IIHMR UNIVERSITY

NH Narayana Multispeciality Hospital

Unit of Narayana Health

Dissertation Presentation

Topic :MONITORING OF LAMA/DAMA DISCHARGES AS AND INITIATING QUALITY IMPROVEMENT EFFORTS

PRESENTED BY-

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Process Owner & Team Members

- Process Owner -

  Dr.Priyanka Shukla
- Team Members
- Doctors/ Consultants/ Medical officers of Narayana Health, Jaipur
- Hospital Administration Team (Nursing/ Quality/ Operations etc.)
- Floor Coordinators Team

  M.I.CU, P.I.C.U, N.I.C.U, General Wards(M/F), PVT, SMPVT Wards.

INTRODUCTION

- LAMA/Left Against Medical Advice is defined in the broadest terms as any patient who insists upon leaving the expressed advice of the treating team. Hospital discharge against medical advice represent failure of medical care.
- LAMA/DAMA have a significant impact both on the overall cost of care and their experience and quality of life.
- Patients who leave against medical advice are both a concern and a challenge for individuals in the health care field, because discharge against medical advice may expose patients to an increased risk of adverse medical outcomes including morbidity and mortality.
- Against medical advice –discharges continue to be a highly prevalent problem as many as 1-2% of all hospital discharges.
- Monitoring of LAMA/DAMA cases is a important step in Quality Assurance in hospitals.
- Selection of indicators like LAMA should be considered most vital and challenging task to bring continuous improvement in the level of care.

RATIONALE OF THE STUDY

- The rationale of the study is monitoring the LAMA/ DAMA discharges and initiating quality improvement efforts an important step in Quality Assurance.
- The data of LAMA/ DAMA discharges can be utilized by the hospital to assess its own performance and ensure quality of care.

RESEARCH QUESTION

What are the reasons for left/ discharges against medical advice cases from all in-patient facilities at Narayana Multispeciality Hospital, Jaipur?

What measures can be taken to reduce such discharges and ensure quality of care?

AIM AND OBJECTIVES OF THE STUDY

The aim of the study is to initiate quality improvement efforts to achieve operational efficiency in the process at Narayana Multispeciality Hospital, Jaipur

Objectives

- Profiling of LAMA/ DAMA discharges at Narayana Multispeciality Hospital, Jaipur
- Identify reasons of LAMA/ DAMA discharges at Narayana Multispeciality Hospital, Jaipur

RESEARCH METHODOLOGY

- Study Setting: Study was undertaken at Narayana Multispecialty Hospital in Jaipur. The hospital is a 240 bedded multispecialty hospital.
- Study design: Descriptive study with cross-sectional design
- Study participants & sample size: 107 patients who were left/ discharged against medical advice admissions in the in-patient admissions in wards(general, intensive care, private,semi-private)

- Study period: Three months (February 2016 to April 2016) as proposed by the quality steering team.
- Study tool: Direct observation and hospital record review, discussions with the consultants and nursing for citing reasons for LAMA/DAMA.
- Primary data collection: Telephonic survey comprising of open-ended questions to identify reasons of LAMA/DAMA.

DATA COLLECTION

The methods used in secondary data collection is hospital medical records review and retrieval from Hospital Management Information System.

Manually filled LAMA forms were also reviewed in order to obtain additional information.

Primary data was collected by telephonic interviews based on a set of open-ended questions. Monitoring of day to day observation of events in in-patient facilities.

