

The introduction of Rehabilitation Champions within a Community Hospital setting

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Project Background:

A review was undertaken in relation to current delays of provision of rehabilitation services for our community hospital inpatients; along with a patient evaluation questionnaire which highlighted lack of patient understanding around their admission and what they were waiting for before they could be discharged.

The aim of the project is to provide a seamless rehabilitation service for patients transferring from the acute setting to the community hospital and reduce the delay between a purposeful therapy contact by introducing 'Rehab Champions' onto the ward. The Rehab Champion will support the patient by adopting a 24 hour approach to their rehabilitation plan. Utilising a therapy care plan which sets out each individual's rehab needs.

Project Aims/Objectives:

- To upskill current Health Care Support Workers (HCSW) to reduce delays
- Improve patient understanding and engagement with their rehab journey
- To reduce length of stay and reduce hospital acquired deconditioning and decline
- Empowering the ward MDT way of working to facilitate a 24/7 approach to rehabilitation and discharge planning



Project Approach:

Inspired by 'Last 1000 days' and 'End PJ Paralysis' together with likeminded conversations with colleagues, the concept was discussed and plans commenced for the project. The initial team was made up of Ward Manager, Occupational Therapists, Physiotherapist and support from the Quality Improvement team with BCUHB. Regular meetings were held where it was decided on a pilot on one ward within a community hospital, with a view to rolling out further if there was a positive outcome following evaluation. It was necessary to use the resources we had at ward level in order to work together as a successful multi-disciplinary team to promote success of the project. A training programme was created to deliver to staff. Therapy care plans were designed which inform each individual's patient's rehab need, which is then communicated to the wider team and owned by the patient to promote self ownership of rehab.

6 Health Care Support Workers and 1 Registered Nurse were identified and trained on the ethos of rehabilitation, the role of the Occupational Therapist and Physiotherapist together with training on items of equipment regularly issued to patients by therapists, which would not necessarily be used on the ward.

Data collection – both quantitative (length of stay, falls, care requirements) and qualitative (case studies and patient, staff, family feedback) are being collated throughout the pilot.

Project Outcome(s):

- Patients discharged with lower packages of care than anticipated
- Patients discharged with reduced manual handling equipment needs
- Reduced length of stay and dependency on staff
- Increased knowledge and skills of existing HCSW's resulting in increased confidence with rehab

Project Impact:

Although in its infancy, the anticipated impact of the project will be seen in key areas such as reduced length of stay and re-admission. A reduction in care packages and intervention from community services. It is hoped that the patient experience will improve and patients taking more ownership of their rehabilitation journey. Potentially a reduction in falls and collectively a cost saving identified in many areas. With regard to staff we would expect an increase in morale, greater job retention and enhanced future aspirations.

Key Conclusions:

The introduction of the Rehab Champions has been welcomed within the whole team involved and positive patient feedback has already been gained. If rolled out both locally and Pan BCUHB the potential benefits could be significant from both a patient and staff experience point of view along with cost saving for the health board.

Next Steps:

- Train more Rehab Champions
- Take the pilot across to the other ward
- Introduce a cohort area / ward
- Communicate project with Universities and students
- Deliver to other Community Hospitals
- Become adopted as a culture for all BCU areas



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