University Hospitals Birmingham NHS
NHS Foundation Trust

CONTROLLED DOCUMENT

Standard Operating Procedure for In-Patient Bed Declaration

CATEGORY:	Procedure
CLASSIFICATION:	Governance
PURPOSE	To describe the operational procedure for declaring bed availability.
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Controlled Document Sponsor:	Executive Chief Operating Officer Executive Chief Nurse
Controlled Document Lead:	Head of Operations
Approved By:	Chief Executive Advisory Group
On:	December 2016
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Distribution: • **Essential Reading for:** • **Information for:**	 All Trust staff involved in bed management All staff

1. Purpose and Scope

1.1   The prompt declaration of in-patient beds is vital to the smooth flow of patients from the Emergency Department, Assessment Areas as well as clinical departments to the attainment of the national standard that 95% of all patients must be treated, admitted or discharged in under four hours.

1.2   The prompt declaration of beds is also vital to maintain patient flow to and from the Critical Care Unit and for patients requiring admission to hospital on a planned basis, for example for a planned operation.

1.3   This document has been produced to outline the expectation and procedures for the declaration of beds at the Trust.

2. Intended users

2.1   All nursing staff responsible for the discharge or admission of patients must follow this document when declaring bed availability.

2.2   This document is intended for use during the whole 24 hour period and 7 days a week.

3. Procedure

3.1   A discharge is defined as a patient leaving the ward to go; home, to a different inpatient setting (including critical care), a transfer to another hospital, to the discharge lounge or to the mortuary.

3.2   The Trust's discharge lounge should be used for all patients that meet the entry criteria, leaving the Trust, during its opening hours.

3.3   A discharge time will be taken as the time the patient left the ward as documented on PICS, Lorenzo, or the patient paper record, whichever is earliest.

3.4   Beds must be declared to the Divisional Capacity Manager/Clinical Site Managers as soon as the nursing staff are aware that the potential discharge is available and an approximate time for discharge, this must be supported with the update of the PICs systems and Ward Viewer. PICs will update the Ward Viewer in real time.

3.5   Ward viewer must be updated in real time as plans change and the following times in preparation for bed meetings 08.30hrs, 11.30hrs, 16.00hrs and 19.00hrs.

