


Adelaide Health Service

The very, very long stay patient 100+



Government
of South Australia

SA Health



**5% of patients occupy 25%
bed days in most major
public hospitals**



What's the issue

- > System Drivers
 - acute bed capacity demand
 - patient flow
 - scattered escalation processes
 - frustration and fatigue
- > Lost patients and no navigation
- > Case examples everywhere
- > Preconceptions of the problem



In the beginning

Complaints

- Family
 - Wards
 - Minister
 - Media
 - Providers
- > Pressure to do something
- Care teams
 - Placement and discharge teams
 - Managers and coordinators
 - Hospital and System Administrators
- > Escalation and More Escalation



Where to start?

- > Enough is Enough approach
- > Gather information – 100+ is born
 - Who is out there?
 - Where are they?
 - What are the issues?
 - What's already been done?
 - Why is this patient still here?
- > December 09 then February 10
 - Started as data
 - But there are actual patients behind the problem

What we found

- > 45 staying more than 100 days
 - 38 noted in December 09 (ALOS 277 days), 16% increase in reported cases to 45 February 10 (ALOS 243)
 - increasing numbers being reported and data was clarified eg linking of episodes
- > More like 65 patients at any one time
- > Three clear areas for action
 - Package up the issues for system change
 - Sort out of individual cases
 - Prevention strategies



What we did

**we turned the unexpected
into the expected**



What we did

- > Package up the issues for system change
 - Data collection, coordination and integrity
 - Sites with particular issues
 - Themes arising
 - Relationships with other agencies and organisations
 - Supports needed for case management
 - Links to Department of Health and beyond
 - Escalated issues in themes



What we did

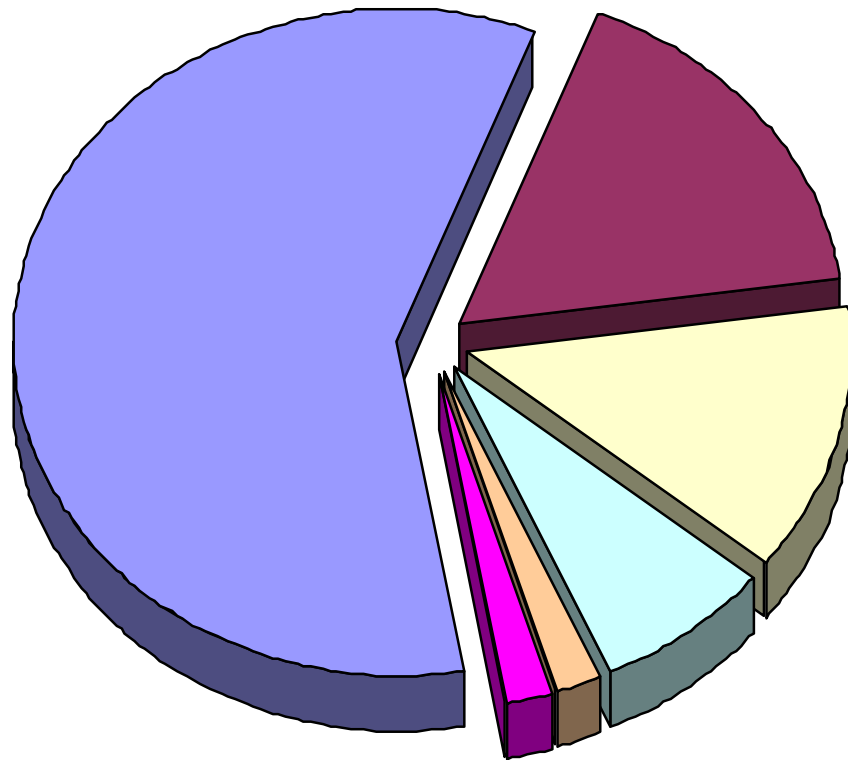
- > Sort out of individual cases
 - Learnt about the issues
 - Built staff capacity to manage
 - Developed relationships with key enablers
 - Reallocation of resources to trial interim care solutions



