

## Effect of Fast Track In – Patient Rehabilitation (FTIR) program on Bed Turnover (BTO) rate & Average Length of Stay (ALOS)

**PROBLEM:** The average **Bed Turn Over (BTO)** rate in the neuro-trauma rehabilitation unit at RH has remained fairly constant at 0.45 since January – May 2013, that might indicate non-optimal use of available bed. This negatively impacts **the, Average Length of Stay (ALOS)**, bed crisis situation & cost effectivity.

**AIM:** To implement a new **Fast tract in-patient rehabilitation (FTIR)** program to increase the average BTO rate and reduce the ALOS in the active rehabilitation neuro-trauma unit at RH by January 2014, maintaining highest standards of care.

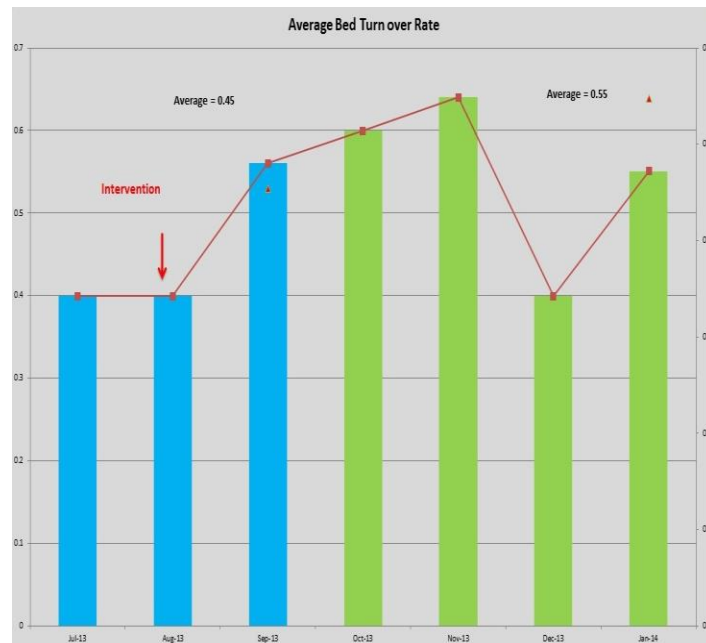
**INTERVENTIONS:** - Formulation of specific selection criteria at HGH for inclusion in FTIR program.

- Patients selected and transferred from HGH to RH as soon as fit.

- Patients underwent new FTIR program at RH focusing on gait training, self care training, cognitive facilitation (as required) & discharged as soon as Independence in Activity of Daily Living achieved (with a maximum LOS of 4 weeks).

-Effect of FTIR program on BTO rate & ALOS analyzed from July – Sept 2013 & Oct 2013- Jan 2014.

**RESULTS:** The total no. of patients who underwent successful FTIR program from July 2013 – January 2014 is 35 patients.



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### CONCLUSIONS

• **FTIR program for 5 patients in every month resulted in:**

- Increase in average BTO by 0.10**
- Decrease in ALOS by 7 days**

• This indicates more efficient use of available beds & better cost effectivity maintaining highest standards of care.

• This facilitates more patients being transferred from HGH to RH for active inpatient rehabilitation each month.

### NEXT STEPS

- To propose FTIR program as an official service provided by PM&R Dept.
- To extend the implementation of FTIR programme to stroke active rehabilitation unit.
- Frequent & ongoing monitoring of BTO rate & ALOS as key performance indicators.

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