Maximize hospital bed uses without additional resources under innovative program to improve quality of life to patient with early discharge program in NTWC

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Introduction
Recently years, it raised the public concerns and community awareness of the congestion of bed crisis and shortage of manpower in NTWC hospitals as evidenced that the total admission in POH & TMH had been increased 18.7% from 2009 to 2014 but the total bed number could only be increased 5% only. So an innovative practice named Joint Ambulatory Parenteral Antibiotics (JAPA) Program was implemented since 2009 to facilitate early discharge for stable target inpatients that required to complete courses of parental antibiotic but the utilization rate of it is not so high in the very beginning. A group was formed to identify solutions to maximizes its utilization in order to safeguard the healthcare in the community without any additional resources needed. A group of nursing team was formed to identify solutions to maximize its utilization in order to safeguard the healthcare in the community without any additional resources needed.

Objectives
1. To increase the utilization of JAPA to improve quality of life to patients with early discharge program; 2. To improve the workflow of JAPA to maximize the effective use of hospital beds in NTWC; 3. To increase JAPA's patient satisfaction.

Methodology
A CQI team in EMW in TMH to form a continuous leadership communication to exercise strategic planning, patient education with informative management, operations and logistics management, record management, and risk assessment &
management approach. CQI team had profoundly discussed the workflow of JAPA looking for improvement areas. A patient satisfaction survey had been conduct to collect JAPA patients’ opinion in 2014.

**Result**
Comparing with the data in 2009 & 2014, it was noted that the trend of JAPA program increased 3.5 times from starting the program. In 2014, more than 90 JAPA’s patients had been arranged early discharge in NTWC. Around 800 hospital beds days and 4 million dollars had been saved in 2014. In principle, 2.2 hospital beds days were saved for emergency admission daily. In patient satisfaction survey, 100% of the participants satisfy our JAPA services and agreed that JAPA can improve their quality of life as comparing with in-patient arrangement. In conclusion, JAPA program helped relieving bed crisis without additional resource. And also enhances quality of life to patients with early discharge.