Prioritizing Patient Flow Utilizing a Patient Discharge Center

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Structured Abstract

LOCAL PROBLEM
The discharge center at a local hospital opened with a goal to assist with the patient discharge process by asking nurses to discharge clients from nursing units to the center. This 800-bed facility has expanded in the past few years and is currently adjusting to a growing community. The center opened with no outlined plan or protocol in place to guide staff in determining how patients would be assigned to the center. The initial plan was to only allow patients who were discharged to home from the intermediate care nursing units because these areas are utilized most heavily in the facility. Nursing administration quickly learned that this plan limited the impact on assisting a large population of patients.

PROJECT PURPOSE
The purpose of this project was to develop a defined process for assigning patients to the discharge center based on factors related to organizational demographics, patient outcomes, and nurse satisfaction.

METHODOLOGY
The framework used to guide the DNP project was the Iowa Model Revised. This is an evidence-based practice model used for promoting excellence in healthcare. According to the most recent revision of the model and work published by the Iowa Model Collaborative, the revision describes the model as one that remains application oriented. The model links practice changes within the system and augments the need and use of piloting, implementation, patient engagement, and sustainability. There are seven (7) steps in the model which guided the implementation of this project: 1) identifying triggering issues and opportunities: the discharge center lacked a process for staff members to use for assigning patients to the discharge center, 2) stating the question or purpose: to develop a defined process for patient assignment to the discharge center, 3) forming a team: selected team represented nursing staff from multiple care areas, case management, telehealth nurses, leadership, electronic health record (EHR) team support staff, and administration, 4) assembling, appraising and synthesizing the body of evidence and deciding if there is sufficient evidence to design and pilot a practice change or if research needs to be conducted: a literature review of local, regional, and national evidence was done and found to support the design and implementation of a practice change, 5) designing and piloting the practice change to determine if a decision about the change is appropriate for adoption: practice change involving specific education for nursing staff who use the discharge center, changes to the electronic health record that assist staff with assignment of patients to the discharge center, and new patient education about the discharge center in the discharge process were developed by the team, 6) integrating and sustaining the practice change: the
team implemented education with nursing staff and shared patient outcomes; team members are representative of all in-patient nursing units and receive a monthly usage report for assigned areas to monitor usage, 7) dissemination of the results: results regarding utilization of the center have begun and shared monthly with nursing managers and care progression nurses (project team members).

RESULTS
The team developed a patient education video regarding the hospital’s discharge process. This video will play along with the welcome video that is shown to all patients on the interactive patient education television monitors. A section in the electronic health record was developed to accompany other required discharge education which will prompt the nursing staff in determining if a patient meets criteria to utilize the discharge center. This section of the discharge navigator has been developed and approved and is in the process of being implemented.
A newsletter outlining some of the patient needs or concerns that were found when patients visited the discharge center was also developed. These concerns ranged from medication reconciliation discrepancies, confirmation of follow-up appointments, and the removal of medical equipment or devices prior to discharge. The process for continuing to share outcomes with staff has developed into a partnership with the risk management department to share outcomes in the monthly publication entitled “Lessons Learned”. Plans for evaluating the effectiveness of the developed processes include having the team evaluate the effectiveness of new practices that helped achieve outcomes for the discharge center. Prior to formulation of the project, the discharge center staff frequently heard concerns from nursing staff who expressed that they found the center to be an added step in the discharge process. Evaluating staff perception of the discharge center after receiving regular information about patient outcomes will be conducted to assess for effectiveness and process improvement.

IMPLICATIONS FOR PRACTICE
A process to ensure that staff nurses are informed of the type of patient needs that can be met by using the discharge center will assist with ensuring the discharge center is appropriately utilized by staff at the time of discharge. Collaboration with multiple members of the health care team improves the patient experience.

Keywords: process, collaboration, inform, throughput, experience

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