



# Inpatient

## *Admission, Discharge & Transfers*

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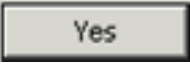
## Business Rules for Inpatients and Day Cases

- 1) All ward staff are responsible for updating Millennium for Admission, Discharge and Transfer (ADT) in real time i.e. within 30 minutes.
  - 2) Admit all elective patients on arrival i.e. admit to a chair if bed unavailable
  - 3) All patient movements in and around the hospital must go through the bed/site manager with the exception of bed moves within the same ward.
  - 4) Once a ward transfer has been agreed it is the responsibility of the sending ward to transfer the patient on Millennium and track the case notes on.
  - 5) Ward staff must ensure the correct 18 week status is recorded on Discharge for all elective patients.
  - 6) The ward must update Millennium with confirmed and predicted discharges at the start of the day and after the ward rounds.
  - 7) Any patient awaiting admission to a ward from home or another hospital must have a Request for Admission placed by the ward clerk added to the waiting list on the day they are informed by clinician.
  - 8) The discharge status (RAG) and EDD on the Patient Status form must be updated daily by all ward staff 24/7.
  - 9) Initial risk assessments part one to be completed within 6 hours of admission to ward. Part two to be completed within 24hrs of admission to ward.
  - 10) Initial risk assessments and transfer of care form can be delegated to student nurse/HCA to complete and save, however, must be checked and signed by the accountable registered nurse.
-

- 11) On-going nursing assessments and care plans will be completed as part of the patient's paper record.
- 12) Registered nurse is accountable for the completion of tasks within all tabs in the activity list.
- 13) Ward manager or deputy is responsible for ensuring the nursing actions are completed by ward staff every 24 hours.
- 14) Recording of clinical information in the patient's electronic record is the responsibility of a registered professional and this should include co-morbidities, allergies, diagnoses and procedures.
- 15) Inpatient TTAs to be recorded in the patient's electronic chart using the designated favourite folder. Controlled drugs to be entered into the electronic record and also as a paper prescription to be countersigned.
- 16) TTA green slip to be attached to the Patient's drug chart by the doctor to signify that TTAs are ready for reconciliation.
- 17) TTAs to be reconciled in Millennium by a pharmacist prior to incorporating into the final discharge summary.
- 18) Pharmacist to sign the green slip to signify to the Doctor that TTAs are reconciled.
- 19) Discharge summary to be completed in Millennium, departmental exceptions to be approved by the CEG.
- 20) MDT staff to contribute to the discharge summary as appropriate. Summary to be finalised by discharging clinician and be available for the patient on departure.
- 21) VTE assessment to be completed on Millennium in accordance with NICE guidelines.
- 22) Requesting of Pathology and Radiology tests remain on ICE.

# Elective Admission

## Admitting an elective patient

- Step 1.** In PMOffice  PMOffice, under the  Tab select the appropriate To Come In (TCI) list usually  TCI or Pre-Admits by Ward .
- Step 2.** From the dialogue box select the RUH and then the required Ward (e.g. RUH/All Wards/Combe).
- Step 3.** The system will display a list of patients on the TCI for today.
- Step 4.** Right Click on required Patient and from the context menu select  .
- Step 5.** Click  on the next dialogue box
- Step 6.** The Inpatient Elective Admission screen opens.
- Step 7.** Complete all mandatory patient details.

**TIP:** Mandatory fields can be automatically highlighted in yellow by right clicking on the background area of the form and selecting the highlight option.

**Note:** Marital Status, Language and Religion should be recorded.  
Estimated Discharge Date (EDD), must be entered and provides a baseline

**TIP:** You can use the Bedboard option to locate and select empty beds. If no beds are available on your ward you can place patient in a virtual chair in order to complete the admission process.

**TIP:** When completing the emergency contact no, if the address is the same as the patient's you can select "Yes" and then type "SAME" into the house name box – this will pull through the address details from the patient's information.

**Step 8.** Click  to complete Admission.

**Step 9.** Select any Documents for printing as required from the next screen.

**Step 10.** Click .

**Note:** If there are incomplete mandatory fields outstanding the system will automatically take you to them to complete.

Ad hoc printing of labels or Wrist bands can be printed from Millennium.

