Optimization of Post-Operative Care Service in Tseung Kwan O Hospital – One Stop Nurse-Led Discharge Program
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Introduction
Day Surgery is widely practiced in Hong Kong. The expansion of day surgery service in Tseung Kwan O Hospital (TKOH) has a consequent rise in the workload for postoperative care service. In order to improve the service quality and efficiency, we piloted a Nurse-led Discharge program for Phase II Recovery in the Ambulatory Surgery Center (ASC) in 2014. The program had achieved a promising result with zero re-admission. The safe practice was subsequently extended to Phase I Recovery - Post-anesthesia Care Unit (PACU) in 2016. One-stop Nurse-led Discharge (NLD) program, with both phases combined was implemented to optimize the post-operative care service in TKOH.

The NLD is protocol-driven with standardized guideline. The Modified Post-Anaesthesia Discharge Scoring System (MPADSS) was adopted for determining patient’s readiness to be discharged from the PACU and home. This greatly improved the efficiency while patient safety and satisfaction are maintained.

Objectives
1. To facilitate timely discharge of post-operative patients and avoid unnecessary prolonged patient stay.
2. To ensure patient’s safety by employing a set of reliable and well-defined criteria for nursing assessment and patient discharge.
3. To ensure high quality of care and nursing staff satisfaction.

Methodology
The Guidelines of NLD program were designed and implemented in TKOH(11/4/2016-31/12/16). Task groups were formed to develop the workflow and protocols in consultation with the Chief of Service of Anesthesia, all anesthetists and the senior nurses. 12 OT & 7 ASC nurses were recruited with intensive training. They had to complete the competency test after training. For evaluation, relevant data
was retrieved from the Anaesthesia Clinical Information System for analysis. In addition, telephone follow up service was provided on post-operative day one. Finally, a Nurse Satisfaction Survey was conducted. Likert scale was used and presented with the numerical value.

**Result**

1. **Improved Efficiency**

Combined Phases Recovery: In total 1885 patients were recruited for NLD in PACU. 5.4% did not fulfil the criteria, which referred to anesthetists for discharge. Under NLD program, 8 minutes of length of stay was reduced. Meanwhile, 550 patients participated in the combined phase of NLD in ASC. 98% was discharged by nurses and 2% were discharged by anesthetists. 0.04% of patients needed to attend A&E after operation. Nevertheless, no patient discharged by nurses was re-admitted.

2. **Patient’s Safety and Nurse Satisfaction Ensured:** Zero incident has been reported. All patients feel satisfied with the discharge process and the telephone follow up services. 92% of nurses felt empowered. They agreed that the scoring system helped them with safe decisions. They were satisfied and confident in carrying out the NLD.

**Conclusion:** The One Stop Nurse-led discharge services in combined Phases Recovery have successfully reduced the prolonged recovery. It can facilitate timely discharge, maintain patient safety and enhance nursing autonomy.