

“Please Help Me Go Home Early”

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Aim

Decrease the length of hospital stay for CHF or COPD patients admitted to Chilliwack General Hospital (CGH) by 15% (1 Day) in 12 months.

Background

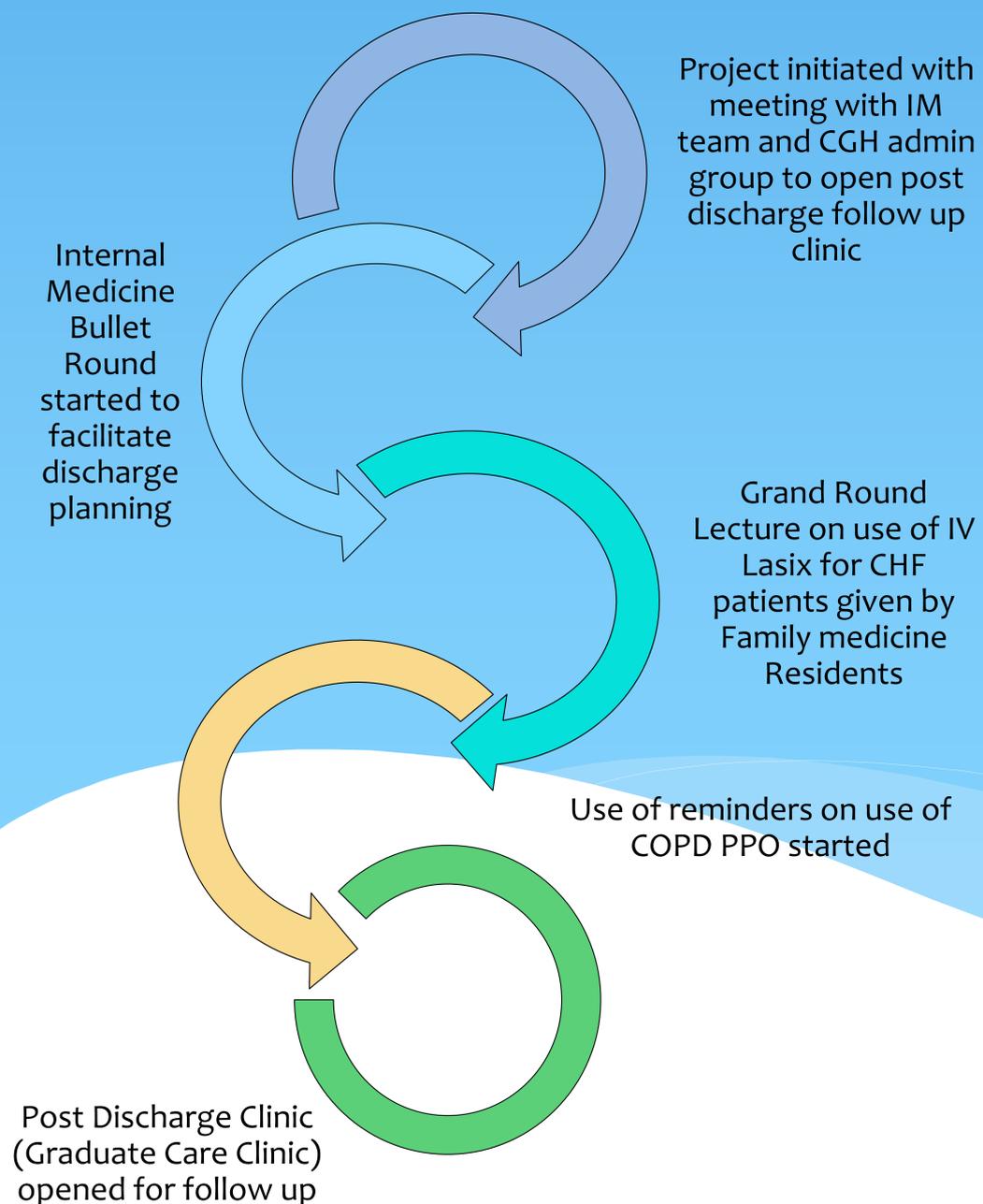
COPD is the number one cause of hospital admission (Excluding Child birth) and the fourth cause of ER visits in Canada. CHF is the second cause of hospital admission in the age group of 65 years and older, next to COPD. Reducing the length of hospital stay for COPD and CHF patients will improve the cost of in hospital care and decrease the risk of hospital acquired infections.