Blood labels will be printed from ICE.



**Step 11.** The Patient has now been admitted to the required ward on Millennium and can be viewed via the  conversation menu tab.

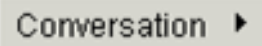
**Note:** If you admit the wrong patient (either electively or non-electively you must contact the CRS team in IT on x4420 to rectify the situation as soon as possible.

**Note:** There are alternative TCI lists to cover other scenarios such as finding a patient based upon their TCI Date. Use as appropriate, functionality is similar to the process above.

# Non Elective Admission

## Admitting a Non Elective Patient

**Step 1.** In PM Office  , select  & double click on your Ward (i.e. Combe), the Bedboard for the ward will appear.

**Step 2.** Right click on the required bed slot and select  and then **Inpatient Non Elective admission.**

The Patient Search Trace window will open.

**Step 3.** Click  on Patient Search Trace screen.

**Note:** The 1<sup>st</sup> “Patient Search Trace” screen is never used. Always click  & go to .

**Step 4.** In Advance trace enter Patient details & click .

**Step 5.** Select the required Patient either from the offered list or the found patient.

**Note:** Check patient details, (address/ DOB/ names) with patient to ensure you have the right patient

**Step 6.** Select .

**Step 7.** In the Organisation Dialogue enter “Roy” and press the ellipsis button .


**Step 8.** Select “Royal United Hospital” from list.

**Note:** Do not select the Trust option.



**Step 9.** Complete the Non Elective Inpatient Admission conversation.

**Note:** Marital Status, Language and Religion should be recorded.

The referring clinician is the clinician that requested the admission, i.e. the Patients GP or for ED patients the ED Consultant/Registrar on duty. Always identify the referring clinician by using the search option  and select the referring clinician's address (at the bottom of the pane) before pressing .

The lead clinician is the clinician who will be responsible for the care of the admitted patient.

Estimated Discharge Date (EDD), must be entered and provides a baseline.

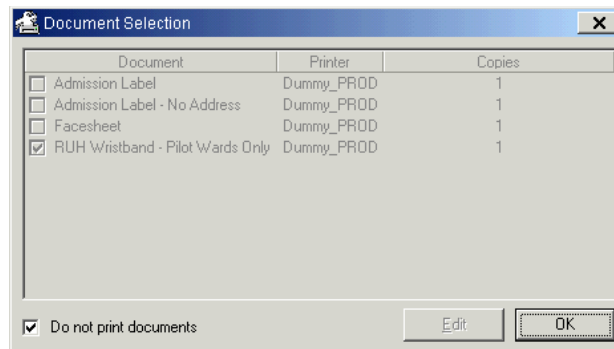
**Step 10.** Click  to complete Admission. Select any Documents required from next screen & click .

**Step 11.** Patient has now been admitted can be viewed via the  tab.

# Wristbands

## Printing on Admission

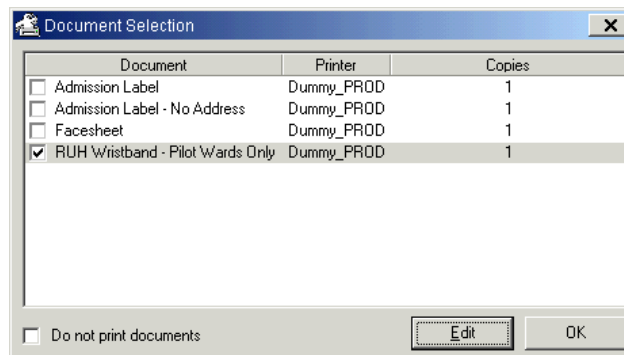
**Step 1.** After selecting OK on the Admission Conversation you will see the Document Selection Pop Up.



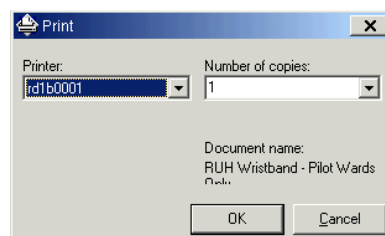
**Step 2.** Un-tick do not print Documents



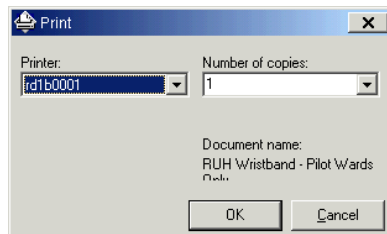
**Step 3.** Un-tick all documents except RUH Wristband.



