



# Reduction in Delayed Discharges in Bedfordshire (EIP)

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Life QI Code: 114850

## *Improving the Ending Process for Staff and Service Users*

### Aim

*To reduce the percentage of delayed discharges from EIP by 50% by April 2019*

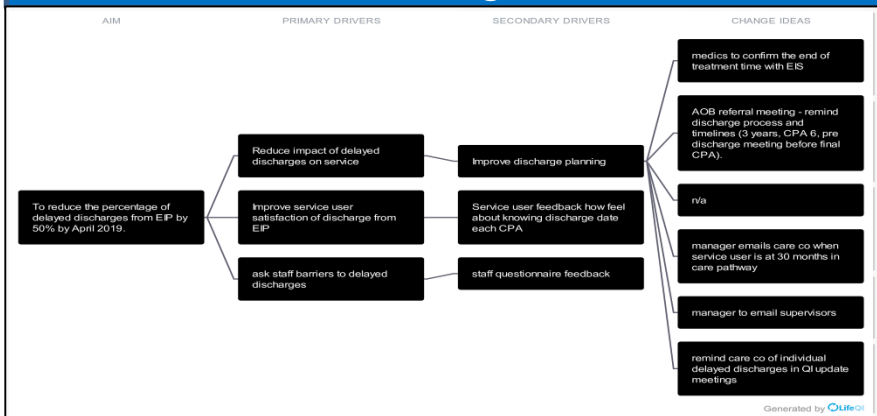
### How did you involve service users and carers in this work?

*Our QI team includes a service user representative and we meet fortnightly. We have clear roles and service user input has been driving the team's change strategies.*

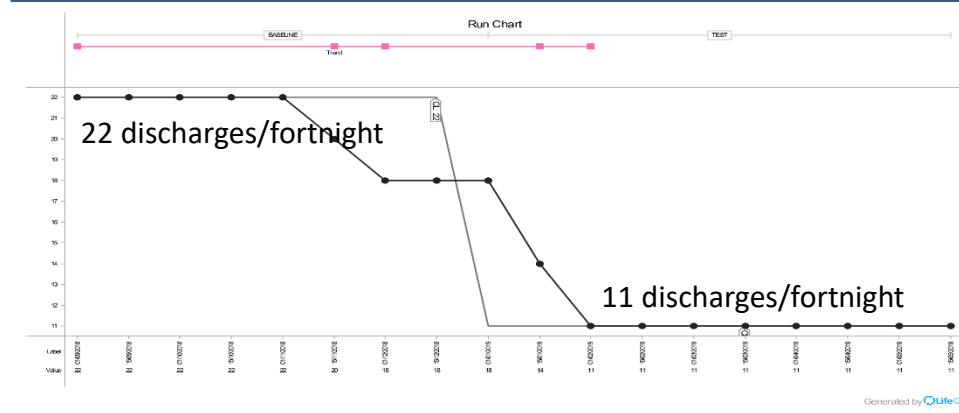
### Tests of Change

- 1. Confirm service end date in medical reviews, checked on Rio*
- 2. Discussion of discharge process, delayed discharges and timelines during MDT meetings*

### Driver diagram



### Data



### Learning and what next?

*The best change ideas came from our service user involvement. Being more systematic and explicit about endings has reduced the percentage of delayed discharges and improved some service users' experiences of care programme approach reviews. Initial reports from staff indicate that the change ideas are helpful for them. The next QI project involves obtaining staff members' and service users' satisfaction ratings on the discharge process.*



# Tell us your story in a nutshell

*We achieved a significant reduction in delayed discharges in our service. This has resulted in the development of systematic strategies to improve the discharge process for service users in the Early Intervention Psychosis (EIP) Bedfordshire Team. Our team have become more proactive in managing endings. We have learned to keep service users and carers informed as soon as possible about their end date. This has helped draw attention to meeting their most pressing needs. The next step is to explore the views of our service users, carers, and staff to identify further ways to improve the discharge process.*

*The data continued but then changed in July and August as there were staff shortages and increased referral rates, the number of delayed discharges went up over 20. So unfortunately the treatment effect was temporary but we are trying to get the numbers down with more staff available.*

