Aboriginal Wellbeing

Hospital Discharge Journey

Case for change

The Mid North Coast LHD provides services on the lands of the Birpai, Dunghutti, Nganyaywana and Gumbaynggirr Nations and is committed to Closing the Gap in health outcomes for Aboriginal people.

Effective Discharge planning and follow up treatment after hospitalisation contributes to better health outcomes and reduced unplanned readmissions because of deteriorating health.

MNCLHD was performing poorly, the disparity between health outcomes of Aboriginal people and the non-Aboriginal people is evident in all KPI’s including Unplanned readmissions to hospital within 28 days of discharge.

Planning and implementing solutions

A partnership in care was established with stakeholders including Aboriginal Community, Community Controlled Aboriginal Medical Services, Medicare Local, MNCLHD hospital, community and Aboriginal Health staff.

Hospital discharge resources were reviewed which showed they did not reflect a partnership with the Aboriginal Community.

The partnership developed a culturally appropriate booklet to be used while in hospital to open the lines of communication between the client and their family, and the inpatient service providers, to document questions and answers and then taken home to refer to.

The resource aims to ensure client centered discharge planning is embraced throughout the hospital journey: to provide better understanding of what is required to gain the best health outcomes during and after discharge from hospital.

Goal

Improve Aboriginal patients, families and carer’s discharge journey from the hospitals within the MNCLHD.

Objectives

Improve inpatient data by Aboriginality.

Ensure culturally appropriate service provision.

Coordinated approach to patient discharge for Aboriginal people supported by MNCLHD, Aboriginal Medical Services, Primary Health Network, government and non-government organisations.

Reduced unplanned readmissions by, reducing the confusion regarding discharge plans.

Method

Monitor data quality Aboriginality as per PD2012_042 Aboriginal and Torres Strait Origin- recording of information of patients and clients.

Ensure culturally appropriate resources are available for Aboriginal people during the discharge process from MNCLHD hospitals, developed in collaboration with Aboriginal people.

Better understanding by community of what is required to gain the best health outcomes after discharge from hospital.

Reduced unplanned readmissions.

Diagnostics

- The state is sitting around 6.4% for unplanned re-admissions within 28 day for Aboriginal people
- MNCLHD YTD Aug 16 6.6%:
  - While progress has been made YTD on decreasing the % of Aboriginal people who have unplanned readmissions within 28 days of discharge, significant improvement still needs to occur to close the Gap of disparity for Aboriginal people living within the MNCLHD

Recommendation:

- Develop a culturally appropriate resource that clearly identifies the hospital discharge journey required to achieve the best health outcome after an admission to hospital.

Sustaining change

The partnership with the Aboriginal Community built on trust and respect has provided a platform to continue to engage the community in service redesign.

We will evaluate the booklets after 6 months by doing a survey of patients who have received the booklets to gain feedback for future reviews of the booklet.

The booklet has already been reprinted in October 2015 to update and make changes from feedback by the patients and staff.

Artwork by Gumbaynggirr Artist Brentyn Lugnan, of Bruz Design: FIVE MOBS.

"The piece depicts the work of Mid North Coast Local Health District and the five contributing areas or ‘Mobs’.

At the top there are ‘circles’ which show the mountainous areas. These are then dissected by the rivers, which flow through the work down to the sand dunes/middens. Inside the middens, shells can be seen showing the ongoing and ancient connection to country. Beyond the dunes we move out into the sea.

The ‘starfish’ design in the centre of the piece has been used to represent the work of the Mid North Coast Local Health District. The thinner one shows the coming together of five groups, first as separate gatherings, then their journey as they combine in the centre. The thicker lined ‘starfish’ is these people then taking their skills and knowledge back out into the communities.”

Brentyn Lugnan 20/06/14

Conclusion

Discussions have commenced with Centre for Epidemiology and Evidence regarding evaluation of the project.

Acknowledgements

Mid North Coast Local Health District Big Ideas Grants allowed for the opportunity to fund this project and we thank and acknowledge the many Staff, partners and community members who contributed their ideas, time and expertise to implementing this booklet.