**Step 4.** Highlight RUH Wristband and Select Edit.



**Step 5.** Change the Printer to your Wristband Printer and select OK.



**Step 6.** Select OK, Your Wristband will print.

## Ad-hoc printing

**Step 1.** Open PM Office  PMOffice .

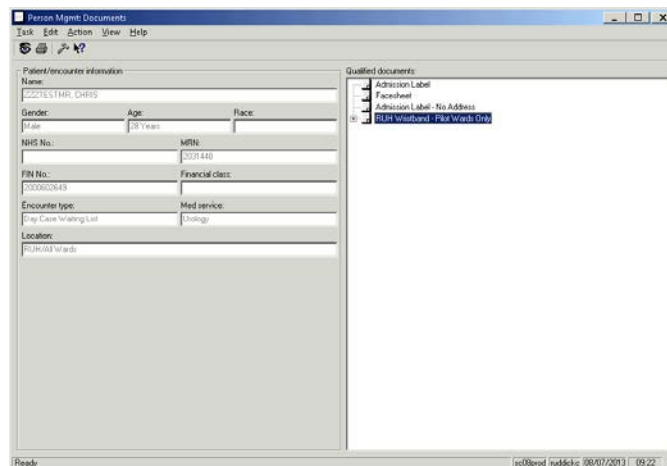
**Step 2.** From the Top row of Icons, Select **Run Documents.**




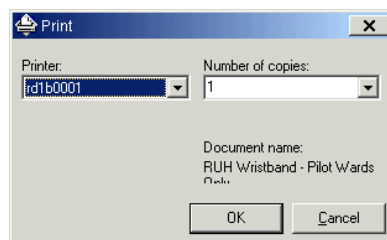
A new window, Documents will open.

**Step 3.** Select Find Patient 

**Step 4.** Enter the Patients Detail and Select OK.



- Step 5.** Highlight RUH Wristband in the right hand window.
- Step 6.** Select the Printer Icon  .
- Step 7.** Change the Printer to your Wristband Printer.



- Step 8.** Select OK, Your Wristband will now print.

## Paediatric Nurses

### Safeguarding Children

When admitting a child a check should be carried out to see how many visits the patient has had to the RUH ED department. To see the visit history but not reason for visit use Patient Encounter conversation.

## View Patient Encounter

- Step 1.** Open PM Office
- Step 2.** Click on Conversation Tab
- Step 3.** Scroll to bottom of the list



- Step 4.** Double click **View Encounter** Conversation
- Step 5.** Search for the patient

Name	NHS Number	MRN	Gender	Date of Birth	Age
ZZZTESTNEA, DJONE	2069103		Male	21/Dec/62	51 Years
ZZZTESTNEA, ZZZTESTNEA	2000962		Female	25/Nov/11	2 Years
ZZZTESTNEATWO, BARRY	2065984		Male	17/Feb/56	58 Years
ZZZTESTNEATWO, TEST	2015358		Female	01/Jan/60	54 Years

