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# Title: Hospital In The Home Admission, Transfer and Discharge Procedure



**Division:** Health Services Victoria

**Facility and Program:** Werribee Mercy Hospital

**Approved by:** Program Director, Medical Subacute and Palliative Care Services

**Policy Link:** [Care of Patients Policy](#)

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## Purpose

- To provide guidelines for Nursing and Allied Health Staff on the selection and assessment criteria used for determining suitability of patients to be admitted to the Hospital in the Home (HITH) program.
- To outline/identify exclusion criteria.
- To Provide Werribee Mercy Hospital (WMH) staff with key principles and tools to promote the smooth transition of patients from other hospitals directly to WMH Hospital in the Home (HITH) program.
- To ensure Patient safety through appropriate and timely communication and access to services.

## Who Must Comply

All staff

## Procedure

The following admission criteria should be considered as a guide only. Each patient's condition will be individually assessed.

The Unit will provide a flexible and innovative service to enable the individual's medical condition to be safely managed at home.

## Admission Criteria

- The patient has an acute condition that the Medical Officer agrees can be managed at home by nursing staff and who would otherwise require hospitalisation.
- The patient is medically stable
- The patient is 16 years of age or older
- The patient is able to comply with basic instructions in the provision of care.
- The patient can communicate effectively, either directly, or using an interpreter.
- The patient has a family member/carer at home who is willing to assist, and/or has adequate support networks available.
- The patient and/or carer are capable and willing to be taught and participate in care provision as necessary.
- The patient agrees to be treated at home and be re-admitted if they are deemed medically unstable.
- The patient has signed the HITH/Werribee Outreach Program Consent form (AD 0530) and has an adequate understanding of the program.
- The patient lives within a 20km radius of the hospital.
- The patient's treatment can be safely administered through daily or twice daily visits by nursing staff.
- The treatment plan, including technology required, is suitable for management at home.
- The treatment plan does not involve intensive medical intervention.
- The patient's home environment is safe and suitable for the provision of acute care, and potential risks have been identified on the Safe Home Visit Risk Assessment form (AD 2840) and staff alerted. Referrals and assessments for home aids to be completed prior to intake into service, inclusive of all allied health services required by patient.
- The patient has access to a telephone or mobile phone in the event of a medical emergency.
- Adequate venous access can be maintained for the duration of treatment (if applicable).

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- First dose of intravenous antibiotics and/or intravenous medication has been administered in hospital.
- Intake of patients into the service is co-ordinated via the After Hours Co-ordinator and NUM of DPU/MDS/HITH. Treatment sessions available and allocation of sessions will be discussed at the scheduled bed meetings. Units transferring patients into service will be advised of date and time of first visit. Transferring units are to complete the Safe Home Visit Risk Assessment form (UR W15420) HITH/Werribee Outreach Program Consent form (UR W1540), current medication chart, progress notes with treatment plan, initiation/completion of any Allied Health Referrals, delivery of any home supports i.e. mobility aids.
- HITH staff to review safety check list via telephone prior to first visit and modify risk assessment accordingly.
- For direct admission from the Emergency Department, the medical hospital admission must be completed by the relevant RMO prior to access to the program.
- In the interim medical orders must be written by the Emergency Department Medical Officer.
- It is the responsibility of the referring doctor/ team to review and manage treatment plan whilst the patient is in HITH program

### Exclusion Criteria

- The patient and/or carer decline the option of home based care.
- Non-compliance with treatment.
- The home environment is deemed unsafe for staff to visit.
- The patient does not have telephone access.
- The required services are offered by another institution (i.e. PACFU/RDNS or General Practitioner).
- The patient lives outside the geographical radius serviced by the program.
- Nursing staff are unable to provide the services required.
- Consent has not been obtained and/or Safe Home Visit Risk Assessment form has not been completed prior to a patient being sent home.
- First dose of intravenous antibiotics and/or intravenous medication has not been given in hospital.
- Current IV drug user

