Effective use of staff time in ACT, ICMHS to improve Consumer outcomes

Author: Dr Ganesan Jeyachandran; Position: SCD for CMHS; Email: ganesh.Jeyachandran@health.nsw.gov.au;
Phone 0408546993 ECLP Cohort 22

Aim Statement:

By April 2020, to decrease the number of referrals from the district EDs to the 48hr follow up clinic by 25%, to decrease the number of unnecessary repetitive phone calls by 50% and to stop unplanned home visits

Background to problem worth solving

Following a few RCAs in late 2017 and early 2018 and the subsequent recommendations, a directive was circulated that all consumers who are discharged from both in-patient mental health units and district EDs must receive a face to face follow up appointment in the community within 48 hrs through the Acute Care Team (ACT).
This has led to a significant increase in the influx of referrals to the ACT especially from the EDs, leading to a substantial number of hours being spent in review meetings (dead times) roughly equivalent to just more than 1.0FTE of staff/day. This has led to dilution of actual ACT work also, as majority of the time is being spent on chasing up consumers who disengaged from the services immediately after presentation to the ED, reviewing and discussing consumers who actually do not need that intense level of intervention.
This was further complicated by indiscriminate number of phone calls, to those who do not respond, without any clear guidance as well as home visits without prior intimation of the appointments leading to high degree of attrition rates.

Team members

Sponsor/s (Guidance team) members:
Ms Julie Carter, Director of MH Services

Project team members:
Dr Ganesan Jeyachandran Stream Clinical Director, Shane Schutz CNC, Paul Robson CNC, James Millman CNS, Clare Bates RN, Carla Rutherford CNC, Karen Baker CNS, and Dr Daniel Smoothy Chief Registrar or his delegate.

Patient / consumer involvement:
Irene Constatinidis Team Coordinator in Consumer Participation Mental Health

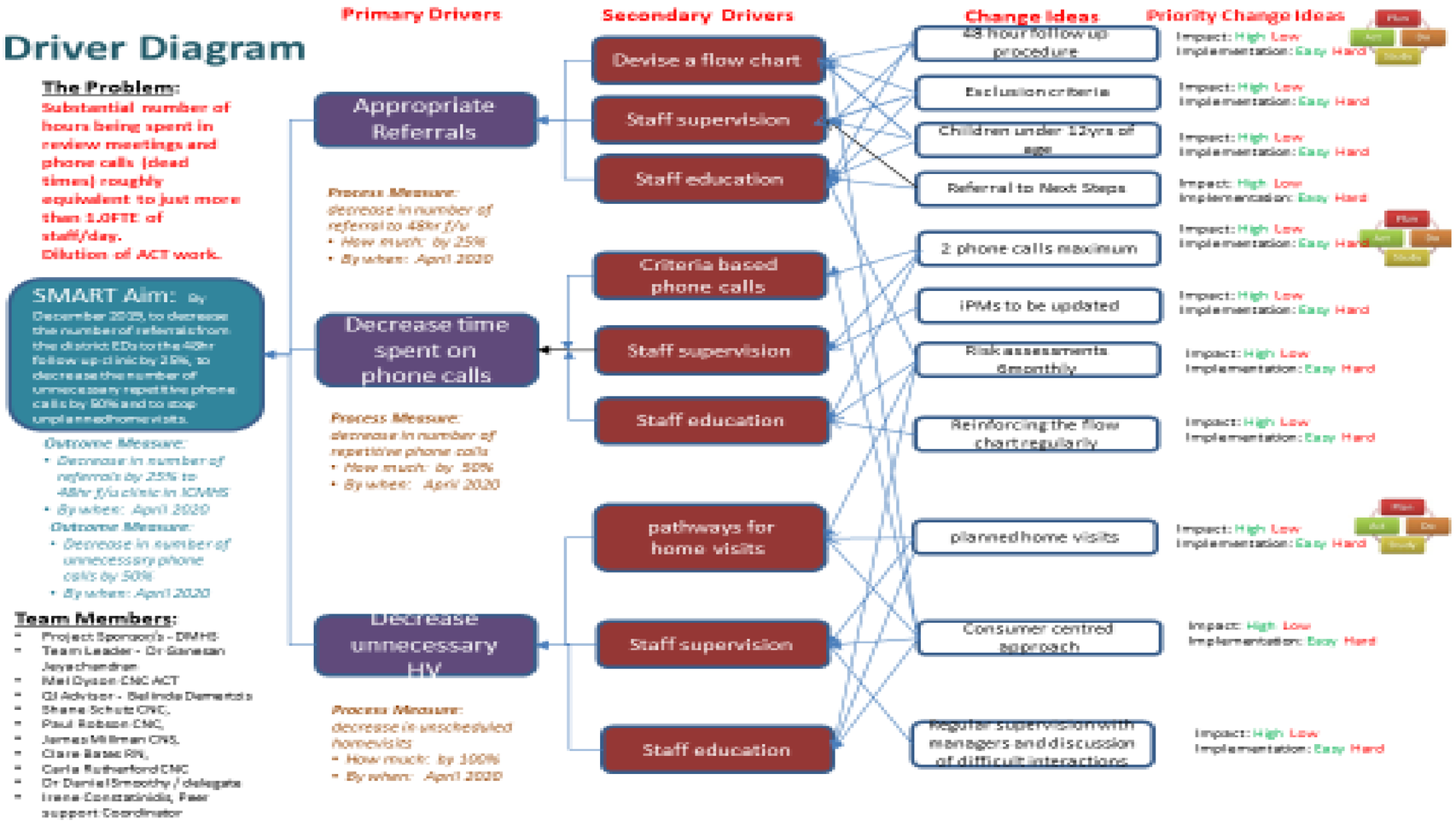
Mental Health Data and Outcome Measures Co-ordinator
Belinda Demertzis