FIN NBR	Enc Type	Enc Type(s)	Med Service	Facility	Nurse Unit	Reg Date	Discd
2000212311	Inpatient		Trauma and Orthopaedics	RUH	Marlborough	01/03/2012 15:41	06/0
2000189045	Inpatient		Clinical Haematology	RUH	Marlborough	06/02/2012 14:13	01/0
2000183329	Inpatient		Geriatric Medicine	RUH	Marlborough	31/01/2012 08:36	06/0
2000167969	Inpatient		Cardiology	RUH	Marlborough	13/01/2012 11:51	31/0
2000138696	Inpatient		Trauma and Orthopaedics	RUH	Home Leave	08/12/2011 09:16	13/0
2000104366	Inpatient		Trauma and Orthopaedics	RUH	Transfer Lounge	01/11/2011 09:09	09/1
2000088147	Inpatient		Paediatric Trauma and Orthopaedics	RUH	Transfer Lounge	13/10/2011 10:18	01/1
2000088144	Inpatient		Paediatric Trauma and Orthopaedics	RUH	Transfer Lounge	13/10/2011 10:15	13/1
2000064852	Inpatient		Trauma and Orthopaedics	RUH	Ambulatory Care	19/09/2011 12:09	19/0
2000055259	Inpatient		Trauma and Orthopaedics	RUH	Transfer Lounge	07/09/2011 09:46	19/0
2000050543	Inpatient		Trauma and Orthopaedics	RUH	A&Eobs	02/09/2011 16:48	02/0
2000016657	Inpatient		Trauma and Orthopaedics	RUH	APD Ward	16/08/2011 13:25	18/0
2000013883	Inpatient		Trauma and Orthopaedics	RUH	APD Ward	12/08/2011 13:46	16/0
2000002285	Inpatient		Respiratory Medicine	RUH	Admissions Suite	31/07/2011 12:41	31/0
2000254150	Inpatient Waiting List		Urology	RUH	Rhina Smith		

NHS Number	MRN	Gender	Date of Birth	Age
2069103		Male	21/Dec/62	51 Years
2000962		Female	25/Nov/11	2 Years

- Step 6.** Click on Enc. Type column header to order the encounters by type.
- Step 7.** Scroll down to any Emergency department and count the number of visits and over what period. Inpatient visits can also be seen and to what Med Service i.e. Paediatric Orthopaedics.
- Step 8.** Select cancel to exit.

**Note:** For details of the visit the patient record needs to be opened in PowerChart.

### PowerChart Method: RUH Views

Alternatively when the patient record is open in PowerChart, Paediatric staff can review the number of visits to the RUH across Outpatients, Inpatients and A&E (ED)

- Step 9.** Open **PowerChart**
- Step 10.** Click **RUH Views** from the side menu



- Step 11.** View the **Outpatient Summary** and **Inpatient Summary**
- Step 12.** View **All Visits**

A screenshot of a window titled 'Visits (5)' with a sub-header 'All Visits'. It contains a table with the following data:

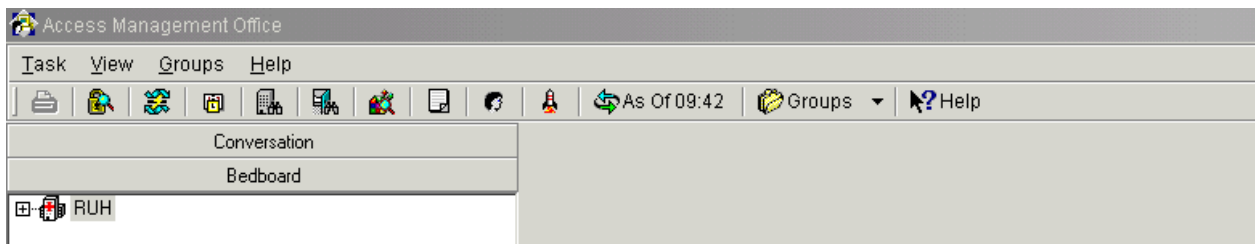
Date	Type	Location
05/03/14	Inpatient	RUH   Children   Side Room 17   Bed 02
04/03/14	Emergency Department	RUH   A&E   Blue Chairs A   Chair

# Printing Labels

## Admission / Face sheet / Admission label – no address

Labels can be printed from PM Office using the Run Documents icon.

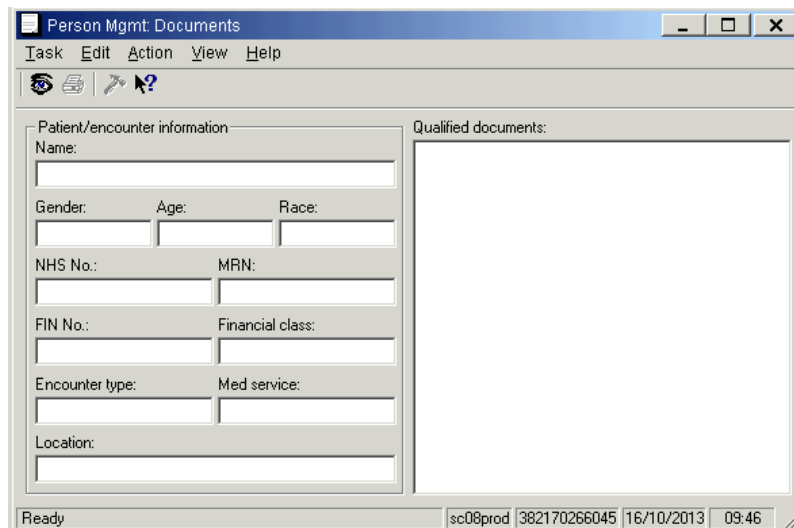
**Step 1.** Open PM Office.



