



Short Stay Observation Unit Emergency Department Procedure

1. Guiding Principles

Effective: 23 April 2021

This procedure is to be read in conjunction with the WA Health MP 0058/17 [Admission Policy](#) and supporting [Admission Policy Reference Manual 2020-21](#).

This procedure has been produced to facilitate patient flow through the Emergency Department (ED) and guide the operation of the Busselton Health Campus (BHC) ED Short Stay Observation Unit (SSOU) to reflect a “good practice model” of care that meets BHC's local context.

The goals of this procedure are to:

- provide consistent understanding of the purpose of the SSOU
- provide guidance (but not limited to) inclusion and exclusion criteria for admission to SSOU
- provide opportunity to use high level operational measures to benchmark performance
- offer procedures to reduce variation in performance to sustain and improve service efficiency and quality of care.

Key principles for the Busselton Hospital SSOU are described below.

- Patient centred care - care is respectful of and responsive to individual patient preferences, needs and values within a safe environment.
- Quality and Safety - systems and processes deliver quality outcomes and minimise risks.
- Early access - services to provide early access to diagnostics, specialist advice, observation and reassessment to inform rapid decision making and treatment.
- Evidenced based care - pathways and protocols are in place to guide a seamless and standard care minimising variation but delivered according to patient need.
- Supplemental service stream - SSOU is the extension of the ED for patients requiring intensive short term assessment, observation or therapy to optimise the early treatment and disposition.
- Efficiency – the SSOU aims to contribute to the overall efficient use of resources by streaming a selected patient cohort, minimising duplication of services and providing a supplemental alternative model of care reducing demands on inpatient resources.

This document is for the Busselton Hospital managers and clinicians responsible for planning, set up, operation, monitoring and evaluating the BC ED SSOU.

2. Procedure

The SSOU consists of six (6) dedicated observation beds providing 24 hour, seven days per week service, is collocated with the emergency department and has a functional relationship with radiology and pathology services at the BHC.

The SSOU provides observation and management of patients with conditions appropriate for short stay admission, which is defined as an expected stay of less than 48 hours.

Within the 48 hour period, the patient is to be discharged, admitted to an inpatient ward or transferred to another facility.

Decision to admit can only be made by an authorised medical officer or nurse practitioner and **must** be clearly documented in the medical record. The decision to admit time must be documented prior to physically moving the patient into the SSOU

All admissions **must** be discussed with (and accepted by) the ED physician and ED nursing coordinator / ED SSOU Coordinator on duty at the time of admission.

NB: Admitted care commences when the patient physically leaves ED and is transferred to the SSOU.

2.1 Inclusion Criteria (but not limited to)

Patients of all ages (refer to [section 2.3](#) for special notes on paediatric patients) with conditions appropriate for short stay admission, which is defined as an expected stay of less than 48 hours.

The following cohorts of patients may qualify for SSOU for further short term management and planned disposition within 48 hours.

- **Low / Intermediate risk** chest pain with a negative Troponin
- Low risk toxicological conditions requiring further observation and investigations, may include alcohol intoxication requiring further investigations without complicating factors
- Neurological conditions where patients are neurologically intact and clinically well with a benign CT head but requires close neurological observation +/- 12 hour LP to rule out Sub-arachnoid haemorrhage
- Minor, uncomplicated head injury requiring further close observations for a pre-determined time frame
- Recovery from sedation / anaesthesia procedures performed in ED
- Stable / uncomplicated patients awaiting transfer via RFDS planned within 24 hours maybe considered
- Simple uncomplicated urology conditions: e.g.: renal colic requiring short term analgesia and observation for a pre-determined time frame
- Simple **uncomplicated ENT/ maxillofacial** conditions such as
 - epistaxis requiring packing
 - tonsillitis requiring short term parental therapy
 - dental abscess requiring short term parental analgesia.

All patients are to be discussed with relevant speciality services where clinically indicated prior to admission, referral or discharge.

2.2 Exclusion Criteria

- Patients requiring greater than 48 hour observation and medical management
- No direct admissions
- Post- Operative patients
- Outpatient (MR 5) presentations
- **High risk** chest pain patients including any ECG changes
- NHTP awaiting nursing home bed/ACAT assessment
- Multi system trauma patients
- Undifferentiated pain requiring ongoing parental analgesia including PCA
- Infectious patients requiring negative pressure isolation
- Palliative care patients with imminent death: all efforts to transfer to hospice unit
- Neutropenic patients
- Complicated ENT/maxillofacial conditions
- Other exclusions:
 - Patients that don't meet inclusion criteria
 - Patients waiting for diagnostic results, transport home or transfer to another healthcare facility or waiting for equipment /pharmacy medications.

