



DISCHARGE LOUNGE

Effective: 5 April 2016

1. Guiding Principles

Discharge lounges are a proven way of creating inpatient bed space and facilitating patient flow through the Emergency Department and hospital. The Discharge lounge is a collection point for discharged patients who are waiting on the final arrangements for their discharge from hospital who would otherwise be occupying an inpatient bed.

The lounge is staffed by one (1) nurse and will offer a clinically safe, comfortable and relaxing environment for patients who are going through the final processes of their discharge.

The lounge is fitted with recliner arm chairs, high back chairs, flat screen television and food/beverages are available

2. Procedure

Patients being discharged other than those excluded as per criteria as outlined below can be transferred to the lounge. The optimal capacity of the Discharge Lounge is six (6) patients.

Patients being discharged through the Discharge Lounge require an approved WACHS Discharge Checklist as minimum documentation.

The Discharge Lounge process is outlined below.

3. Definitions

Patient Requirements

- Identity/**Allergy** bands on patient.
- Infection Control

Patients who have been nursed under respiratory droplet precautions can be discharged via the Discharge Lounge if the following requirements are met:

- 48hrs of antibiotic treatment, afebrile for 24hrs and are improved
- 72hrs of antiviral treatment with Oseltamivir, afebrile for 24hrs and are improved.
- Respiratory Airborne Precautions – when cleared by both medical and infection control teams.
- Contact Precautions - have open wounds covered.
- Standard Precautions - all patients with this type of precaution can be discharged via the Discharge lounge.

Referrals

Referrals to the Discharge Lounge can be made by the Hospital Coordinator, Ward Coordinators, Discharge Coordinators and Medical Officers.

Transfer Process

All admissions to the Discharge Lounge need to be discussed with the Discharge Lounge nurse and Ward Coordinator prior to the patient being transferred.

Approval from the Ward Coordinator must be given as patient flow on the ward remains the responsibility of the Ward Coordinator.

Patients valuables, own medications, x-rays and clothing are to be packed up prior to transfer to the Discharge Lounge.

Patient's family/next of kin notified of discharge and discharge time at earliest convenience.

4. Roles and Responsibilities

Ward Nurse

The ward nurse is required to:

- liaise with Ward Coordinator/Discharge Lounge nurse regarding the discharge of the patient via the lounge
- assist with packing up and preparing patient for transfer.

Ward Coordinator

The Ward Coordinator is required to liaise with the Discharge Lounge Nurse, Discharge Coordinators and Medical Officers to notify patients who are to be transferred to the Lounge for discharge.

Patient flow remains under management of the Ward Coordinator.

Discharge Lounge Nurse

The Discharge Lounge Nurse is required to:

- liaise with Ward Coordinator regarding patients for discharge through the lounge
- confirm transfer details with Ward Coordinator
- notify Ward Clerk of transfer details
- document transfer in patient notes and change the patient's location on the Electronic Bed Manager (EBM)
- ensure all aspects of discharge/paperwork are complete prior to patient leaving hospital and given to ward clerk on discharge
- maintain 'Statistic Book' for performance measures
- confirm expectations of medical/surgical doctors and allied health have been met and discharge is approved
- if a patient has not been picked up from the lounge or is having difficulty getting home, the Discharge Lounge nurse must communicate this to the Ward Coordinator who is responsible for making other arrangements to ensure the patient's safe exit from hospital
- liaise with Aboriginal Liaison Officer (ALO) where required to assist with the specific needs of Aboriginal clients who are being discharged
- Delete patient from the EBM once discharged.

Clinical Nurse Manager - Ward

The Clinical Nurse Manager is responsible for sustaining and managing the Discharge lounge.

5. Compliance

It is a requirement of the WA Health Code of Conduct that employees “comply with all state government policies, standards and Australian laws and understand and comply with all WA Health business, administration and operational directives and policies”. Failure to comply may constitute suspected misconduct under the [WA Health Misconduct and Discipline Policy](#).

6. Evaluation

Monitoring of compliance with this document and key performance indicators will be part of Patient Flow Team agenda including:

- Number and percentage of patients discharged via the Discharge Lounge
- discharge lounge entry time, departure time and length of stay
- Discharge Lounge consumer feedback.

Continued effectiveness of the Discharge Lounge is the responsibility of the Clinical Nurse Manager.

7. References

[Transit Lounge - Gage Roads, Fremantle Hospital](#)

[Transit Lounge Admission Guidelines - Royal Perth Hospital](#)

8. Related Policy Documents

WACHS [Infection Prevention and Control Policy](#)

**This document can be made available in alternative formats
on request for a person with a disability**

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