

Multidisciplinary Team Approach to Improve Throughput and Patient Experience

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Background

- The delayed discharges in healthcare settings can impact the delivery of safe patient care, patient satisfaction, hospital and Emergency room throughput.
- Discharge delays caused by barriers like communication and coordination of care are a global health care problem.
- Efficient throughput processes are a vital part of providing cost effective, safe quality care.

Local Problem

- West 4, an Ortho and Trauma unit, identified the need to safely discharge patients in an earlier time to avoid delays and overcrowding in recovery and emergency rooms.
- Patient experience was affected due to delay in getting beds for ED and PACU patients.
- Goal is to discharge 25% of patients before noon.

Methods

- Setting:** 32 bedded Ortho Trauma Surgical unit at a 273-bed suburban community medical center in Midwest.
- Sample:** West 4 patients.
- Interventions:**
 - The implementation of the Throughput Rounds began in Q1 of 2022 with an initial meeting among the stakeholders: nursing, case management, social work, nurse manager, physical and occupational therapists, and physician advisor to identify discharge barriers and opportunities.
 - Capacity huddle at 0300, 0810 and at 1330 to identify discharge barriers and to expedite pending tests/procedures.
 - Throughput rounds at 0900 on Weekdays with Multidisciplinary team to facilitate early discharges.
 - Leader Rounding by using cipher I-pad.
 - Quarter back Initiative by shared governance to partner with physicians to round with nurses.

- Physicians entering Estimated discharge date in Epic.
- Education was provided to all the staff to cover all the key elements of Throughput Rounds.
- The quality department monitored the pre noon discharge data.

Results

- The implementation of Throughput Rounds was successful in improving pre-noon discharges in West 4.
- Pre-noon discharge result is shown in figure-2.
- Patient Experience results are shown in figure 3 and 4.

Throughput Rounds Guide	
Nurse	
Patient name, room, admit/current diagnosis	
Length of stay (if greater than 10 days, only cover outstanding barriers unless expected discharge within 1-2 days)	
Expected Discharge Date	
Clinical Barriers to discharge (Only cover topics applicable to discharge)	
Planned tests/procedures	
Planned changes to medications (IV antibiotics, IV to PO, new meds, anticoagulation, education needed?)	
Need for foley?	
Need for central line?	
Oxygen weaning and/or home O2 eval?	
Need to advance diet? Enteral feedings?	
Progressive Mobility: Has patient been mobilized? PT/OT evaluation needed?	
Skin concerns? Wound care consult needed?	
What is the goal for the day?	
Other Barriers to Discharge?	
Care Manager	
Current LOS and GMLOS	
Readmission risk score	
Discharge Destination?	
Transportation?	
Patient/family aware of plan?	
If patient is going to skilled nursing, inpatient rehab, or LTACH:	
Has patient been accepted?	
Is insurance authorization needed?	
What is back up plan?	
If patient will need home care:	
What services are needed?	
Is order present?	
Does patient need any equipment?	
If patient is 1-2 days from discharge, has follow-up appointment been scheduled?	
Throughput Rounds Leader	
Does patient have potential for pre-12 discharge tomorrow?	
Review follow-up items and assign responsible team member(s)	
Any questions or needs for Pharmacy?	

