

TRUST BOARD

Date of Meeting: 15/05/2012	Agenda Item No: 7.2	Enclosure: 6
Intended Outcome:		
For noting ✓	For information	For decision

Title of Report: Patient Discharge and Transfers

Aims:

To update the Trust Board on patient discharges between 11.00pm and 6.00am.

Executive Summary:

A recent press report raised the concern of the Trust Board with respect to the discharge of patients from NCUH in the late evening into the early morning period. Clearly there was concern nationally, but also from our perspective, about vulnerable patients and the increased risk of injury or accident if unsafely discharged at night.

This was felt to possibly be a consequence of not managing beds efficiently or appropriately during the day and needing to free up capacity too late in the day and not in the best interests of patient safety, quality and experience.

The national average percentage of patients sent home at night is 3.5% with some Trusts as high as 7%.

The performance of NCUH with respect to night-time discharges is as at table 1.

Table 1			
Year	Discharges Between 11pm & 6am	Total Discharges	% between 11pm & 6am
2006/07	2985	90,385	3.3%
2007/08	2677	93,811	2.85%
2008/09	2252	92,138	2.44%
2009/10	2154	91,286	2.36%
2010/11	1604	85,827	1.87%
2011/12 (to end Feb)	1386	78,111	1.77%

Patients are only discharged from our hospitals when it is safe and clinically appropriate to do so. Our aim will always be to ensure ongoing care needs are fully assessed and appropriate plans are put in place with the support of responsible adult or community services.

Analysis of our night-time discharges shows broad consistency with national trends which are largely driven by patient choice, new mothers wishing to go home or, predominantly, patients who have come through our Emergency Assessment Unit and are not required to be admitted to a bed post-assessment.

Overview of key areas for consideration or noting:

- Year on year the Trust has reduced the number of patients who are discharged between 11pm and 6am to approximately 1.77%.
- This compares favourably to national average benchmark on 3.5%.
- We will continue to monitor patient discharges during this period via the divisional performance reviews.
- In addition we will also commence monitoring discharges between 9pm and 11pm in the evening.

Specific implications and links to the Trust’s Strategic Aims:

Ensure we provide high quality, safe and effective care for all our patients including meeting essential standards of safety and quality as set out by the CQC	✓
Develop a viable integrated clinical strategy for secondary care services which is sustainable and affordable	
Develop a new healthcare facility in West Cumbria that is fit for the 21st century	
Achieve sustainable financial balance through the delivery of the Trust's internal Cost Improvement Programme, securing a viable contract income from our GP commissioners and contributing to the system wide cost reductions	
To develop and implement a successful merger or acquisition plan that enables the Trust to become part of an existing NHS Foundation Trust	

Recommendations:

The Trust Board is asked to note the content of the report.

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Presented by:

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