Link to National Standard and LHD Strategic Imperative

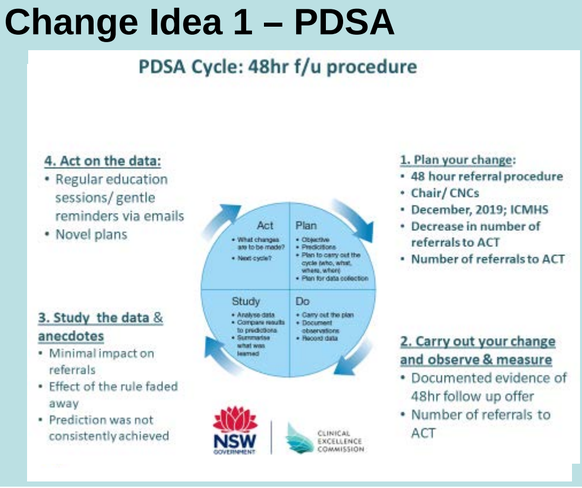
With which National Standard or Strategic Imperative is the project aligned?

- This project is aligned with NSQHS standards 1, 2, 5, 6 and 8:
  - Clinical Governance
  - Partnering with consumers
  - Comprehensive care
  - Communicating for safety
  - Recognising and responding to Acute deterioration

