



Walker to Home Program

Princess Alexandra Hospital

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HRT 1518 Allied Health Improvement Group

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Key Problems

- Delayed discharges following acute hospitalisation among patients who needed four wheeled walkers to return to the community
- Detrimental effect on patient flow (delays from two days to two weeks), consequently impacting on NEAT and hospital funding
- Physiotherapy time that could be spent on direct patient care lost on complex processes involved in prescribing/organising hire or purchase of walkers prior to discharge

Aims of this innovation

- **Prevent delayed discharges due to provision of walkers**
 - Provide walkers on discharge for Medical Aids Subsidy Scheme (MASS) eligible patients
 - Simplify hire or purchase processes and have walkers available on discharge
 - Establish easily accessible funding for patients who can not afford hire or purchase of small mobility equipment
- **Manage provision of walkers using available human resources without ongoing costs**
 - Involve a small group of therapists and volunteers to support the program
- **Decrease therapists' time spent on prescribing and organising walkers**

Baseline Data

Costing of delayed discharges (example)

- Four consecutive patients who required walkers for discharge had their hospital stay extended for 9 days in total. The conservative and realistic opportunity costs were calculated as \$55,862.45 and \$175,628.75, respectively. In comparison, the total cost of walkers required by these four patients was \$639.00

Survey of physiotherapists (63 out of 98 therapists responded)

- Discharges were often delayed due to provision of walkers
- Up to 2 days to arrange hire of a walker
- Up to 5 days to arrange private purchase of a walker
- Up to 2 weeks for Medical Aids Subsidy funded walkers
- Time required to prescribe/organise a walker for discharge ranged from 40 to 360 minutes for MASS eligible patients (not including walker trial)

Key Changes Implemented

- A hospital fleet of walkers was established and walkers are issued without delay to patients on discharge
- The fleet of walkers is replenished using various pathways:
 - Walkers prescribed through MASS are delivered back to the hospital
 - Walkers that are purchased (patient or hospital funded) are re-ordered
 - A supplier company manages payments and delivers walkers for hire directly to the hospital



Rapid and safe pathway home without delays



Outcomes so far

- The program operates in a limited capacity – only patients who cannot hire or purchase walkers privately and/or would have to wait in hospital for MASS walkers are eligible to access walkers through the program
- In August and September 2015 delayed discharges were prevented for 10 patients, saving approximately 140 hospital days
- Program will be fully operational in January 2016 and it will be extended to all patients who require walkers as well as to other equipment required for discharge
- The impact of the program on physiotherapy clinical time will be evaluated in 2016, after full introduction of the program

Lessons Learnt

- It is beneficial to question and review standard practices
- Demonstration of cost benefits (potential savings) is a key in ensuring support from key stakeholders
- Small changes can have a considerable effect on funding, patient safety and use of clinical time
- The program can be managed without ongoing costs
- The program demonstrated capacity to address provision of other equipment required to facilitate discharges
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