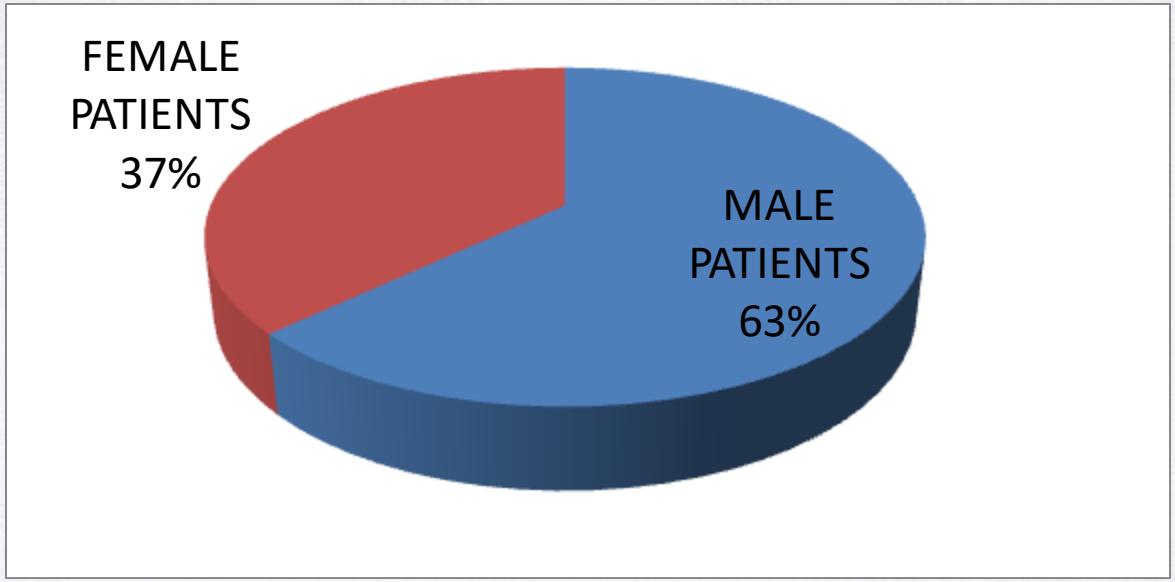
DATA ANALYSIS

- Data Analysis was done by MS-EXCEL.
- Cause and Effect diagram (Fishbone diagram)

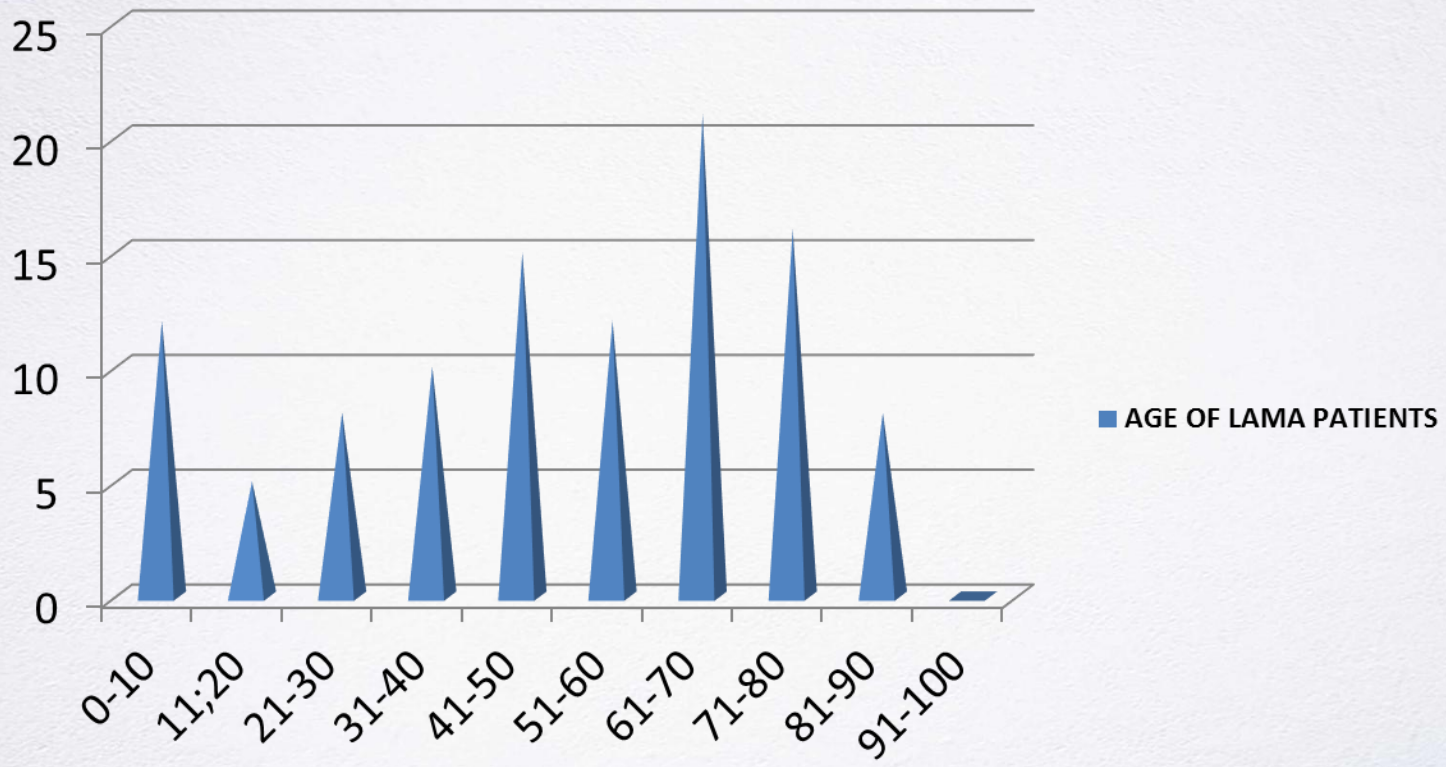
  A tool that the Quality Assurance team can use to group, peoples ideas about the causes of problem.