What we did

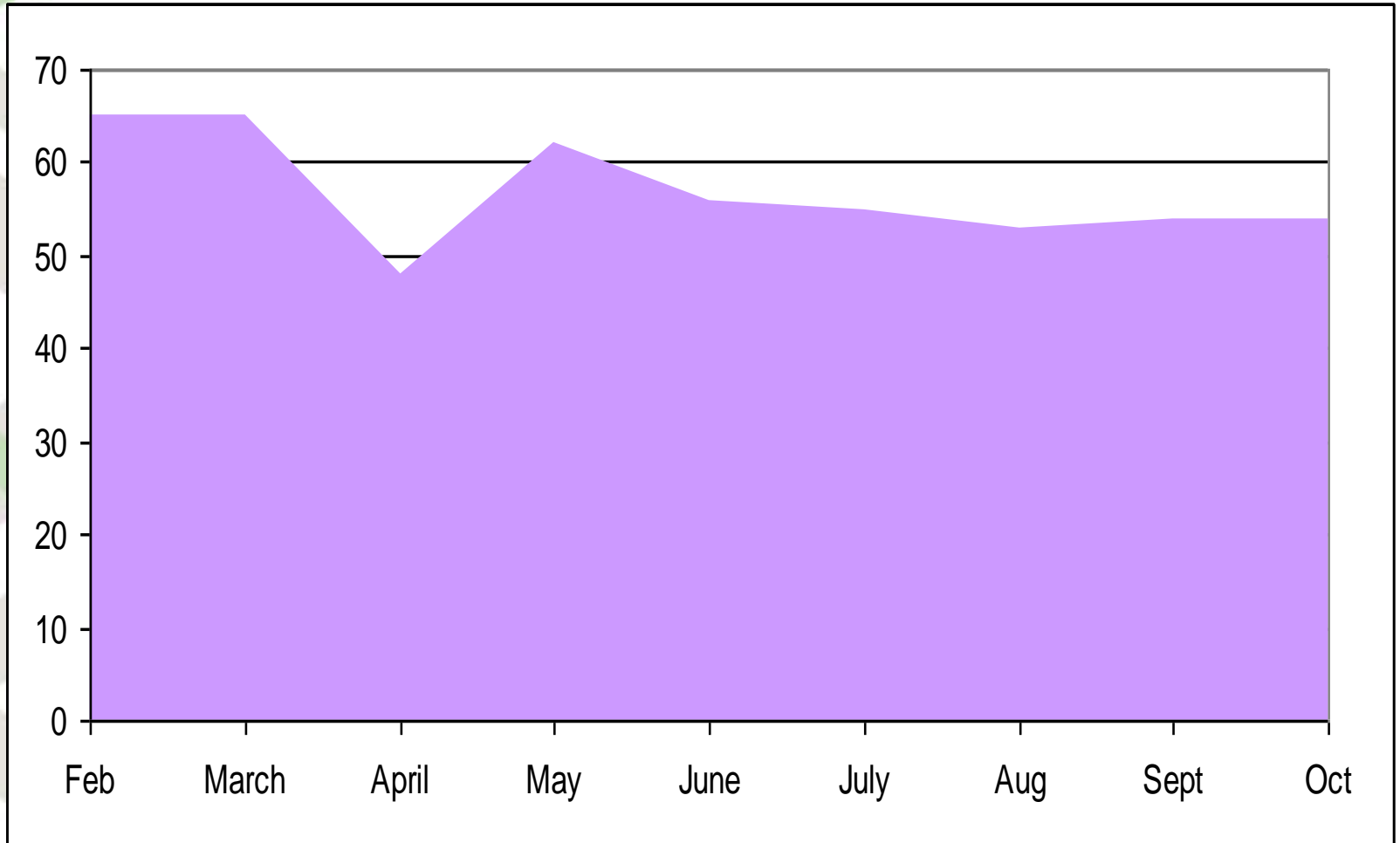
> Prevention strategies

- Developed strategies to manage other cohorts
 - 10+
 - 20+
 - 60+
 - 80+
- Site specific interventions eg Hampstead Long stay patient review, patient flowboard monitoring
- Education for staff



- Active Rehab 58%
- Awaiting Disability SA 17%
- Acute Care 13%
- Residential accommodation 8%
- Mental health services 2%
- Home Modifications (major) 2%

Numbers





What next

- > From themes to models
 - Expected flow of 12-13 per month into this cohort with ALOS of 245
 - 100+ register
 - Alerts to teams
 - Support through Regional Referral Unit
 - Multi-agency Long Stay Case Reviews
 - Resource for Department of Health to inform service change
- > Now investing in system changes

Thankyou



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