**Step 2.** Select the Run documents icon



The print management form opens.



**Step 3.** Select the Find person icon



The Patient Search box opens.

## Step 4. Type in search criteria such as Name or MRN

The screenshot shows the 'Patient Search' window. On the left, there are input fields for Name, MRN, NHS Number, Date of Birth (with a calendar icon), Gender (a dropdown menu), and FIN NBR. Below these fields are 'Search' and 'Reset' buttons. The main area on the right is split into two sections: the top one says 'No patients found.' and the bottom one says 'No encounters found.' At the bottom of the window are 'OK', 'Cancel', and 'Preview...' buttons.

## Step 5. Click Search

The search results will be returned into the Search form.

The screenshot shows the 'Patient Search' window after a search. The 'Name' field contains 'zzztest'. The main area displays a list of search results with columns for Name, NHS Number, MRN, and Gender. Below this is a table of encounters with columns for FIN NBR, Enc Type, Enc Type(s), Med Service, Facility, Reg Date, Disch Date, and Removal.

Name	NHS Number	MRN	Gender
ZZZTESTTUCKER, ADDENVIII		2037488	Female
ZZZTESTTUCKER, ADDENVII		2037330	Male
ZZZTESTTUCKER, ADDENVI		2037289	Female
ZZZTESTTUCKER, ADDENV		2037192	Male
ZZZTESTTUCKER, ADDENIV		2037183	Female
ZZZTESTTUCKER, ADDENIII		2037168	Male
ZZZTESTTUCKER, ADDENII		2037158	Female
ZZZTESTTUCKER, ADDENI		2037134	Male
ZZZTESTTRAINING, TRAINING		2047772	Female
ZZZTESTSYNERTEC, TWO	706-663-6600	(2000964); 2000975; (2000968)	Male
ZZZTESTSYNERTEC, THREEFATHER			
ZZZTESTSYNERTEC, THREEFATHER			
ZZZTESTSYNERTEC, THREE		2000976	Female
ZZZTESTSYNERTEC, ONE	706-664-5162	2000974	Female