2.3 Paediatric Patients

The ED SSOU admits patients of all ages with a multitude of problems including those who may pose a risk to patients more specifically, children. Admitting paediatric patients to SSOU is to be assessed on a case by case basis by the Senior Medical Officer and ED nursing shift coordinator.

2.4 Workforce

Admitted patients are to be managed by SSOU emergency physicians with the appropriate medical expertise.

Staffing levels are to reflect the level of need to provide safe service delivery by sufficient numbers of experienced senior medical officers and nursing staff with skills in rapid assessment and decision making to determine patient management and disposition.

2.5 Hours of operation

The service operates 24hs per day, seven days a week, 365 days a year (24/7/365).

2.6 Services provided

SSOU at the Busselton Hospital provides medical and nursing observation, interventions and planned disposition within 48 hours of admission to a selected cohort of uncomplicated patient conditions.

Admissions to SSOU is **NOT** a substitute for admission to a more appropriate clinical area or specialty.

2.7 Links to other services

Access to diagnostic services includes agreed priority arrangements for turn-around times for diagnostic testing and results.

- Pathology: requests are to be stamped as SSOU and prioritised
- Imaging: requests are to be stamped as SSOU and prioritised
- Pharmacy: no pharmacy dispensing on site. Discharge medications are prescribed and supplied according to the pharmacy policy for dispensing ED discharge medications.

2.8 Escalation of care

- All patients admitted to the SSOU are to be observed using an age appropriate WACHS Observation and Response Chart.
- In the event the patient requires greater than 48 hours care, they are to be referred to the most appropriate service.
- Admission to the General Ward or transfer to regional resource centre or tertiary institution requires discussion and consultation with the ED Consultant/Senior Medical Practitioner, Hospital Coordinator and Nursing Shift Coordinator prior to transferring to acute care area.

2.9 Discharge Criteria

- Nurse initiated criteria led discharge may be actioned once the patient meets the medical plan for discharge and there has been no deterioration of clinical status prior to discharge.
- All medical summaries must be completed prior to discharge.

2.10 Conflict / Issue resolution

All issues and queries with respect to this procedure are to be brought to the attention of the Clinical Director – Emergency Department or the Clinical Nurse Manager ED.

3. Definitions

Short Stay observation	Less than 48 hour admission
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4. Roles and Responsibilities

All staff are to work within their scope of practice appropriate to their level of training and responsibility.

All Staff are required to work within policies and guidelines to make sure that WACHS is a safe, equitable and positive place to be.

5. Compliance

Failure to comply with this policy may constitute a breach of the WA Health Code of Conduct (Code). The Code is part of the [Integrity Policy Framework](#) issued pursuant to section 26 of the [Health Services Act 2016](#) (WA) and is binding on all WACHS staff which for this purpose includes trainees, students, volunteers, researchers, contractors for service (including all visiting health professionals and agency staff) and persons delivering training or education within WACHS.

WACHS staff are reminded that compliance with all policies is mandatory.

6. Records Management

All WACHS clinical records must be managed in accordance with [Health Record Management Policy](#).

7. Evaluation

Monitoring of compliance with this document is to be carried out by Clinical Nurse Manager Emergency Department.

8. Standards

[National Safety and Quality Health Service Standards](#)

Clinical Governance Standard: 1.7, 1.15, 1.16, 1.27

Partnering with Consumers Standard: 2.7

Comprehensive Care Standard: 5.7, 5.10, 5.11, 5.12, 5.13, 5.14

Recognising and Responding to Acute Deterioration Standard: 8.8

9. References

South West Health Campus – Emergency Department: (2013) Process Guideline: admissions to, discharges and transfers from the Emergency Department Short Stay Unit

NSW Health (2012) [Emergency Department Models of Care](#)

10. Related Policy Documents

WACHS [Interhospital Patient Transfer Policy](#)

11. Related WA Health System Policies

MP 0058/17 [Admission Policy](#)
[Admission Policy Reference Manual 2020-21](#)

12. Policy Framework

[Information Management](#)

13. Appendix

Appendix 1: [Patient Admission to the SSOU – Busselton Health Campus ED](#)