### Transfer of Patients from other Hospital to Werribee Mercy Hospital - HITH

- The decision to transfer patient to WMH hospital is the responsibility of the attending clinician or designated person at the referring facility
- The decision to accept patient on WMH HITH program is decided by the accepting clinician from the appropriate team, in consultation with WMH HITH staff regarding availability and capacity to accept patient.
- All Patients referred to HITH must meet the criteria outlined in the "Hospital in the Home guidelines" (State of Victoria, Dept. of Health 2011). These guidelines are available in the HITH department or accessed online: <https://www2.health.vic.gov.au/Api/downloadmedia/%7B5B9BD44D-AC4C-48FD-B0A3-0FC78377727A%7D>
- The transfer is considered an inter hospital transfer and therefore requires acceptance to the appropriate WMH team. The Doctor from the accepting team will liaise with referring Doctor from the referring hospital to ensure patient is appropriate for HITH. It is the accepting team's responsibility to gain appropriate information about care required including wound care, medications to be administered by HITH and follow up plans

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- The accepting medical team are then to liaise with WMH HITH staff to ensure required care can be provided by HITH and arrange a time for patient to present to WMH HITH for admission.
- The referring hospital is then advised of time patient is to attend WMH HITH clinic. The patient is to bring relevant copies of paperwork required for safe transfer including list of medications/copy of medication chart, wound charts and copies of progress notes and care plans.
- If the patient is requiring wound management with Negative Pressure Wound Therapy (NPWT), HITH staff are to confirm compatibility of patient's current device with device available at WMH HITH
- If the patient requires Baxter infusers for long-term antibiotics then appropriate, long-term intravenous device is to be inserted prior to transfer and confirmation of Baxter bottle availability gained from HITH staff or pharmacy.
- Patient is to present at an agreed time to HITH clinic on day of transfer.
- HITH staff will contact appropriate clinician to admit patient. The doctor representing the admitting team must present to HITH to complete admission.
- It is the responsibility of HITH staff to arrange for the patient's history to be available from medical records, arrange for administrative admission, bradmas and relevant paperwork.
- The admitting doctor completes all medication charts, HITH referrals and medical diagnostic test slips (if required) on day of admission.
- The admitting Doctor must clearly include plan for treatment and follow up.
- The patient must consent to being treated at home and be compliant with care. The patient must sign the HITH/Werribee Outreach Program Consent form (AD 0530).
- The patient's home environment is deemed as safe and any potential risks have been identified on the Safe Home Visit Risk Assessment form (AD 2840)

## Precautions & Contraindications

If the patient attends WMH and is considered medically unstable, or not appropriate for HITH then they will require a ward admission until clinically appropriate for HITH

## Definitions

Term	Definition
HITH	Hospital in the Home
NPWT	Negative Pressure Wound Therapy

## Links to Related Documents

- Hospital in the Home guidelines: <https://www2.health.vic.gov.au/Api/downloadmedia/%7B5B9BD44D-AC4C-48FD-B0A3-0FC78377727A%7D>

## Evaluation

Incident reports and consumer feedback.

## Risk Rating

**Significant** (2 year document review period)

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## Key Legislation, Acts, Standards & References

- VCACI – Patient Selection and Assessment Guidelines for Hospital in the Home. April 2000.
- Department Of Health and Aged Care Guidelines for the establishment and implementation of The Private Sector Outreach Services 2001

## Acknowledgements

N/A

## Keywords

N/A

## Version History & Author / Contributors

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1	11/2006	New	D Santos RN, V Long RN & D Parry NUM Ambulatory Care Unit
2	02/2013	Reviewed	V Long RN, L Winder RN, RM, NUM
3	04/2020	Reviewed	S Helle NUM DOSA/MDS/HITH
4	05/2021	Reviewed; Section on transfer from other hospitals added to existing admission/ exclusion criteria procedure; Document renamed (previously titled “Hospital in the home admission/ exclusion criteria procedure”)	S Helle Acting NUM, J Trusiak RN; M. Fogarty RN