  The complexity of the problem is assessed and taken a objective look after all the contibuting factors.

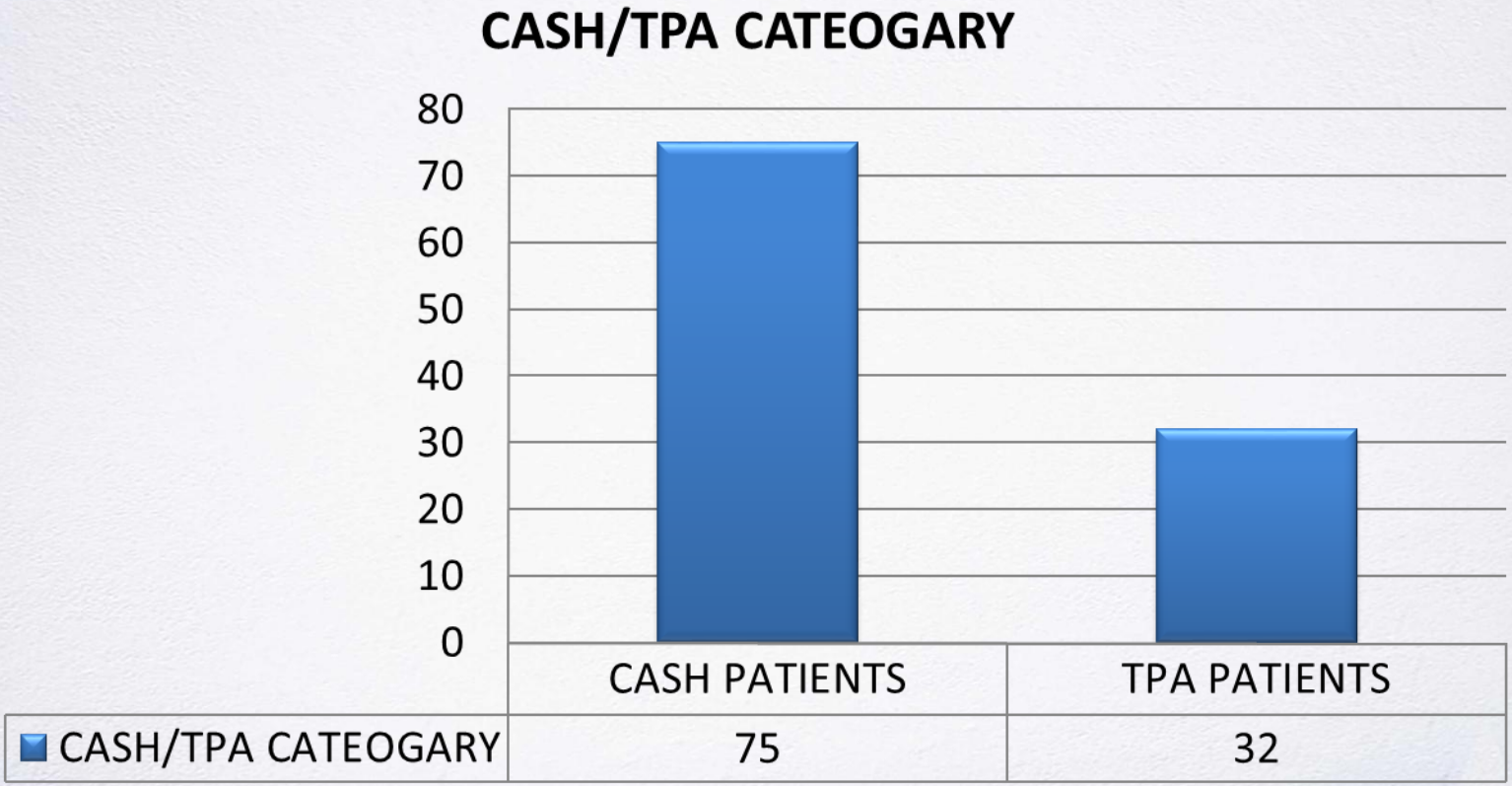
GENDER WISE DISTRIBUTION OF LAMA PATIENTS



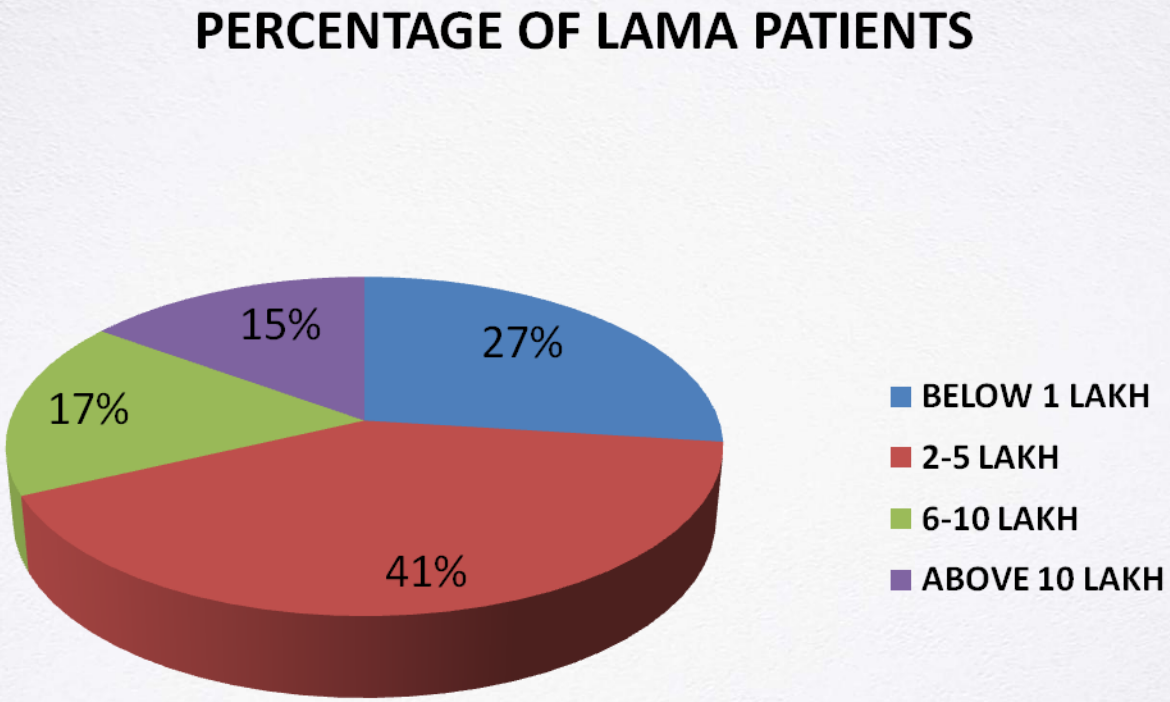
