

**Nurse-Led Discharge - Day Surgery Unit**

This protocol is applicable to all patients treated in the Day Surgery Unit unless otherwise instructed by their clinician.

- All Registered Nurses in the Day Surgery Unit who undertake nurse-led discharge must have achieved the appropriate level of competence
- Discharge will always be in accordance with the agreed discharge criteria
- Discharge planning should commence at the pre-assessment appointment
- All medical/operation notes should instruct the nursing staff regarding any specific information that patients should be given following their procedure.
- The patient should be functioning to their **expected** ability prior to discharge.
- All multidisciplinary arrangements should be complete and a safe discharge planned.

The designated Registered Nurse should feel confident that the patient is ready for discharge.

<b>Requirements</b>	<b>Rationale</b>
1. All staff who have been assessed and are deemed competent to undertake nurse-led discharge must be identified by the Unit Sister from the substantive establishment.	1. To ensure that this role is only undertaken by experienced and competent nurses who work regularly in the unit and have been assessed.
2. Nursing staff should formally discuss with the patient & carer at the earliest possible time their proposed discharge arrangements. N.b. This may be at the Pre Assessment appointment	2. To enable discharge to take place in a timely manner and to ensure that the patient and their carer have clear information and instructions.
3. On occasions when there are surgical or medical complications which prevent the patient from being discharged as planned, the nurse must delay discharge until the medical staff have been contacted	3. To prevent the discharge of medically unfit patients. Allows for reassessment of patient's condition thus helping to ensure safe care of the patient.

**Level to be attained by registered Nurse: - 4**

**Competency: - Nurse Led Discharge (Day Surgery Unit)**

**Standard Statement: - The Registered General Nurse will be competent to perform nurse led discharge.**

The registered nurse can: -

1. Identify any existing physical, social or psychological problems that would prevent nurse led discharge.
2. Identify that the patient is fit for discharge in line with the Day Surgery Unit Discharge Criteria (appendix A)
3. Demonstrate correct knowledge of complications associated with the surgical condition.
4. Identify that appropriate TTOs have been prescribed and obtained.
5. Is able to educate the patient regarding all aspects of their drugs and wound care in order to achieve safe compliance.
6. Identify and action the need for any follow-up appointment and inform the patient.
7. Discuss accurately and comprehensively with the patient/relative discharge advice relating to their condition; provide any information leaflets and a copy of their discharge summary and a copy of the consent form if accepted by the patient.

**Comments:**

- **The Registered Nurse will be assessed by the Senior Unit Sister (or a nominated deputy)**
- **The Registered Nurse must show evidence of consistent practice in all of the above criteria; demonstrating knowledge of a wide range of surgical procedures in all specialties.**

**Nurse Led Discharge Record Sheet**

**Name:**

**Band:**

**OBSERVED PRACTICE**

Date	Procedure & Specialty	Signature of Assessor

Please copy if further evidence is required

**NURSE'S DECLARATION**

I acknowledge that as a registered nurse I am personally accountable for my practice (NMC Code of Conduct, June 2002). I believe that I have attained an appropriate level of competence to practice nurse-led discharge within the Day Surgery Unit and undertake to keep these skills updated.

**Signed:**

**ASSESSOR'S DECLARATION**

I have formally assessed the above mentioned registered nurse and have found him/her to be competent in all aspects of nurse-led discharge related to practice on the Day Surgery Unit

**Signed:**

## Appendix A

### **Day Surgery Unit Discharge Criteria**

- Vital signs stable for at least one hour
- Correct orientation as to time, place and person
- Adequate pain control and supply of oral analgesia
- Understanding of use of medication supplied supported by written information
- Ability to dress and walk where appropriate
- Minimal nausea, vomiting and dizziness
- Taken oral fluids at least
- Minimal bleeding or wound drainage
- Has passed urine (if appropriate)
- Has a responsible escort for the homeward journey
- Has agreed to have a carer at home for next 24 hours
- Written and verbal instructions given about postoperative care & understanding checked
- Knows when to come back for follow up (if appropriate)
- Emergency contact number supplied

#### References

Cahill, H., Jackson, I. & McWhinnie, D. (2002).  
Guidelines about the discharge process and the assessment of fitness for discharge.  
British Association of Day Surgery Handbook Series

Chung, F. (2006).  
Discharge criteria and recovery in ambulatory surgery  
Day Surgery Development and Practice - The International Association for  
Ambulatory Surgery