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POSTER

**Discharge liaison, a growing role**

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**Introduction:** Since the introduction of new government legislation, i.e. the NHS & Community Care Act 1990, the need for a specific role of Discharge Liaison Nurse has become apparent. This act places a duty on local authorities to carry out assessments of need during a patients stay in Hospital and if needs are identified they must be acted upon and referrals to the appropriate agencies made. All of this takes time and the necessary skills and knowledge are becoming more specialised.

**Methods:** Three years ago I was employed as Discharge Liaison Nurse on Ward 61, a busy Oncology Ward and I needed to identify what my role entailed.

My Role:

- Carry out full social assessment on admission.
  - Fill in appropriate paperwork to facilitate discharge.
  - Liaise with multi-disciplinary team and community team to identify needs.
  - Provide psychological and practical support for patients, families and carers in the decision making process.
  - Ensuring patients and carers get all benefit entitlements and put them in touch with support systems.
  - Ensuring all arrangements are in place to facilitate timely and safe discharge.
  - Clearly documenting all information.
  - Teaching about role and the importance of good discharge planning.
  - Provide statistics to enable government to plan for the future.
- During the last three years I have been involved in planning an average of 125 complex discharges per year despite the fact that our in-patient bed capacity has decreased by four beds. The increase has been achieved by close liaison with the multi-disciplinary team and bed manager to expedite discharges in order to facilitate maximum occupancy of beds. Organising all of this takes time and a specific role of discharge liaison nurse is necessary to achieve this.

The Future:

- Continued teaching of good discharge practices to all areas.
- Accurate provision of statistics to government departments to identify areas for improvement of provision.
- Investigation of expanding provision to outpatients areas to pre-empt need.

The future of Discharge Liaison Nursing as very exciting and full of possibilities.

Increasing elderly population means increasing incidents of cancer and need for more services both in the hospital and community. It also means optimum use of available beds and timely and safe discharge, which is the responsibility of Discharge Liaison Nurses. Far from de-skilling colleagues as feared, the teaching and high profile of the role leads to greater discharge awareness.

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POSTER

**Developing the cancer workforce: analysis of Portsmouth hospitals NHS trusts excellence in cancer care initiative**

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This presentation will outline the development, implementation and evaluation of a multiprofessional 'Excellence in Cancer Care' programme developed for Portsmouth Hospitals NHS Trust in the United Kingdom. The programme, funded by the Hampshire and Isle of Wight Workforce Development Confederation was intended to improve the care of cancer patients by providing bespoke educational provision to a variety of hospital staff which addressed their immediate needs and concerns when caring for cancer patients. The programme consisted of a number of study days for nurses and other healthcare professionals working in non-cancer settings, a study day for ancillary staff which included an 'open forum' discussion with service users, an open access module for newly recruited staff on the cancer unit and an innovative series of study days designed to equip clinical nurse specialists and one therapy radiographer with the skills required to continue delivery of the programme once special funding had elapsed. The programme, first delivered in 2003 and run since by clinicians working within the Trust has been well evaluated and provides an excellent example of collaborative working in the development of work-based learning programmes by the Trust and the School of Nursing and Midwifery at the University of Southampton.

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POSTER

**A re-examination of the education and training needs of support staff working with cancer patients: motivation, self-concept and skills acquisition following a bespoke educational programme for health-care support workers and other ancillary staff at Portsmouth Hospitals NHS Trust**

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The education and training needs of support staff working with cancer patients often go unrecognised, as does their unique contribution to the care of cancer patients in acute settings. This presentation evaluates the impact of a bespoke educational package designed for support staff working in Portsmouth Hospitals NHS Trust on the motivation, self-esteem and communication skills of a variety of healthcare support workers including admission and clerical workers and volunteer staff. One participant stated that this was the first time that her potential contribution to the care of cancer patients had been valued in this way, and the programme represented the first direct contact that many had ever had with teaching staff from the local education provider. The programme gave participants the opportunity to ask a service user many of the questions that they had previously been too embarrassed to ask, and provided an open forum for a debate on the contribution which support workers make to the quality of cancer care in acute settings. The presentation will also analyse the impact of user participation, experiential learning and an 'atheoretical' approach to work-based learning which had distinct advantages over traditional learning and teaching approaches with this group of participants.

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POSTER

**Definition and implementation of clinical pathways to improve nursing care in a urological oncology department**

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Over many years the need to combine the quality of assistance and the optimisation of the available resources has become increasingly evident in the healthcare field. In order to obtain excellent results in healthcare, it is necessary to have at one's disposal some special tools, which can facilitate the way in which the various healthcare workers attend and assist their patients. In the Urology Division of the European Institute of Oncology it was decided that a clinical pathway (CP) be created on the basis of:

- Research
- Our experience
- The continuing multidisciplinary approach
- The codification of documents handling the best practice.

**Methodology:** The overall methodology followed these steps:

1. Tools creation: based on a determination and analysis of the healthcare interventions provided in clinical situations repeated over time and of constant events in similar clinical routes. The conceptual model which refers to "life activities" created by P. Chiari was taken as the basis for a definition of CP
2. Implementation pilot phase.
3. Tools' modification on the basis of suggestions and needs highlighted during the pilot phase.
4. Tools application.
5. Evaluation of their efficiency by means of a closed-answer questionnaire, administered in complete anonymity to a representative population of patients who had undergone radical prostatectomy and radical cystectomy. The survey was conducted on certain "life activities": mobility, hygiene; preparation for diagnostic examinations. It was therefore possible to evaluate the uniformity of the operators' practice both in relation to that defined in CP and by estimating the overall percentage of actions complying with established criteria.

**Results:** The expected results at the end of the evaluation are 90% conforming actions, with a percentage of non-conformity above 10% considered unacceptable. The Statistician defined a sample of 100 patients. The results obtained are based on the recruitment of 102 patients since July 2003: the analysis of the questionnaires gathered shows 100% consistency between actions and the criteria previously set.

**Conclusions:** At the conclusion of the study to the value of the chosen tool, namely CP, can be attested. The percentage of operations in accordance with the previously established set criteria (100%) has not yet led to measures aimed at changing the work patterns of the nursing staff. The conclusion of the study, with the recruitment of 102 patients, enabled the evaluation of the uniformity of the nursing staff action regarding Life Activities, as well as the conformation of the chosen tool's validity and accuracy.