



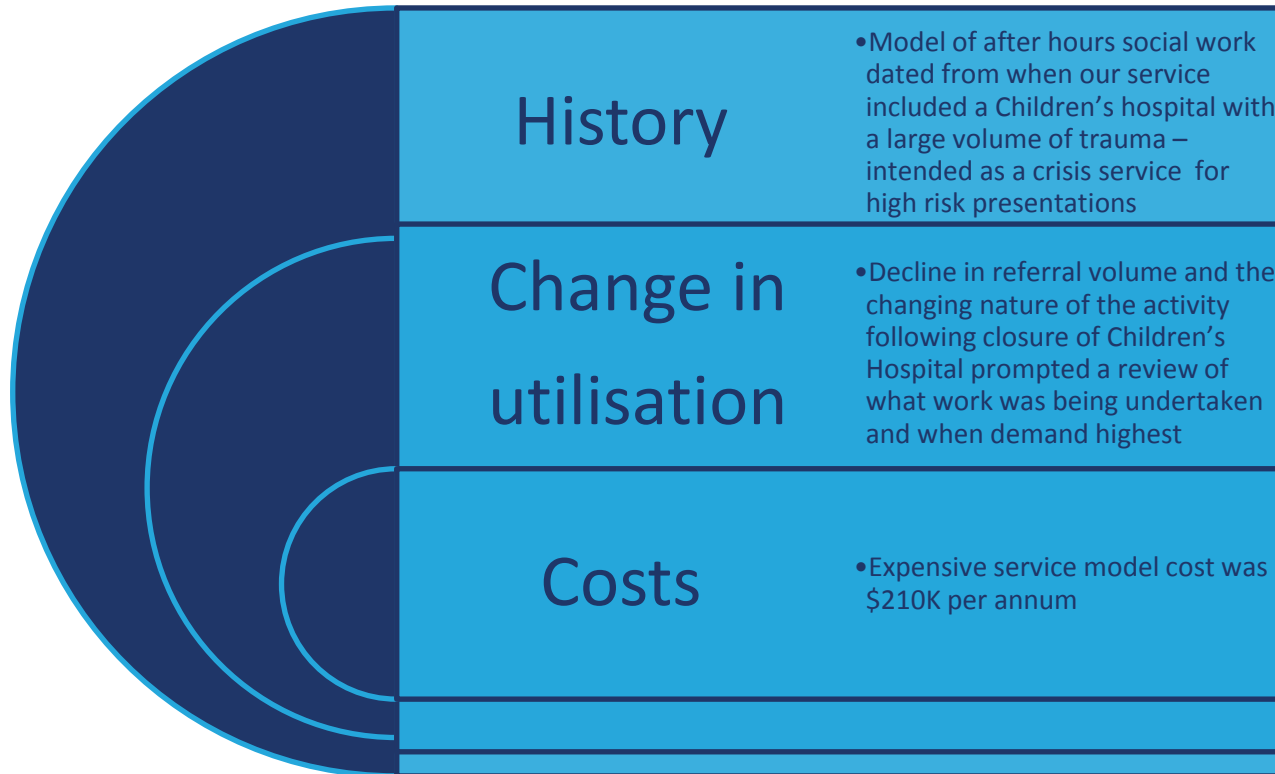
# **(Review of After Hours Social Work Service)**

**Hospital Name: (HERA)  
Presenter: (Michelle Daly)**

**HRT 1616 Allied Health Improvement Group  
26 – 27 October  
Brisbane**



# Key Problem



# Aim of this innovation

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- “*Exceptional Every Time Strategy* “ adopted by our organisation prompted the question: What service model best addresses service quality, safety of patients and optimal experience balanced with efficiency and future viability for our patient population?



# Baseline Data

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- After hours SW Service originally operated until 10 pm Monday to Saturday and 8pm Sundays.
- First round of changes early 2015 following closure of Children's Hospital in late 2014 = reduced service to a day shift only on Saturday, Sunday and public holidays. Weekday evening shift finish changed to 9pm and delivered by shifting the start time of an existing SW position. Changed service model reduced the cost to approx. \$ 161 K per annum;
- Staffing vacancy in early 2016 prompted a further review of utilisation over each day of the week to inform recruitment decisions;
- Very low activity during the week day evenings, most referrals (66%) were on Saturday, Sunday and public holidays, some weekday evenings zero referrals received;
- 25 % of total referrals received were not actioned for various reasons such as patient not in room, asleep or with visitors.

# Key Changes



In early 2016 we reduced hours of service operation to provide on site SW service Thursday and Friday evenings until 9pm and Saturday/Sunday and public holidays during day - ceased after hours social work service Monday, Tuesday and Wednesday evenings.



Agreed that we would implement change and monitor impact and undertake further review of service in a further 3 to 6 months.

# Outcomes so far



- Nil complaints from service areas following change in January 2016;
- Significant savings associated with reduction of evening service early in the week = service now costing \$119 K per annum;
- Small number of referrals received out of SW hours , followed up next working day – no adverse outcomes reported;
- Reviewed utilisation for 3 months May to July 2016 : 167 referrals received:
  - Over 50 % of total referrals received are still from day social workers asking after hours staff to follow up or were “FYI” to the after hours staff;
  - 80% of referrals received are from Mothers’ hospital rather than ED or ICU;
  - 25% of referrals continue to be unable to be actioned for various reasons.



- Our weekend SW activity on HRT report is 3%;
- Considering what further changes may be needed;
- Consultation with ED and Mother’s Hospital;
- Reviewing feedback from staff who work in the service.

# Lessons Learnt

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- Instead of just asking what else do we need to be doing, we also need to ask what do we need to stop doing or do differently ?
- How do we build the capacity of the organisation to respond to situations involving psychosocial risk across the 24 hour 7 day per week hospital – who needs to be here, and how do we best resource the staff that are here?
- Services need to be reviewed constantly particularly when organisations change;
- The staffing model for services needs to be flexible to respond to changing demands and alterations in organisational context.



- For more information Contact: Michelle Daly
- [Tel:07 3163 8031](tel:0731638031)

