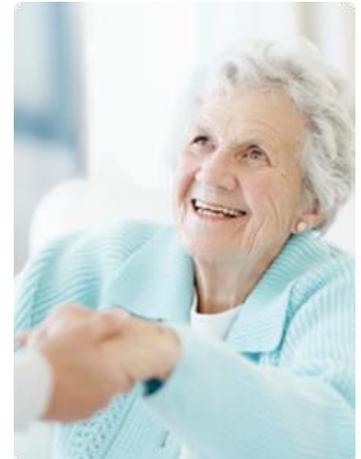
- an increased number of patients discharged before noon by 11 per cent (surgical from 31 per cent to 67.5 per cent and medical from 23.6 per cent to 40.8 per cent)
- a reduction in surgery cancellations due to bed availability by 20 per cent
- an increase in the number of patients treated per annum by 504
- a reduction in interruptions to staff to check discharge status
- 100 per cent patient satisfaction for the program among 15 survey respondents.

### Key changes

- Established the Homeward Bound Volunteer program
- Developed patient journey boards
- A streamlined and colour-coded discharge script process
- Created patient belonging baskets to reduce the incidence of lost items on discharge

### What worked well

- Engaging volunteers in the Homeward Bound program
- The role of the volunteers in discharge:
  - preparing the patient for discharge
  - contacting the patient's next of kin
  - delivering the discharge script to the pharmacy



#### Health service involved

Northeast Health Wangaratta

#### Project name

Improving Discharge at Northeast Health Wangaratta

#### Date of completion

Ongoing

#### Key indicator

Surgery cancellation because no bed available

#### Change in performance

Improvement of 20 per cent

#### Established financial benefit

\$263,304 per annum

#### Patient experience

Safer journey home and better access to elective surgery

## What could be improved

- Focusing on improving the patient journey from emergency to the ward
- Collaboration between the discharge facilitator and junior doctor redesign roles to identify further opportunities to reduce waste in the discharge process

## Further reading

National Health and Medical Research Council and Volunteering Australia (2003) Working with volunteers and managing volunteer programs in health care settings, viewed 1 October 2012 from <https://www.nhmrc.gov.au/guidelines-publications/nh48>

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