Estimated Cost Saving



After 6 months of initiation of the project; $\$800$ (cost per day in medical ward) \times 1099 (number of admissions) \times 1.4 = $\$1,230,990$ saved for both CHF and COPD combined

Project Design & Strategy



Results



Figure 1: Average length of stay for CHF at CGH decreased by 2.8 days

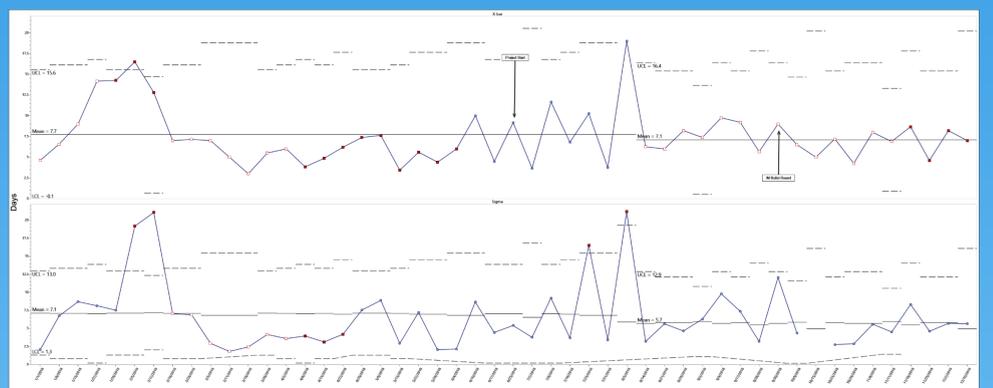


Figure 2: Average length of stay for COPD at CGH decreased by 0.6 days

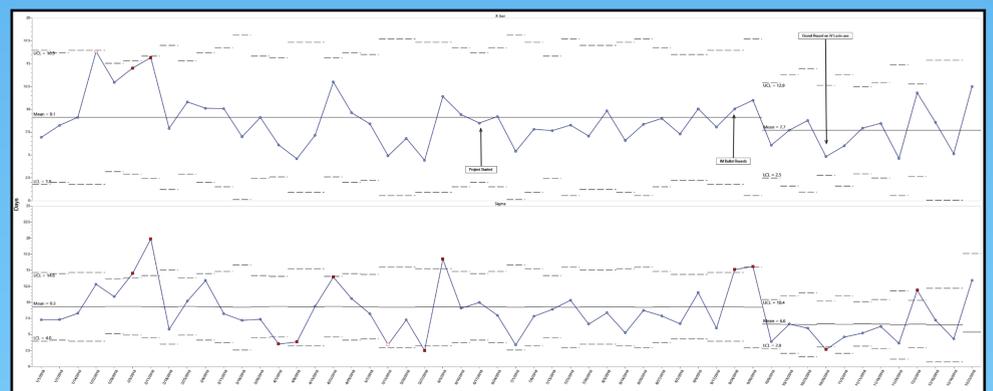


Figure 3: Combined average length of stay for CHF and COPD at CGH decreased by 1.4 days

Lessons Learned

- Simple and continuous communication of the change ideas impact behaviors
- Involving hospital admin and making a good business case helps facilitate implementation of change ideas
- IM bullet round helped GP's feel comfortable to discharge patients earlier than they used to
- More use of IV Lasix might have improved decreasing LOS but more data is needed

Next Steps

- Will continue monitoring if the opening of GCC/post discharge follow up clinic will further decrease length of stay
- Continue communicating with GPs on optimizing treatment and early discharge

Team

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