



# The CHASERS

**THE CANBERRA HOSPITAL**

**Presenter: DR CHRIS KATSOGIANNIS**

**HRT 1617 Sub-acute Improvement group**

**23-24 November 2016**

**Brisbane**



# Key Problems

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- DELAYS FROM ACUTE ADMISSION TO REFERRAL FOR REHAB
- CONFUSION IN ACUTE SETTING TO WHOM TO REFER-  
WARDS/CRT/TTCP/PRIVATE
- DELAYS IN REHAB REFERRAL TO ASSESSMENT TIME
- DELAYS IN READY FOR REHAB TO ADMISSION TO SUBACUTE
- LONG ALOS IN SUBACUTE FOR STROKE /COMPLEX NEURO

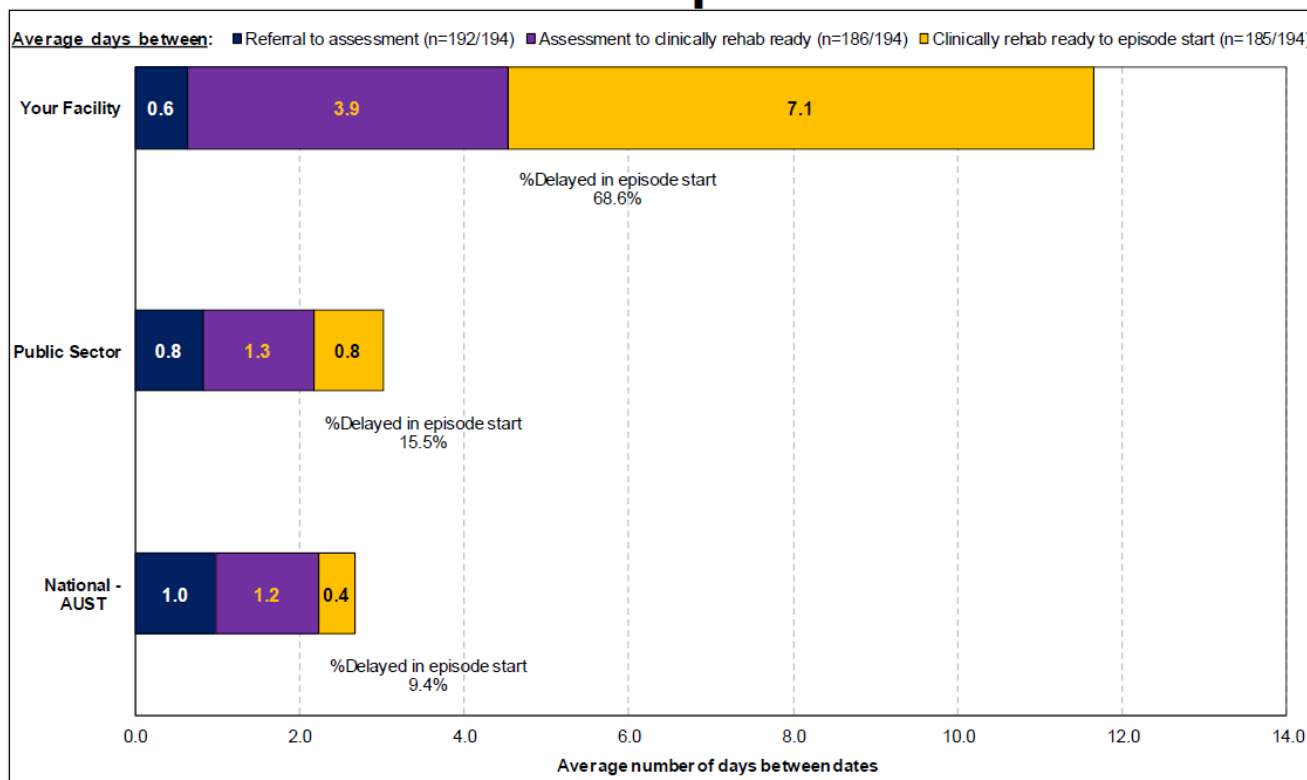