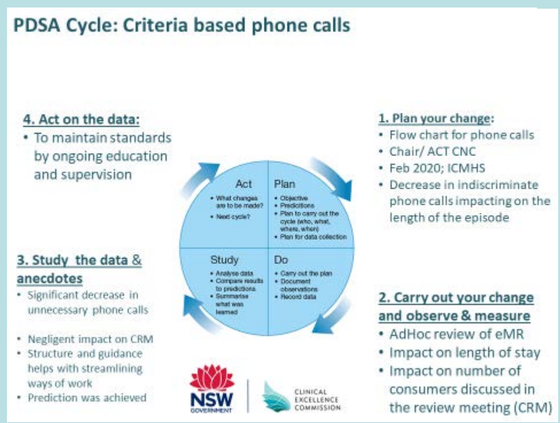
Driver Diagram



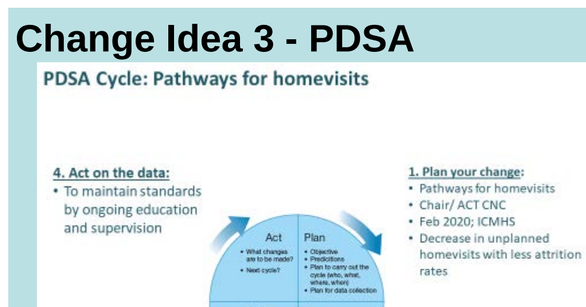
Change Idea 1 – PDSA

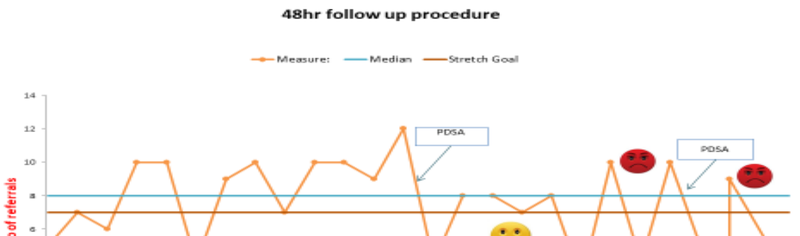


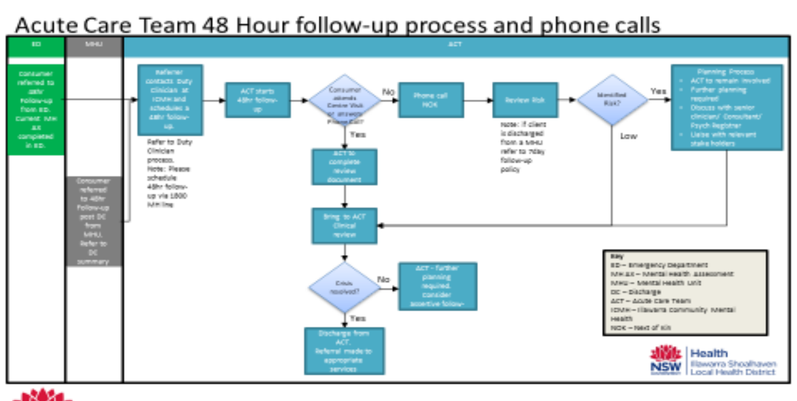
Change Idea 2 - PDSA



Change Idea 3 - PDSA







Results continued

Discussion

- The effect of the first change idea (48hr f/u procedure) is short lived.
  - workforce change every day and duties come infrequently in the EDs
  - It was difficult to sustain and remember the procedure every time on call and especially in the middle of the night where little safe discharge plans are in place.
  - Consumers tend to say yes for an immediate review even when there is no clinical need.
  - However, it was much more consumer focussed.
- The second and third change ideas (criteria based phone calls and planned home visits) have significant impact on Length of stay.
  - Much more consumer centred
  - Much more collaborative
  - Although, the consumers were discussed in the CRM more, it provided better care holistically
  - Although sustained, change in work force and inflexible work force can have an adverse impact on the outcome.

Overall Outcome of Project:

Overall Outcome of the Project

- There is a tangible benefit by ongoing implementation of these change ideas.
- For sustained positive outcome, regular reminders and inclusion of procedure and flow charts in orientation packs for the new recruitments
- Ongoing training and supervision for both new and existing staff
- Analysis of the data for similar period in 2021.
- Scope for further exploration of QI projects to influence better functioning of ACT, ICMHS

Plans to sustain change

- *Ongoing training*
- *Supervision*
- *Regular reminders*
- *Inclusion of the materials in the orientation packs*
- *Review of the data for the month of September 2021*

Plans to spread /share change

- Presentation in the Research Sub-committee, ISLHD MHS
- Presentation to all staff in ICMHS, ISLHD
- Registering with Innovation Portal in ISLHD