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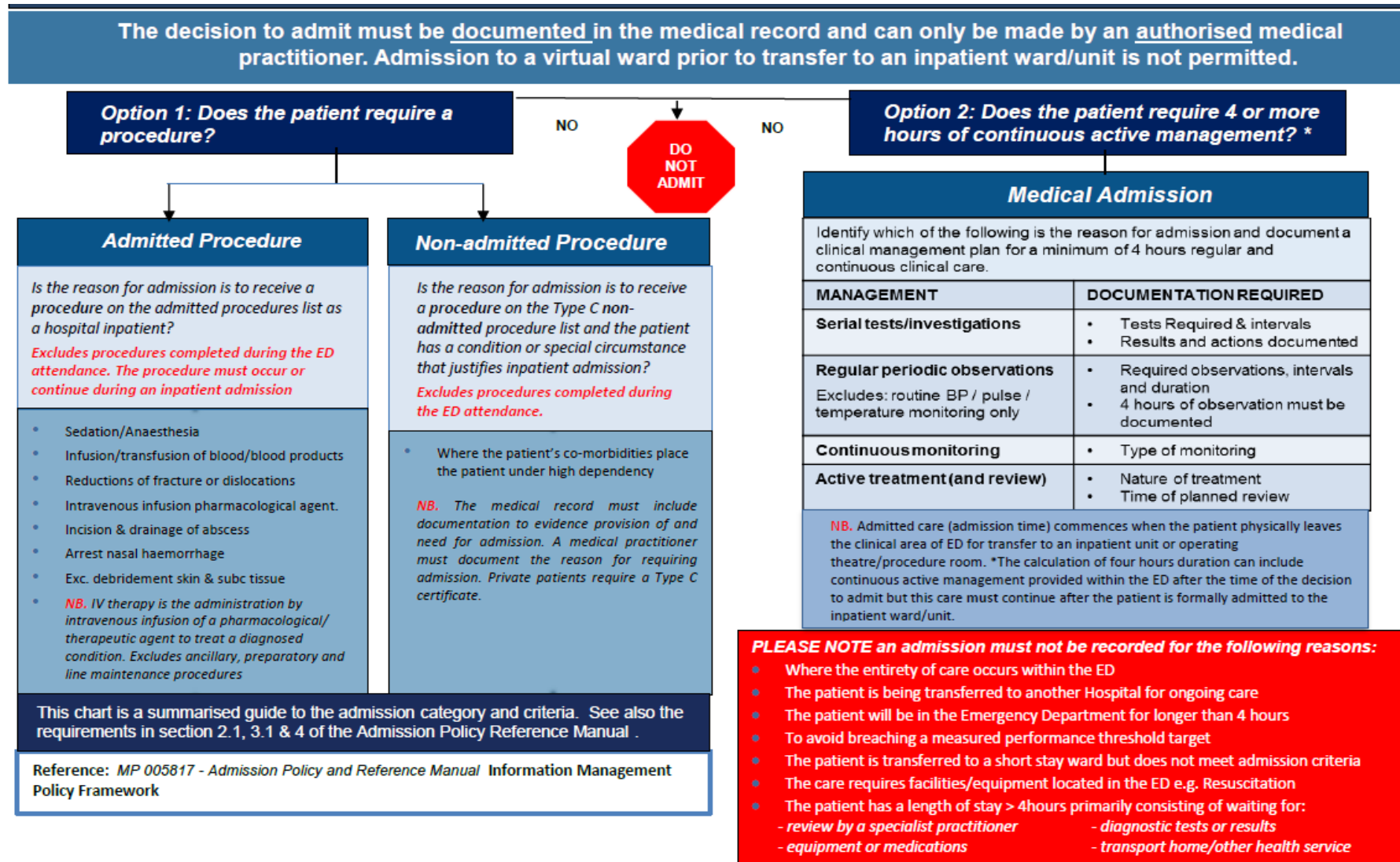
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Appendix 1: Patient Admission to the SSOU – Busselton Health Campus ED – Short Stay Admission Flow Chart



PLEASE NOTE an admission must not be recorded for the following reasons:

- Where the entirety of care occurs within the ED
- The patient is being transferred to another Hospital for ongoing care
- The patient will be in the Emergency Department for longer than 4 hours
- To avoid breaching a measured performance threshold target
- The patient is transferred to a short stay ward but does not meet admission criteria
- The care requires facilities/equipment located in the ED e.g. Resuscitation
- The patient has a length of stay > 4hours primarily consisting of waiting for:
 - review by a specialist practitioner
 - diagnostic tests or results
 - equipment or medications
 - transport home/other health service