# Aim of this innovation

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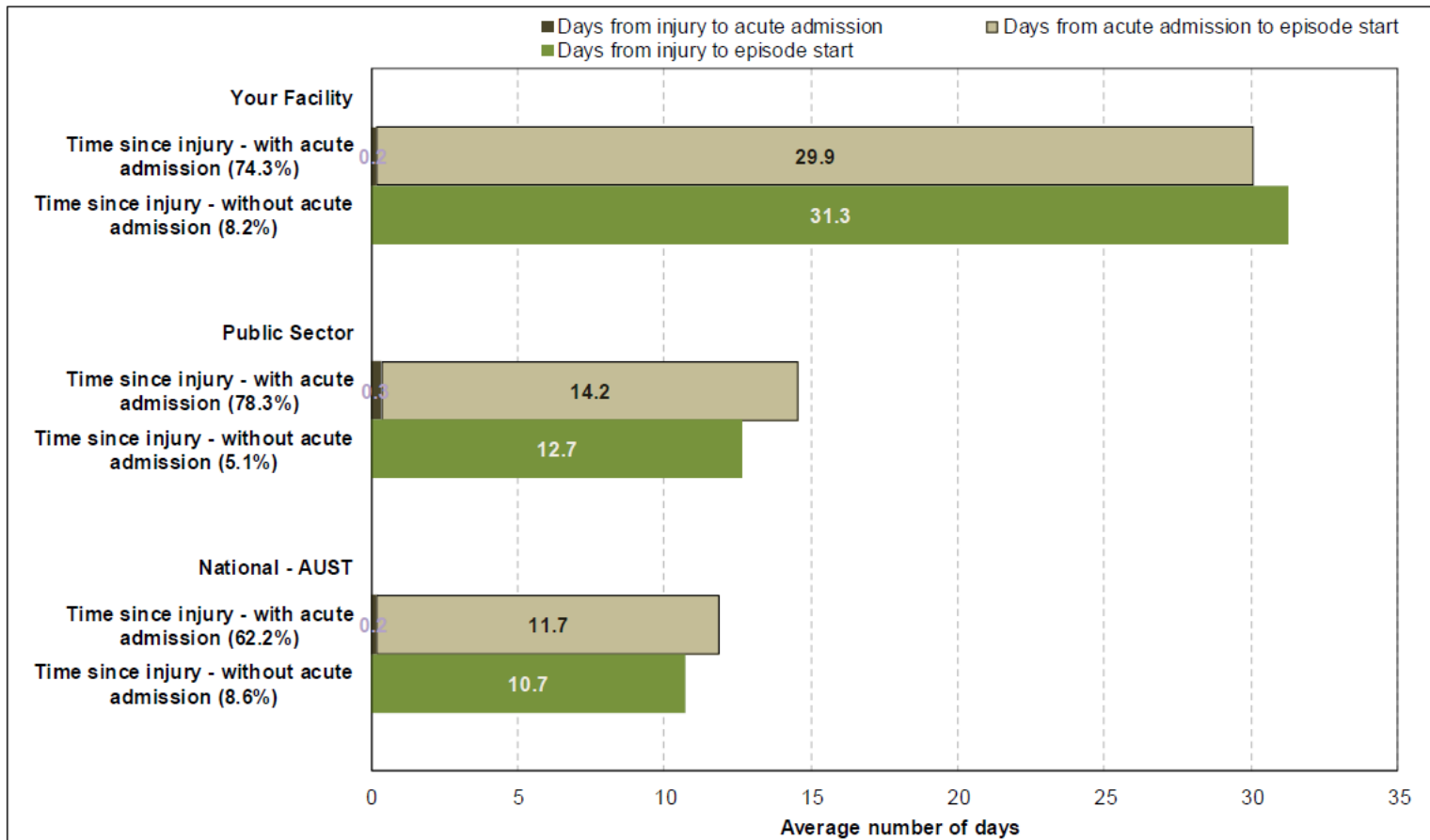
- **EARLY REHABILITATION**
- INCREASING POPULARITY INTERNATIONALLY
  - PREVENT FUNCTIONAL DECLINE
  - "PUSH" MODEL-TRADITIONAL- SLOW
- **AIMS OF INNOVATIONS**
  - MULTIDISCIPLINARY LEADERSHIP
  - "PULL" MODEL
  - REMOVE CONFUSION
  - EARLY INTERVENTION/PREVENTION
  - REDUCE DELAYS
  - MINIMISE PROBLEMS WHEN MOC CHANGES WITH UCPH OPENS IN 2018
- HOW?
- **THE CHASERS**  
THE CANBERRA HOSPITAL ACUTE SUBACUTE EARLY REHABILITATION SERVICE  
FEBRUARY 2016
- **MULTIDISCIPLINARY LEADERSHIP GROUP**



