



## Inpatient

# Admission Discharges & Transfers

### Key Business Rules

- ALL** ward staff are responsible for recording Admission, Discharge and Transfer (ADT) in real time i.e. within 30 minutes.
- Once a ward transfer has been agreed it is the responsibility of the sending ward to transfer the patient on Millennium either to a bed (if known) or a chair in the receiving ward. They must also track the case notes on.
- The receiving ward must transfer the patient on Millennium from a chair to a bed and to their new clinician (if necessary) within 30 minutes
- The ward must update Millennium with confirmed and predicted discharges at the start of the day and after the ward rounds
- All Discharges must be pended

Support available: Please contact your local Champion User  
Service Desk: Tel: 01225 82 5444  
Email: [ruh-tr.ITServiceDesk@nhs.net](mailto:ruh-tr.ITServiceDesk@nhs.net)



Bringing it all together

## Elective Admission

### 1 Admitting an elective Patient

- Step 1.** In PMOffice , under the **Worklist** Tab select  or Pre-Admits by Ward
- Step 2.** Select required **Ward** (eg RUH/All Wards/Combe)
- Step 3.** The system will display TCIs for today
- Step 4.** **Right Click** on required **Patient** and from the context menu select **Inpatient Elective Admission**. Click  to the next dialogue box
- Step 5.** Check patient details with patient and complete **Elective Inpatient Admission** conversation

Note: Marital Status, Language and Religion should be recorded

Note: Estimated Discharge Date (EDD), must be entered and provides a baseline

TIP: You can use Bedboard to locate and select empty beds. If no beds are available on Millennium you can place patient in a chair on the ward

TIP: When completing the emergency contact no, If address is the same as the patient's you can select "yes" **Free Text Address?** and then type "same" into the house name box – this will pull through the address details from the patient's info

- Step 6.** Click  to complete **Admission**. Select any Documents required from next screen & click 

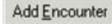
Note: Bloods labels and wrist bands will be printed from ICE (as now).The system can print Address through Med Recs will print Addressograph as now

**Result:** Patient has now been admitted to required ward on Millennium and can be viewed via the  tab

Note: If you admit the wrong patient (either electively or non-electively you must refer to IT to rectify the situation

## Non Elective Admission

### 2 Non-Elective Patients

- Step 1.** In PMOffice , use  Inpatient Non Elective Admission in **Conversation** tab
- Step 2.** Click  on Patient Search Trace screen
- Note: The "Patient Search Trace" screen is never used. **Always click**  & go to 
- Step 3.** In Advance trace enter Patient details & click , select required Patient, select 

Note: Check patient details, (address/ DOB/ names) with patient to ensure you have the right patient

- Step 4.** In the **Organisation** Dialogue enter "Roy" and press the ellipsis button . Select "Royal United Hospital" from list and 

- Step 5.** Complete **Non Elective Inpatient Admission** conversation

Note: Marital Status, Language and Religion should be recorded

Note: The **referring clinician** is the clinician that requested the admission, ie the Patients GP or for ED patients the ED Consultant on duty. Always enter **location** of **referring clinician** by selecting  and highlight select address (at the bottom of the pane) before pressing 

Note: The **lead clinician** is the clinician who will be responsible for the care of the admitted patient

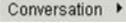
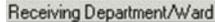
Note: Estimated Discharge Date (EDD), must be entered and provides a baseline

- Step 6.** Click  to complete **Admission**. Select any Documents required from next screen & click 

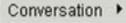
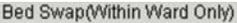
Patient has now been admitted can be viewed via the  tab

## Transferring Patients

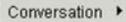
### 3 Transferring Patient within a Ward

- Step 1.** In PM Office  find **Ward** using  tab (eg RUH/All Wards/Combe) double click on required **Ward**
- Step 2.** Right click on the required **patient** and select  and then **Transfer** from the dropdown menu to open **transfer conversation**
- Step 3.** Enter **current ward** in  and enter the new Bay & Bed details or use  to locate and select empty bed. Click 

TIP: You can transfer care between consultants on any transfer conversation by updating the consultant details. If the patient is swapping consultants but staying in the same bed use **Transfer to New Consultant only** in the **Transfer Reason** field

TIP: To swap two patients use Bedswap conversation Right click on the first patient and select  then  from the dropdown menu.. You will be asked to search and select the 2<sup>nd</sup> patient

### 4 Transferring Patients Between Wards

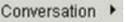
- Step 1.** In PM Office  select  & double click on **Sending Ward**, bedboard for the ward will appear
- Step 2.** Right click on the required **patient** and select  and then **Transfer** from the dropdown menu to open **transfer conversation**
- Step 3.** Enter **new ward** in  and select a chair to transfer patient to. Click 

Note: Unless told to transfer to a specific bed always transfer to a Chair in receiving ward. The receiving ward will use  and the transfer conversation to transfer from the Chair to the required bed. **They are also responsible for transferring to the new clinician if necessary.** This is to be done within 30 minutes of patient arrival.

Note: Remember to use HIM tracking to track patient records to new ward

## Discharging Patients

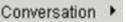
### 5 Discharging – Completing Discharge

- Step 1.** In PM Office  use  to select **Ward**
- Step 2.** Right click on the required **patient** and select  and then **Discharge** from the dropdown menu
- Step 3.** Complete the **Discharge** conversation & Click OK

Note: **Discharged Method** will be **discharged with consent**  
**For Elective Patients Only**  
**Admission offer outcome** if patient has had the surgery then **Patient admitted – treatment completed**, if patients surgery was cancelled and needs to be rebooked use **Patient admitted – treatment deferred** to ensure they are put on the deferred list ready for rebooking  
**RTT Status** will usually be **30 First Treatment** or **20 Not Yet Treated** if treatment deferred

### 6 Discharging - Pending Discharge

Note: To inform bed managers of actual or potential discharges (i.e. patient is likely to go home in the near future) the ward must pend discharges. To indicate potential discharges record discharge time as 01:00.

- Step 1.** In PM Office  select  & double click on required **Ward** (eg RUH/All Wards/Combe)
- Step 2.** Right click on the required **patient** and select  and then **Pending Discharge** from the dropdown menu
- Step 3.** Complete the **Pending Discharge** conversation. Click . Please record patient discharge destination accurately (gives coding warning of notes going to Community Hospital )

## Discharging Patients

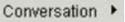
### 7 Discharge Deceased

The discharge should only be completed once the deceased patient has left the ward. This will ensure the bed space remains allocated on the bed-board.

**Discharge Method** will be **Patient Died**

The **Date of death** and the **Discharge date** must be the same.

**Discharge Destination** field will default to “**Not Applicable-Died or Stillbirth**”  
**RTT Status** will default to **36 Patient Died**  
**Death Notification Status** will default to **Informal**  
**Admission Offer Outcome** should be recorded as **Patient Admitted - Treatment Completed**

- Step 1.** In PM Office  select  & double click on required **Ward**.
- Step 2.** Right click on the required **patient** and select  and then **Discharge** from the dropdown menu
- Step 3.** Complete the **Discharge** conversation & Click OK