Improving the Discharge Process to Address Readmission and Nurse Satisfaction

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OBJECTIVE
This project reviews and evaluates literature related to improving the discharge process. It also describes plans to implement a new nursing role to enhance the discharge process on HCH5, Huntsman Cancer Institute’s surgical specialty floor.

BACKGROUND
• Research points to several essential elements of discharge planning:
  – Communication
  – Coordination
  – Education
  – Patient participation
  – Collaboration among all medical personnel
• Hospitals recognize that improved discharge models reduce readmissions and improve care. (Jack et al., 2009)
• Lack of adequate discharge instructions leads to increased complications and unnecessary readmissions. (Koelling, Johnson, Cody, and Aaronson, 2005)
• Implementation of improved discharge processes improves staff satisfaction. (Giangiulio et al., 2008)

LITERATURE REVIEW
• I searched PubMed and CINAHL from years 2000 to the present.
• The search included these keywords:
  – Inpatient discharge
  – Nurse-led discharge
  – Care management
  – Readmissions
  – Nurse satisfaction
  – Patient education
• The search identified 497 articles. I selected 10 articles and found seven more cited within them—a total of 17 articles for review.

FINDINGS
• Improving the discharge process and delivery of information, as well as assessing patient understanding, reduces readmissions. (Koelling, Johnson, Cody, and Aaronson, 2005)
• Nurse satisfaction increases with more dedicated time for discharge education. (Giangiulio et al., 2008)
• Time constraints and the increasing demand for patient education cause a decrease in nurse satisfaction. (Blankenship & Winslow, 2003)
• Improved education delivery and health literacy assessment improves patient health care outcomes and decreases readmissions. (De Oliveira, McCarthy, Wolf, and Holl, 2015)

IMPLEMENTATION PLANS
• Implement a patient educator/discharge specialist with sole responsibility to provide discharge information for patients and families.
• Implement a follow-up call from nurses focusing on discharge teaching and patients’ post-discharge care needs.
• Compare nurse satisfaction, patient education, and readmission rates before and 90 days after discharge specialist implementation.

REFERENCES