## Average number of days between referral and episode start



## Time since injury/onset to episode start



Note: analysis excludes episodes that are NOT first admissions

# Key Changes Implemented

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- Establishment of Rehabilitation Leadership Group- MDT representation
- Discuss ward issues/problems
- Provide leadership to all MDT staff to help solve problems
- Regular meetings
- Rotating chair
  
- SIP Project- Focussing on reducing ALOS in complex neuro/stroke patients at TCH
- CHASERS – established and started February 2016
- Multidisciplinary – Rehab Consultant, Registrar, Nurse, Allied Health
  - Attend Acute ward multidisciplinary meetings
  - Facilitate Acute team on acute wards- Stroke/Neuro/Ortho/others
  - not take over of care
  - collaborative approach to multidisciplinary care
  - triaging and fast tracking acute patients into appropriate subacute services

# Outcomes so far

HOSPITAL	TCH REHAB		
	FIN YR 2015	CAL YEAR 2015	FIN YR 2016
<u>LOS -DAYS</u>			
ALL EPISODES	46.2	46.6	44.8
STROKE	54.3	50.5	46
RECONDITIONING	33.6	38.8	42.3
ORTHO FRACTURES	N/A	34.3	33
TIME SINCE ONSET/INJURY TO EPISODE START	29.9	29.9	28.3
DAYS BETWEEN READY FOR REHAB AND EPISODE :	9.5	6.6	6.7

HOSPITAL	CALVARY ACRU		
	FIN YR 2015	CAL YEAR 2015	FIN YR 2016
<u>LOS -DAYS</u>			
ALL EPISODES	25.6	29.6	29.3
STROKE	29.8	27.7	25.6
RECONDITIONING	25.8	34.7	33.2
ORTHO FRACTURES	24.5	29.9	25.8
TIME SINCE ONSET/INJURY TO EPISODE START	23.5	24	19.4
DAYS BETWEEN READY FOR REHAB AND EPISODE :	5	3.1	2.3

# Outcomes so far

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ALOS HAS BEEN REDUCED FOR ALL IMPAIRMENTS/EPISODES AT TCH  
ALOS HAS BEEN REDUCED FOR STROKE AT TCH AND CALVARY ACRU  
TIME SINCE ONSET/INJURY TO EPISODE START HAS BEEN REDUCED AT TCH  
AND CALVARY.

DAYS BETWEEN READY FOR REHAB AND EPISODE START HAS BEEN  
REDUCED BOTH AT TCH AND CALVARY.

THE PROJECT AND COLLABORATIVE MDT WORK HAS ONLY BEEN  
RUNNING FOR LESS THAN 12 MONTHS .

IT IS ENVISAGED THAT FURTHER IMPROVEMENTS WILL BE MADE IN ALOS,  
AND REDUCED WAITING TIMES AND ACCESS TO REHABILITATION  
SERVICES.



# Lessons Learnt

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- YOU DONT ALWAYS NEED MORE \$\$\$ TO MAKE IMPROVEMENTS
  - WORK SMARTER
  - MULTIDISCIPLINARY LEADERSHIP AND OWNERSHIP
  - OPEN COMMUNICATION
  - TRUST
  - EARLY REFERRAL AND DISCUSSION
  - CONSIDER ALL OPTIONS FOR ALL FLOWS FROM ACUTE TO SUBACUTE
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