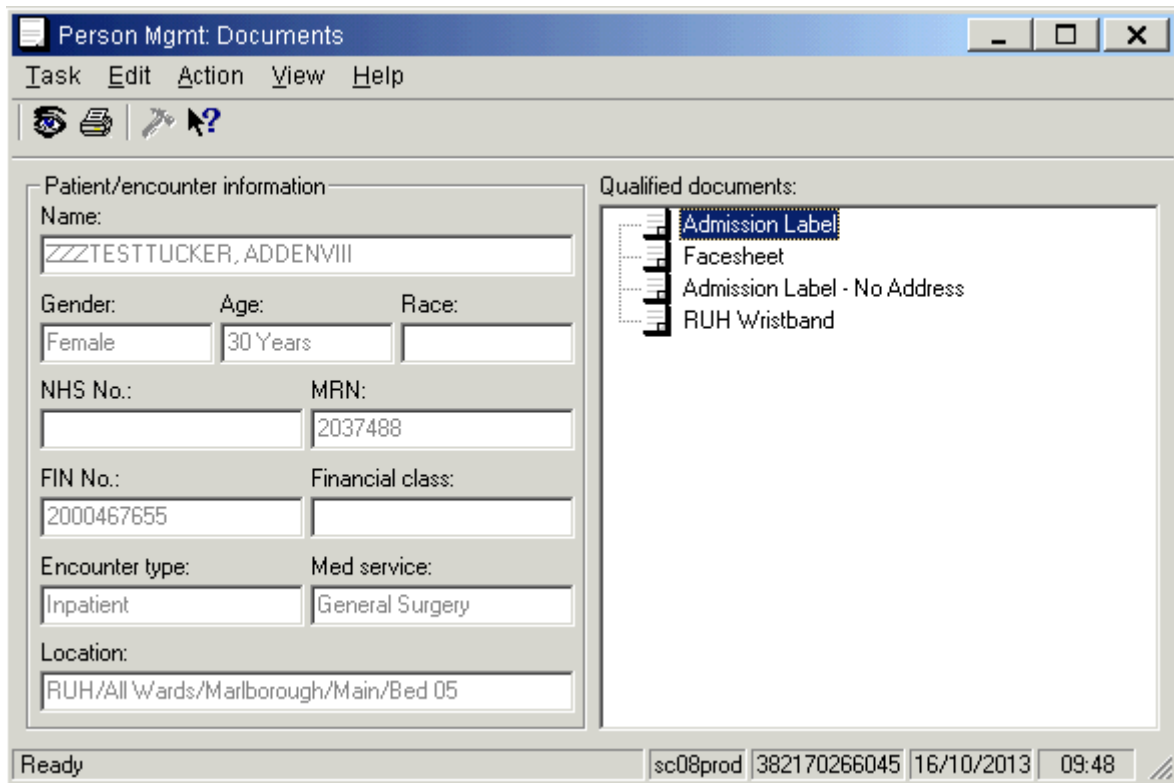
FIN NBR	Enc Type	Enc Type(s)	Med Service	Facility	Reg Date	Disch Date	Removal
2000467655	Inpatient		General Surgery	RUH	14/12/2012 11:02	14/12/2012 11:47	
2000459695	Inpatient		Ophthalmology	RUH	05/12/2012 16:30	14/12/2012 10:38	
2000459140	Inpatient		Ophthalmology	RUH	05/12/2012 11:52	05/12/2012 12:43	
2000458464	Inpatient		Ophthalmology	RUH	04/12/2012 15:59	05/12/2012 10:47	04/12/2012
2000458114	Inpatient		Ophthalmology	RUH	04/12/2012 12:48	04/12/2012 14:53	
2000458045	Inpatient		Ophthalmology	RUH	04/12/2012 12:17	04/12/2012 12:31	
2000454161	Inpatient		Ophthalmology	RUH	29/11/2012 14:30	29/11/2012 14:39	
2000453823	Inpatient		Ophthalmology	RUH	29/11/2012 11:41	29/11/2012 12:01	

## Step 6. Select the relevant encounter from the lower window



**Step 7.** Click OK

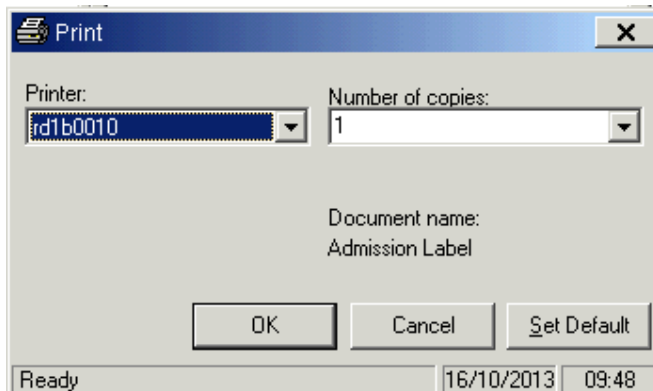
The patient details will be returned into the Person Management documents form.



**Step 8.** Select the relevant label type from the Qualified documents pane.

**Step 9.** Click on the printer icon  .

**Step 10.** In the Print dialogue box select the Label printer.



**Step 11.** Click OK.

**Note:** Label printing is also available as an option on completion of an admission. (See wristband printing on admission).

## Emergency Contact Information

Emergency contact information can be found in 2 places.

### *PM Office*

**Step 1.** From **PM Office** select the **Bedboard** tab and open relevant ward.

**Step 2.** Highlight the patient.

**Step 3.** Right click and select **Conversation – View Person**.

The View Person screen will open giving access to Patient demographics, Next of Kin and Emergency contact details.

