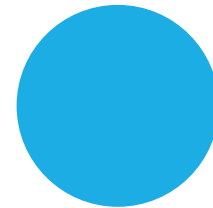


An exploration of patients' perceptions of discharge from the fast track area of one Emergency Department

Presented by Leahanna Stevens NP
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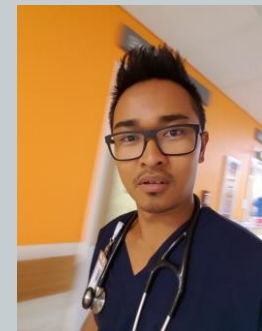
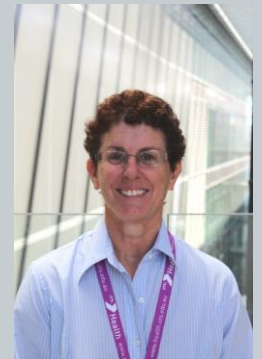
Inter-State Research Team

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Background

- In Australia, 287 Emergency Departments (2016-2017)
- 7.8 million presentations
- 69% of these are sent home
- Little is known about the adequacy of discharge planning
- Communication processes are important for safe transition home
- Safe discharge is dependent on the appropriate transfer of information



Aim

To explore the:

- Experience
- Confidence
- Satisfaction
- Perceptions

of patients recently discharged
from our ED fast track area

Methods

A descriptive exploratory research design, completed over 6 month period (Feb – Aug 2017) data was collected via:

- Telephone interviews – 32 questions developed from various literature and pilot tested by two consumers and three clinicians
- Medical Record Audit – generated to identify the discharge patient group
- Ethics approval from UTAS Human Research Ethics Committee H0015928



Study Setting

Single site study at Mersey Community Hospital, Emergency Department

- 26 000 presentations per year
- 80% discharge rate

- 6 acute, 3 sub-acute and 2 resus beds
- Fast track area

ED - 3 NPs, 33 Nurses, 23 Medics



Study Participants

A convenience sample - 100 patients selected
Called within 3 weeks of discharge

Inclusions:

Low acuity (ATS 3,4,5)
Fast Track allocation

Exclusions:

<18 years
Aged care residents
Cognitive impairment
ATS 1 and 2

Results

Understanding and Satisfaction

93% of patients understood their diagnosis and treatment

90% were satisfied with their care

81% felt involved in their discharge

88% were confident to go home

Discharge Advice

84% given verbal advice

81% understood their advice

44% were given care instructions for self-management

16% verbal and written advice**

Results

Referral

80% received a referral - 60% attended the referral

Reported reasons for not attending include:

“felt better”, “returned to ED” or “a delay in getting an appointment”

Compliance

73% given a prescription

52% of patients had their scripts filled immediately

54% were aware of the signs and symptoms that would require them to re-present

26% re-presented – 11 deterioration, 8 unresolved symptoms

7 clinical review



Conclusion

- Majority satisfied and confident to go home
- Majority reported they received **verbal** discharge information
- Greater confidence being discharge with carer or family member
- No significant adverse outcomes reported
- A small number of patients returned to ED for symptom control or deterioration
- Perceived time in ED longer (40mins) than medical record data however majority reported this was reasonable

Future Research

Research is needed to determine the benefits of **written versus oral discharge information or both**

To date, we have no Australian performance metrics that define safe ED discharge or what constitutes appropriate discharge information