DISTRIBUTION OF LAMA/DAMA BY AGE



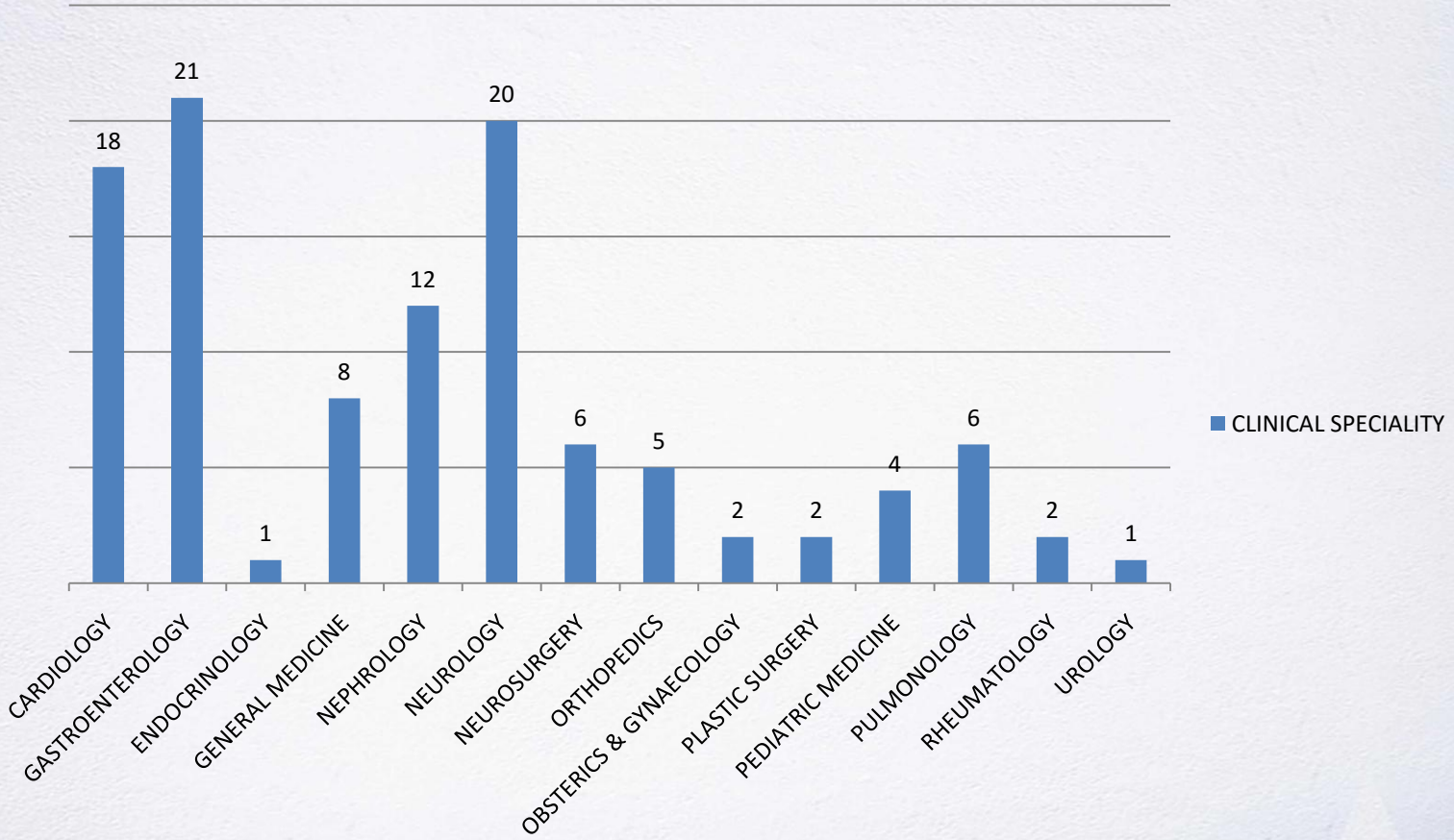
CASH vs. TPA PATIENTS UNDERGOING LAMA/ DAMA



