



## Service Priorities and Programmes Electronic Presentations

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### **Enhancement of Discharge Flow of Patients by Launching the Ward Discharge Area during Winter Surge in Department of Medicine and Therapeutics, Prince of Wales Hospital**

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#### **Introduction**

While 2-3 emergency cases needed to be admitted to each medical ward before 1pm every day in the last winter surge, only 30% (<3) of the patients planned for discharge were able to leave the medical ward before that time. Major limiting factors identified were patients waiting for discharge documents, relatives, and/or transportation, which had all contributed to a stacking problem of patients in the ward, leading to occasional errors in delivery of routine care such as meal service to patients.

#### **Objectives**

Ensuring delivery of accurate routine care for patients waiting to be discharged from medical ward.

#### **Methodology**

Patients planned to be discharged from medical wards who do not fulfill the inclusive criteria of CND discharge lounge: 1) self- ambulatory or wheelchair bound; 2) medically stable and no medical input needed; 3) mentally stable and competent, that was the bed bound cases were transferred to ward based discharge area during the last winter surge to assess if this could facilitate the flow of patient discharge and enhance delivery of accurate routine care to those patients.

#### **Result**

In Feb 2016, 37 patients were sent to the ward based discharge area out of a total of 139 patients being discharged from a medical ward that month (~27%). The mean age was 74 year-old (ranged from 21 – 100 year-old). Of those, 26 of them were transferred to discharge area before 1pm, allowing 36 patients to be admitted to that medical ward within the same period.

The launch of ward base discharge area during the last winter surge lead to enhanced discharge flow of patients, accurate delivery of routine care to those patients, and maximized capacity of the medical ward to take in new emergency cases before 1pm. The major limiting factor was many patients not able to fulfill the inclusive criteria and therefore, only limited numbers of patients were selected to be sent to discharge area.