**Step 4.** Click magnifier button to look up **GP details**.



**Note:** In the event of the patient having been discharged from the Bedboard use the Conversation tab – View Person option and search for patient.

## PowerChart

### RUH Views

There are 2 sub tabs available under the RUH Views tab labelled Outpatient and Inpatient. These tabs pull core information from all areas of PowerChart into one view.



Hovering over items such as Emergency contact will pop out a bubble containing any information stored.

## Transfer of patients


### Transferring Patients Between Wards

**Note:** Transfer can be completed from either PM Office Bedboard or from PowerChart.


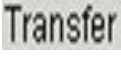
In PowerChart 

- Step 1.** Select the **Patient Access List**.
- Step 2.** Click on the required patient
- Step 3.** From the toolbar menu select - **PM Conversation** drop down and then from the menu select **Transfer Inpatient** option.
- Step 4.** Complete the Transfer conversation & Click OK

In PM Office 

- Step 1.** Select  & double click on Sending Ward.

The Bedboard for the ward will appear.

**Step 2.** Right click on the required patient and select  and then  from the dropdown menu to open the transfer conversation.

**Step 3.** Enter new ward in  and select a chair to transfer patient to.



**Step 4.** Click .

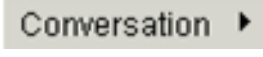
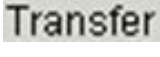
**Note:** Unless told to transfer to a specific bed always transfer to a Chair in receiving ward.


The receiving ward will use the same method to transfer from the Chair to the required bed. The receiving ward is also responsible for transferring to the new clinician if necessary.

**Note:** This is to be done within 30 minutes of patient arrival.  
Remember to use **HIM Tracking** to track patient records to new ward.

## Transferring Patients within Wards

**Step 1.** In PM Office , select  & double click on Sending Ward, the Bedboard for the ward will appear.

**Step 2.** Right click on the required patient and select  and then  from the dropdown menu to open transfer conversation.



**Step 3.** The  will show the current ward. Enter new bed using either the Bedboard option or from the bay / bed drop downs.



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**Step 4.** Click .

**Note:** Always check that the lead clinician is correct (amend as necessary).

## Bed Swap

**Step 1.** In PM Office , select  & double click on Ward, the Bedboard for the ward will appear.

**Step 2.** Right click on the first patient and select  then  from the dropdown menu.

**Step 3.** You will be asked to search for and select the 2nd patient.

**Step 4.** On the confirmation screen check the patient details.

**Step 5.** Click OK

The patient's location will be swapped.

**Note:** Bed Swap is only accessible from PM Office Bedboard.  
Bed Swap only works within a ward.

## Pending Transfer to Specialty Medical / Surgical Bed

Pending Transfer should be used to flag when you need to transfer a patient to a specialist medical/surgical bed where it is monitored in a non-Millennium feature called “Bedboard”. This is a separate feature called RUH Bedboard which collates this information along with pending and actual discharges to give the Site Team a picture of bed availability against demand.

Patent Status should be updated at the same time

- Step 1.** In PM Office open the **Bedboard**
- Step 2.** Right click the patient and click **Conversation, Pending Transfer**
- Step 3.** In the **Receiving Building** select **Specialties**
- Step 4.** In the **Receiving Department/Ward** select **Medicine or Surgery**
- Step 5.** In the **Receiving Room/Bay** select the relevant location
- Step 6.** Enter the **Planned Transfer Date** and **Planned Transfer Time** of the transfer
- Step 7.** Click **OK**

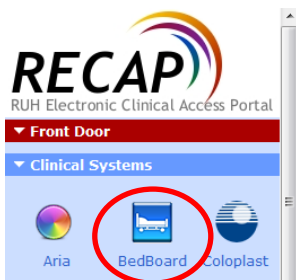
# Discharge Process

## Bed Management

### Pending Discharge

By 9.30am every ward should declare their potential discharges.

Pending Transfer conversation should be used to flag the status of a patient's imminent discharge, to the bed managers, where it is monitored in a non-Millennium feature called "Bedboard". This is a separate feature called RUH Bedboard collates this information along with actual discharges to give the Site Team a picture of bed availability against demand.