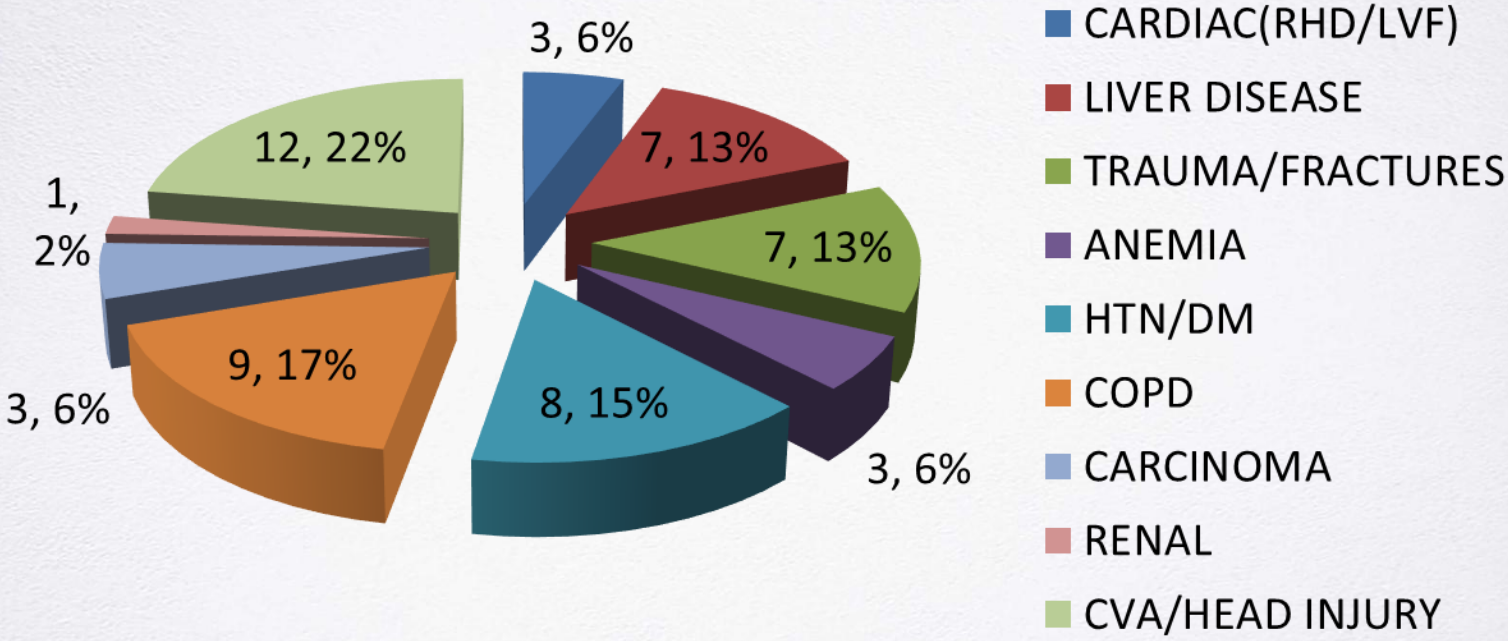
INCOME WISE PERCENTAGE OF LAMA PATIENTS



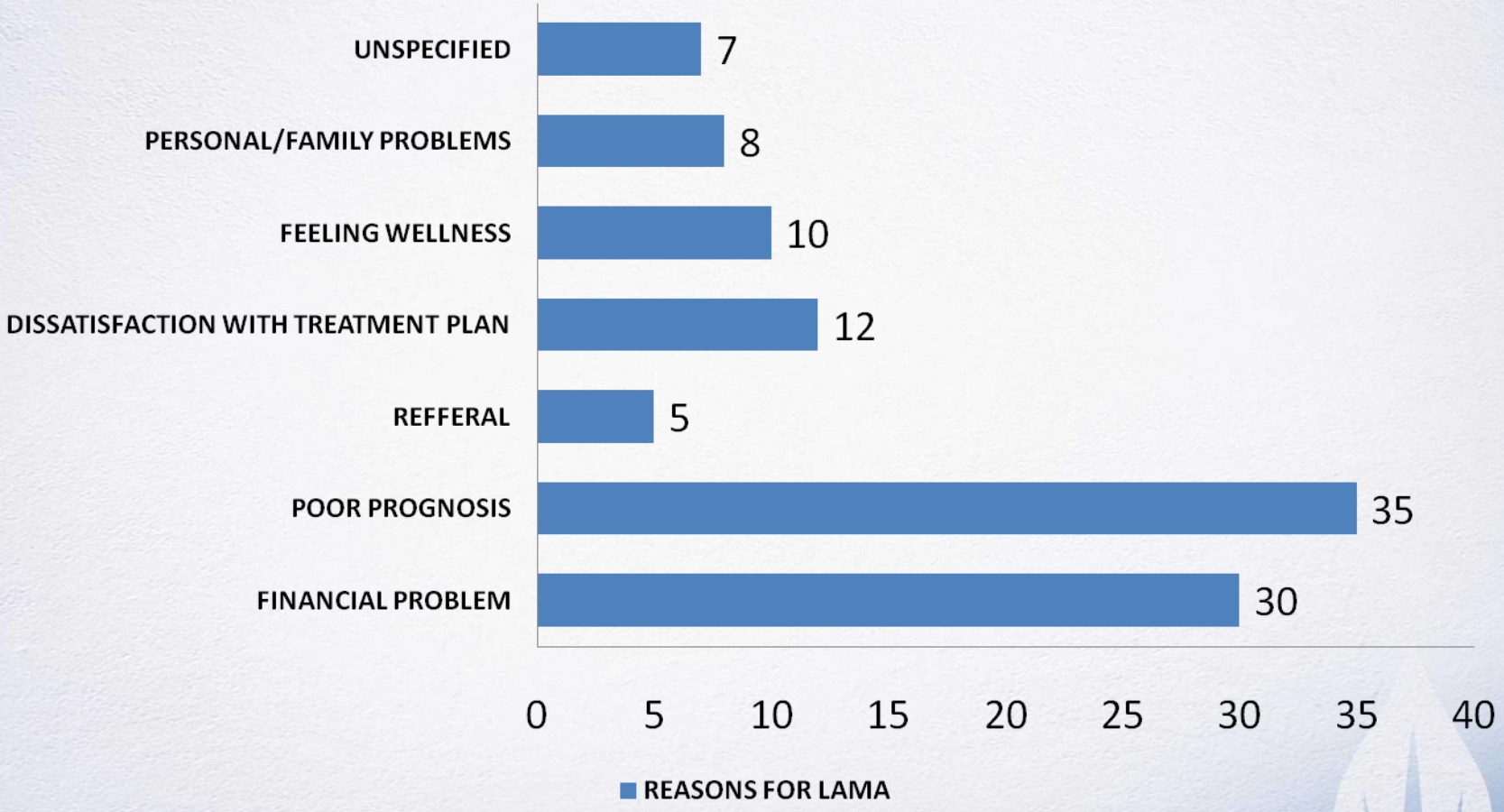
LAMA/DAMA DISTRIBUTION BY CLINICAL SPECIALITY



DISTRIBUTION OF LAMA/DAMA BY DIAGNOSIS

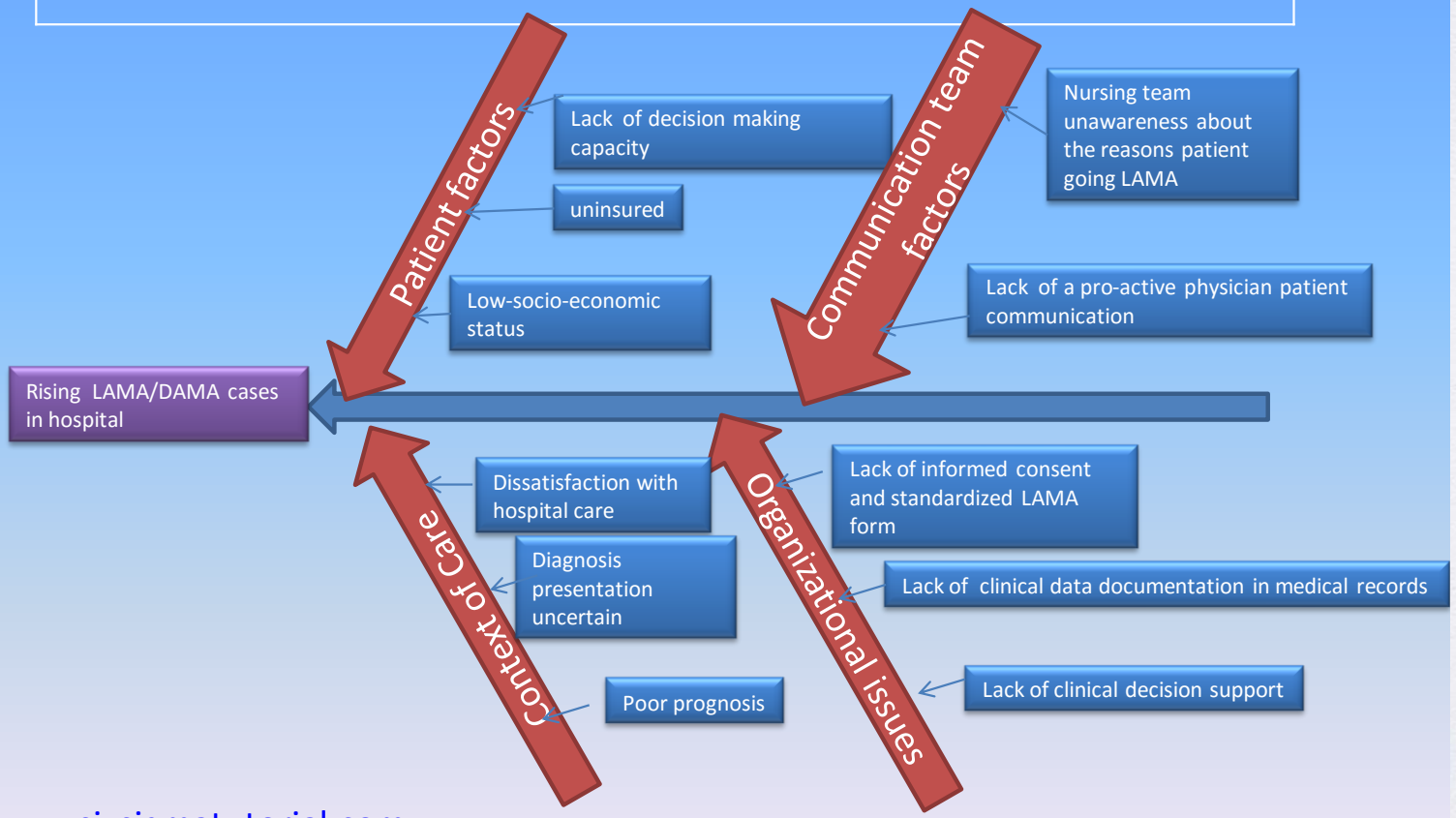


REASONS OF LAMA/DAMA DISCHARGES



Six Sigma Fishbone Analysis Diagram

Six Sigma Fishbone or Cause-and-Effect for Discharge Against Medical Advice



sixsigmatutorial.com

Reasons of ……LAMA/DAMA

Primarily 4 reasons :

- Financial condition(rising out of pocket expenditure on health, low socio-economic status)/long stay of LAMA patients.
- Poor prognosis (- deteriorating medical condition ,not receiving adequate medical/nursing care)
- Want to go to some other place(preference of other hospital/second opinion in some cases/cancer treatment elsewere)
- Behavioral Attitude towards treatment.

Conclusion

- The present study reveals that majority of people who left/ discharged against medical advice were
