

Turning Discharge Barriers into Achievable Hurdles

The role of a grade 3 AHA on a rapid discharge team

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Background

To support a GEM-based Supported Patient Centred Early Discharge (**SPeED**) program, in 2017, Peninsula Health introduced a Grade 3 Allied Health Assistant (AHA) position.

Impediments to early discharge had included:

- ❑ Inadequate admission screening
- ❑ Passive hospitalized role
- ❑ Fragmented practice
- ❑ Delayed progression
- ❑ A focus on barriers rather than opportunities

This poster outlines the contribution of the AHA to the program.

Implementation

The multi-disciplinary AHA supported the Early Discharge Occupational Therapists (2) and Physiotherapists (2) by:

- ❑ Assisting with a program specific screening process to identify suitable patients
- ❑ Reinforcing active participation in the discharge pathway
- ❑ Integrating OT and PT treatment and education throughout admission
- ❑ Independently progressing physiotherapy sessions
- ❑ Focusing on patient "assets"

Results

A survey was conducted among allied health with Universally positive feedback:

- ❑ "Completes tasks which facilitate discharge"
- ❑ "Allows therapist to focus on other priorities"
- ❑ "Proactive approach"
- ❑ "Increased initiative to problem solve issues"
- ❑ "Timely d/c equipment provision & education"
- ❑ "Seamless physical /functional retraining"

Team results demonstrated reduced LOS/readmissions and high patient satisfaction

Discussion

The early discharge team recognised the higher level contributions of a grade 3 AHA focused on operational and patient outcomes rather than simply prescribed service delivery. Patient outcomes were directly attributable to the shared responsibility and initiative of the AHA alongside other professional team members. This was achieved through a model of care focused on reducing length of stay and now embedded in team practice.

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