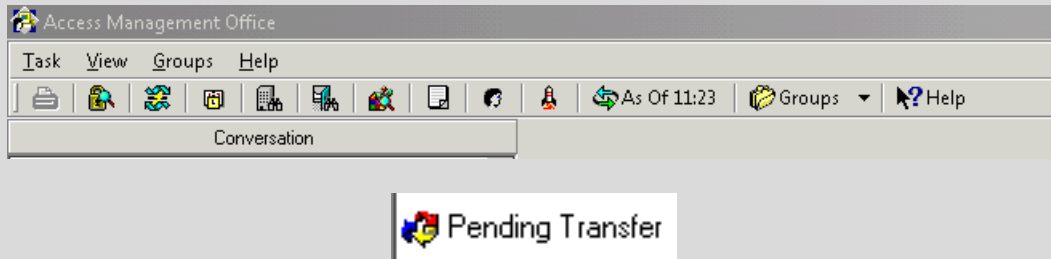
Patent Status should be updated at the same time.

### Pending Transfer for discharge purposes

This is achieved through the Pending Transfer conversation in Millennium.

- Step 1.** Open PM Office
- Step 2.** Select the ward and patient from the Bed Board.
- Step 3.** Right click the patient, select **Conversation, Pending Transfer**

**Note:** Pending Transfer can also be accessed via the PM Conversation Menu but you have to search for the patient and select the IP encounter.



The Pending Transfer conversation opens.

- Step 4.** Maximise the screen and highlight required fields.
- Step 5.** In the **Receiving Building** field select **Specialties**
- Step 6.** In the **Receiving Dept./Ward** field select **Home**
- Step 7.** In the **Receiving Room/Bay** field select either **Query**, **Confirmed** or **Tomorrow**
- Step 8.** Enter the **Date** and **Time** of the discharge
- Step 9.** Click **OK**

## Cancel a Pending Transfer

In the event a patient status changes such that they are no longer green then a previously raised Pending Transfer can be cancelled by:

- Step 1.** Open **PM Office**  
From the **BedBoard**.
- Step 2.** Right click the patient's name and from **Conversation**, select **Undo Pending Transfer**



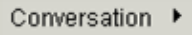

**Note:** If a normal ward transfer or bed transfer is performed on the patient then a new Pending Transfer will have to be done to refresh the Bed manager's Bedboard system.



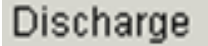
## Discharging

**Note:** Discharge can be completed from either PM Office Bedboard or from PowerChart.

### *PM Office method*

- Step 1.** In PM Office  use  to select Ward.
- Step 2.** Right click on the required patient and select  and then  from the dropdown menu.
- Step 3.** Complete the Discharge conversation & Click OK.

### *PowerChart method*

- Step 1.** In PowerChart, select the **Patient Access List**.
- Step 2.** Click on the required patient and from the toolbar menu select **PM Conversation** drop down and then  from the dropdown menu.
- Step 3.** Complete the Discharge conversation & Click OK.

**Note:** Discharged Method will be discharged with consent

### *For Elective Patients Only*

Admission offer outcome if patient has had the surgery then Patient admitted – treatment completed, if patients surgery was cancelled and needs to be rebooked use Patient admitted – treatment deferred to ensure they are put on the deferred list ready for rebooking.

RTT Status will usually be 30 First Treatment or 20 Not Yet Treated if treatment deferred.

## Discharge Deceased

The discharge should only be completed once the deceased patient has left the ward. This will ensure the bed space remains allocated on the bed-board.

Discharge Method will be Patient Died.

The Date of death and the Discharge date must be the same.

Discharge Destination field will default to “Not Applicable-Died or Stillbirth”.

RTT Status will default to 36 Patient Died.

Death Notification Status will default to Informal.

Admission Offer Outcome should be recorded as Patient Admitted - Treatment Completed.

**Caution:** Before clicking OK always give a final check to the name/details of the patient to make sure it is the correct patient. It is the responsibility of the user to make sure the decease is being placed on the correct patient and that all details are correct.

Complete the Discharge conversation and click **OK**

A message will appear confirming that any outpatient appointments will be cancelled. Click **OK**

**Note:** This will update the patient details on the Spine.