  - those from low income families under financial burden;
  - those who had poor prognosis; and
  - those who were dissatisfied with treatment plan.

RECOMMENDATIONS GIVEN

- A careful well documented examination is must.

A comprehensive LAMA form should have-

LAMA FORM COMPONENTS
Formalities :Signature of physician and patient
Date and time of AMA discussion and form execution
Personalized to the patient:
Medical condition
Risks and benefits of proposed treatment and alternatives
Patient understanding of consequences of refusing treatment
Patient reason for refusal of admission or treatment
List of follow-up instructions
Self care and when to seek medical attention
Patient understanding of proposed treatment

RECOMMENDATIONS CONTD…

•Patient attendant's-and physician communication.

•Monitoring hospital stay of poor prognosis cases.

•LAMA risks should be communicated to the attendents family.

• Medical record should document the discharge instructions provided.

•Patients refusing to be a part of the discharge discussion or refusal to sign the LAMA form should be documented also.

APPENDIX

Selected survey questions and potential responses asked during telephonic interview by patient attendents and families:

Ques1.Why did you sign out against medical advice?

1.Financial constraints ☐ 2. Poor prognosis ☐

3.Family matter ☐ 4.Dissatisfaction with treatment plan ☐

5.Refferal to other hospital ☐

Ques2.Do you have health insurance?

1.Yes ☐ 2. No ☐

Ques3. Will you seek medical attention at another medical centre?

1. Yes ☐ 2. No ☐

Ques 4. What is annual income?(in Rs)

1.Below 1 lakh ☐ 2. B/t 2-5 lakh ☐ 3. 6-10lakh ☐

4. Above 10 lakh ☐

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THANK YOU

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