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# INTRODUCTION OF A REVISED, COMBINED ADMISSION AND DISCHARGE PACK, WITHIN AN INPATIENT PALLIATIVE CARE SETTING

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Introduction of a revised, combined Admission and Discharge pack, within an inpatient Palliative care setting.

**Background** Discharge documentation in a Specialist Palliative Care unit was found to be repetitive, time consuming, not user friendly, and poorly utilised by nurses.

**Aim** To create a comprehensive, streamlined and user friendly admission to discharge pack. The intention was to enhance communication between multi-disciplinary and community teams.

**Method** A group was formed to review and redress the identified problems. An admission-to-discharge pack was designed, reducing existing documentation. The scheme was piloted. A survey was sent to the target community health care professionals within one week of discharge.

**Results** Survey response rate was 40%. All respondents indicated that the information was 'Very useful' and relevant post-discharge. No irrelevant material was identified; the format was reported as organised and comprehensive. Suggestions for additional information were 'Do Not Attempt Resuscitation status (DNAR)', medication summary, and inclusion of other inpatient specialists.

**Discussion** The new documentation was successful in that it mapped relevant information from admission to discharge. It was also comprehensive enough to use at discharge to community HCP, thus negating the need for transferring information to additional referral forms; which is time consuming and repetitive. Inpatients' DNAR status is not transferable and should be re-assessed post-discharge, and a medication summary is faxed therefore no changes were made pertaining to these two request; 'Other hospital specialist/s' was added.

**Conclusion** This survey showed positive feedback from community HCPs. The new documentation was well received and found to be useful. Providing timely and comprehensive information to community HCPs is imperative for care and its planning, especially at end-of-life when changes can rapidly occur due to the complexities within this client group. The overall aim was achieved and the documentation greatly improved. A subsequent audit confirms improved compliance with document completion.