**Improving Oncology Inpatients Patterns of Care**

**Clinical Redesign Project**

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### Case For Change

**61%** Of patients being discharged between 1200hrs to 1700hrs

2 days or more

Radiation Oncology Length of Stay exceeded compared to the same time the previous year.

1 in 4

referrals to allied health from medical staff were incomplete or Inadequate.

"We can do better"

A general consensus amongst all oncology staff that inpatient care could be done better.

### Diagnostic Findings

- **Inadequate Radiation Oncology medical presence on ward**
- **48% of Radiation Oncology patients staying > 1 Week**
- **61% of patients were being discharged between 1200hrs and 1700hrs.**

### Results

**Objective # 1**

Objective: Reduce the proportion of patients admitted under Radiation Oncology staying longer than 7 days from 48% to 38% by August 2017.

- **Radiation Oncology patients staying > 1 week**
  - December 2016: 48%
  - January 2017: 33%
  - February 2017: 28%
  - March 2017: 15%
  - April 2017: 11%
  - May 2017: 13%
  - June 2017: 15%
  - July 2017: 15%

**Objective # 2**

Objective: Increase the proportion of patients discharged prior to midday from 18% to 50% by August 2017.

- **Patients discharged before 12pm**
  - December 2016: 13%
  - January 2017: 15%
  - February 2017: 19%
  - March 2017: 21%
  - April 2017: 24%
  - May 2017: 24%
  - June 2017: 24%
  - July 2017: 24%

### Solutions

**Solution # 1**

One Radiation Oncology advanced trainee allocated to inpatient ward responsibilities to improve inpatient care.

**Solution # 2**

Optimising the electronic patient journey board meetings by introducing a set agenda prompting discharge planning based on estimated date of discharge.

**Solution # 3**

Introduction of an oncology ward orientation session for rotating resident medical officers around the role of allied health teams and optimal communication, referral and discharge planning processes.

### Sustaining Change

The strategy to sustain change was to embed the solutions to become usual for the unit. This was achieved through:

1. Involving key stakeholders throughout the various redesign methodology phases.
2. Providing positive reinforcement through the use of small rewards, immediate verbal feedback and written recognition of individuals exhibiting desired behaviours.
3. Incorporating key performance indicators as apart of the set agenda in monthly head of department and quality meetings.

### Conclusion

Oncology inpatient services at Westmead Hospital are vital to the 1600 cancer patients we admit yearly. This project has been able to identify key obstacles in providing timely access to appropriate, high quality care and an optimal patient experience.

### Acknowledgements

We would like to thank our sponsor Dr Verity Ahern, Director of Radiation Oncology & Ms Emma Clarke, Director of Innovation and Redesign. We also extend sincere gratitude to the steering committee, patients & carers, consumers & all clinical & non-clinical staff that participated in the project.

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