



# “Disposition of Discharges”

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## Abstract

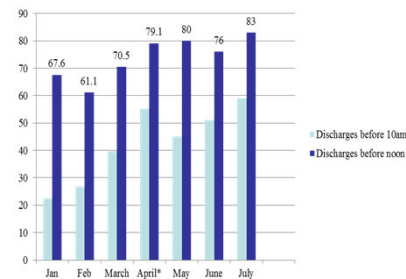
We have struggled with the majority of our discharges occurring on the same day of the week and after 12:00 pm. This affected not only the workflow of the team but also disrupted the patient's day waiting to come to rehab. Benchmarking with other inpatient rehabilitation facilities through Solucient (a database that maintains the nation's largest healthcare databases) indicated this is a common pattern/problem. Patient, staff and physician satisfaction was being affected. Many attempts to change this pattern had been unsuccessful therefore we developed an interdisciplinary committee to analyze our actual discharge data and focus on developing a strategy to improve the disposition of discharges. Our high volume of discharges and admissions occurred every two weeks which coincided with our average LOS of 14 days. Predicted outcomes included an improved work flow process for all disciplines which would, hopefully, result in improved patient, physician, and associate satisfaction. The purpose of this presentation is to share what we have learned by analyzing our discharge data, assessing patient needs and setting guidelines for number of discharges by time of day and day of week. In addition, we have implemented an electronic bed monitoring system which facilitates admissions to the unit. Clinical bed management will assign the appropriate beds with an expected turnaround time of one hour for admission. The committee continues to meet monthly to evaluate this process. Based on outcomes of our discharge flow we will continue to identify the need to modify areas for improvement.

## Discharge calendar

Discharges YTD 2013 BEFORE 12PM			
Row Labels	Count of Encounter	Monthly Target	% of Monthly Target Met
Sun	16	31	52%
Mon	22	28	79%
Tue	43	31	100%
Wed	36	30	100%
Thu	47	31	100%
Fri	44	30	100%
Sat	32	31	100%
<b>Grand Total</b>	<b>240</b>	<b>212</b>	<b>100%</b>

Count of Encounter	Column Labels			
Row Labels	Qtr1	Qtr2	Qtr3	Grand Total
Sun	12	12	6	30
Mon	20	15	10	45
Tue	31	33	10	74
Wed	37	36	14	87
Thu	45	43	11	99
Fri	34	44	13	91
Sat	28	27	4	59
<b>Grand Total</b>	<b>207</b>	<b>210</b>	<b>68</b>	<b>48</b>

## Discharge Times



## \*Teletracking (automated bed tracking system) implemented April 2013

Prior to April of 2013, all of the rehab admissions and discharges were tracked manually in the rehab admissions office. The Teletracking bed monitoring system had already been in place for many years throughout the hospital and proved to be successful in facilitating admissions in a more timely manner. This system can also generate many different types of admission reports and compare data house wide. The committee decided this would be implemented for our inpatient rehab unit. Education was provided for the admissions office and nursing staff and we began utilizing this system in April.



## Conclusion

Utilization of the Teletracking system and increasing the awareness of the team to discharge before noon has enabled us to be more aware of timely discharges (by noon) to meet the hospital demand for beds and earlier availability. We are able to generate reports that help us evaluate the effectiveness of our efforts which have shown a significant increase in our percent of discharges before noon. Although the team is discussing the discharge date at team conference, we find that we continue to run very cyclic by day of the week and ultimately revert back to our previous discharge patterns. Therefore, next steps will include: reporting data from Teletracking at our interdisciplinary meeting; getting input from team on barriers for meeting this goal; involving leadership to attend team conferences and monitor discharge date planning to ensure the appropriate discussion is taking place in regards to discharge date.

## References:

1. Nodbusch, Jane M, PhD, RN, Weiss, Marianne E, DNSc, RN, Klein, Sister Rosalie, Professor; Bobay, Kathleen L, PhD, RN. (2010). An integrated review of the literature on challenges confronting the acute care staff nurse in discharge planning. *Journal of Clinical Nursing*, 21, pp. 754-774.
2. Urrutia, Lynn Y., Fottler, Myron D., Tabott, Laura L. (2003). Improving nurse staffing measures: Discharge day measurement in "adjusted patient days of care." *Inquiry - Excellence Health Plan*, 40(3) pp. 295-304.