3.6   Ward staff must allocate a bed number against a patient, to identify location of patient onto the ward; this in turn will identify bed availability.
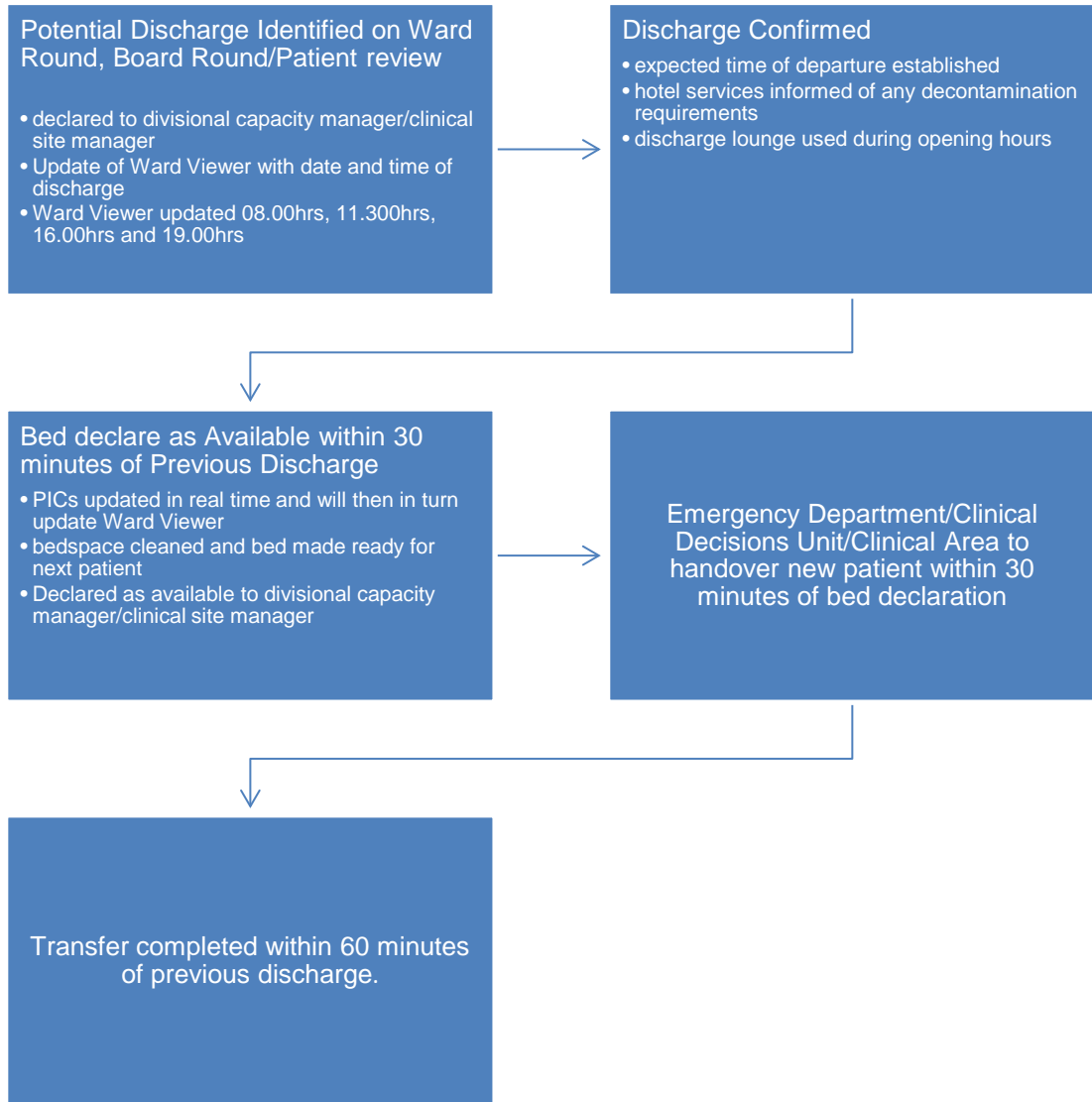
3.7   3.7   If the bed space requires decontamination domestic services must be informed prior to the discharge to prevent delays.

3.8   The bed must be declared as available to use to the Divisional Capacity Manager/Clinical Site Manager within 30 minutes of the discharge, the only acceptable variation is where a deep clean misting is taking place.

3.9   The Emergency Department and the Clinical Decisions Unit are responsible for ensuring that handover is received by the ward and patient transfer is completed within 30 minutes of the declaration of the bed.

4.   Escalation of Delays

4.1   Any delays in the declaration of the beds must be escalated to the Clinical Site Managers by the nursing teams within the Clinical Decision Unit, the Emergency Departments or other clinical setting.

4.2   The Clinical Site Manager will then visit the ward to establish bed availability and liaise with the appropriate department to maintain flow.

4.3   In the event of undeclared beds being identified, the issue will be escalated to the Matron for the area for potential performance management of individuals or teams.

5.   Summary

Bed Declaration Flow Chart ED/CDU/SAU and all Inpatient Clinical Areas

Potential Discharge Identified on Ward Round, Board Round/Patient review

- declared to divisional capacity manager/clinical site manager
- Update of Ward Viewer with date and time of discharge
- Ward Viewer updated 08.00hrs, 11.300hrs, 16.00hrs and 19.00hrs

Discharge Confirmed

- expected time of departure established
- hotel services informed of any decontamination requirements
- discharge lounge used during opening hours

Bed declare as Available within 30 minutes of Previous Discharge

- PICs updated in real time and will then in turn update Ward Viewer
- bedspace cleaned and bed made ready for next patient
- Declared as available to divisional capacity manager/clinical site manager

Emergency Department/Clinical Decisions Unit/Clinical Area to handover new patient within 30 minutes of bed declaration

Transfer completed within 60 minutes of previous discharge.

6.   Approval

Submitted to and approved by:	
Executive Chief Nurse	……………………………
Date:	……………………………
Executive Medical Director	……………………………
Date:	……………………………
Executive Chief Operating Officer	……………………………
Date:	…………………………….