Figure 1. Throughput Rounds Guide

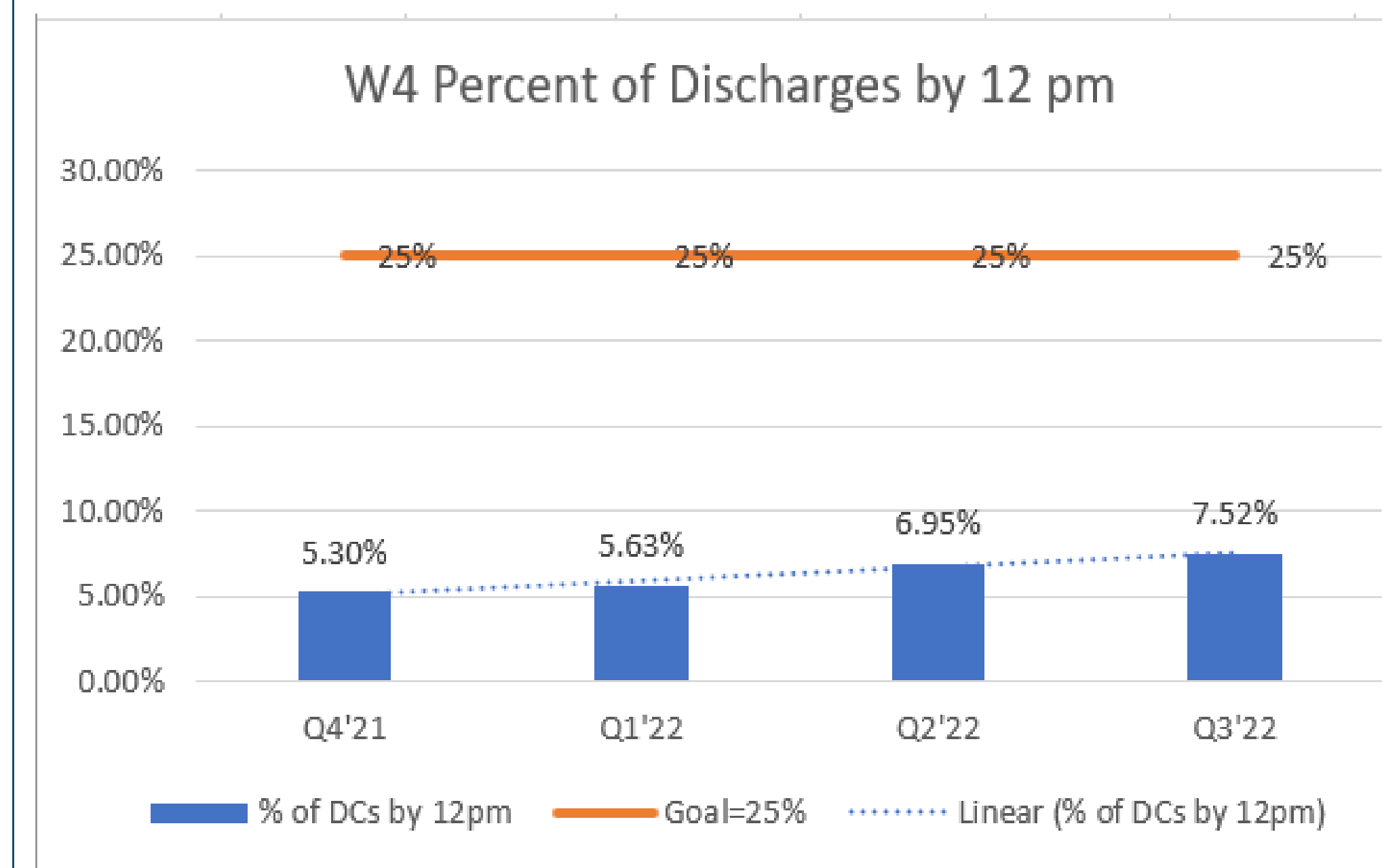


Figure 2. Percentage Of Pre-noon Discharges

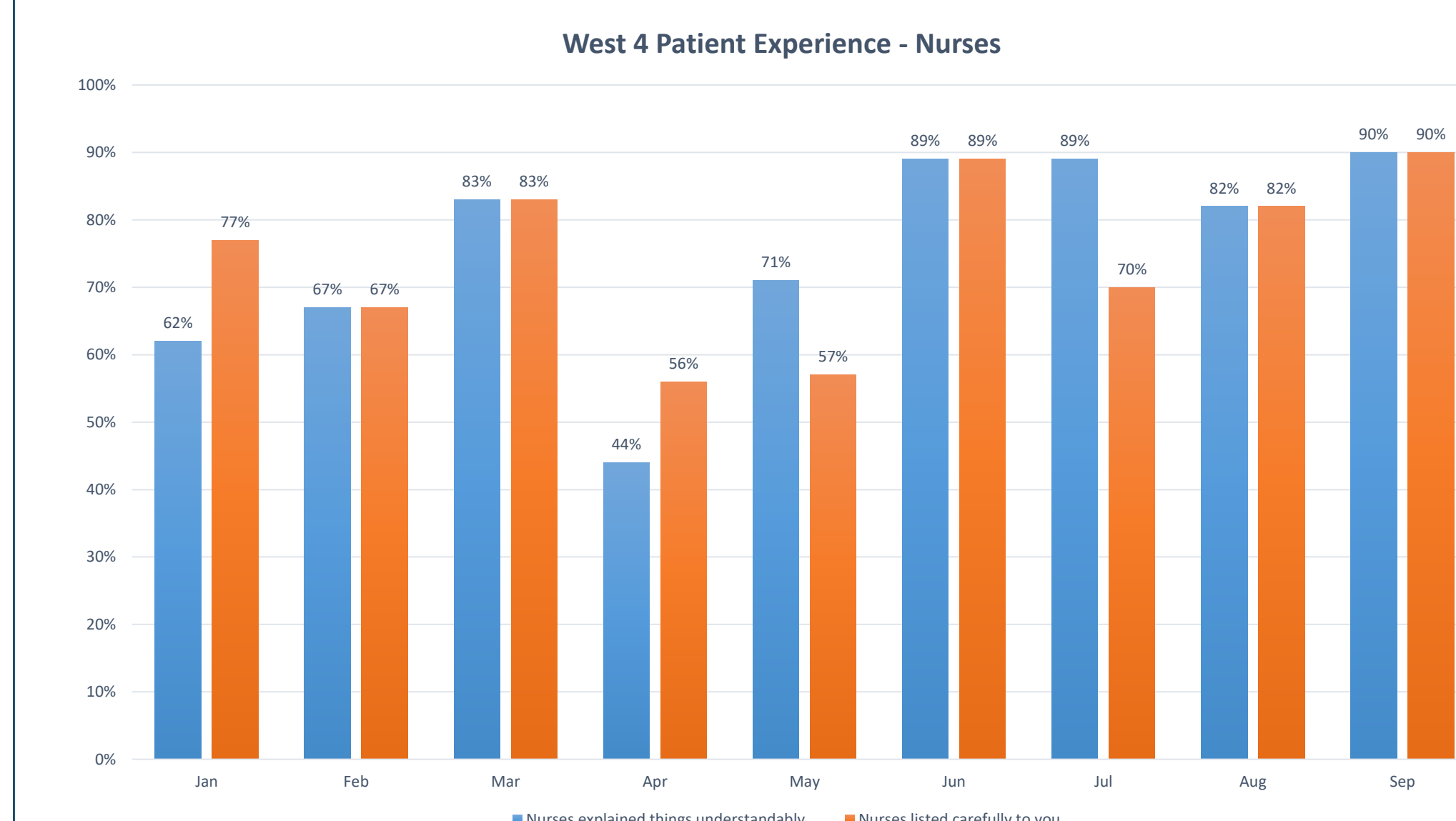


Figure 3. West 4 Patient Experience - Nurses

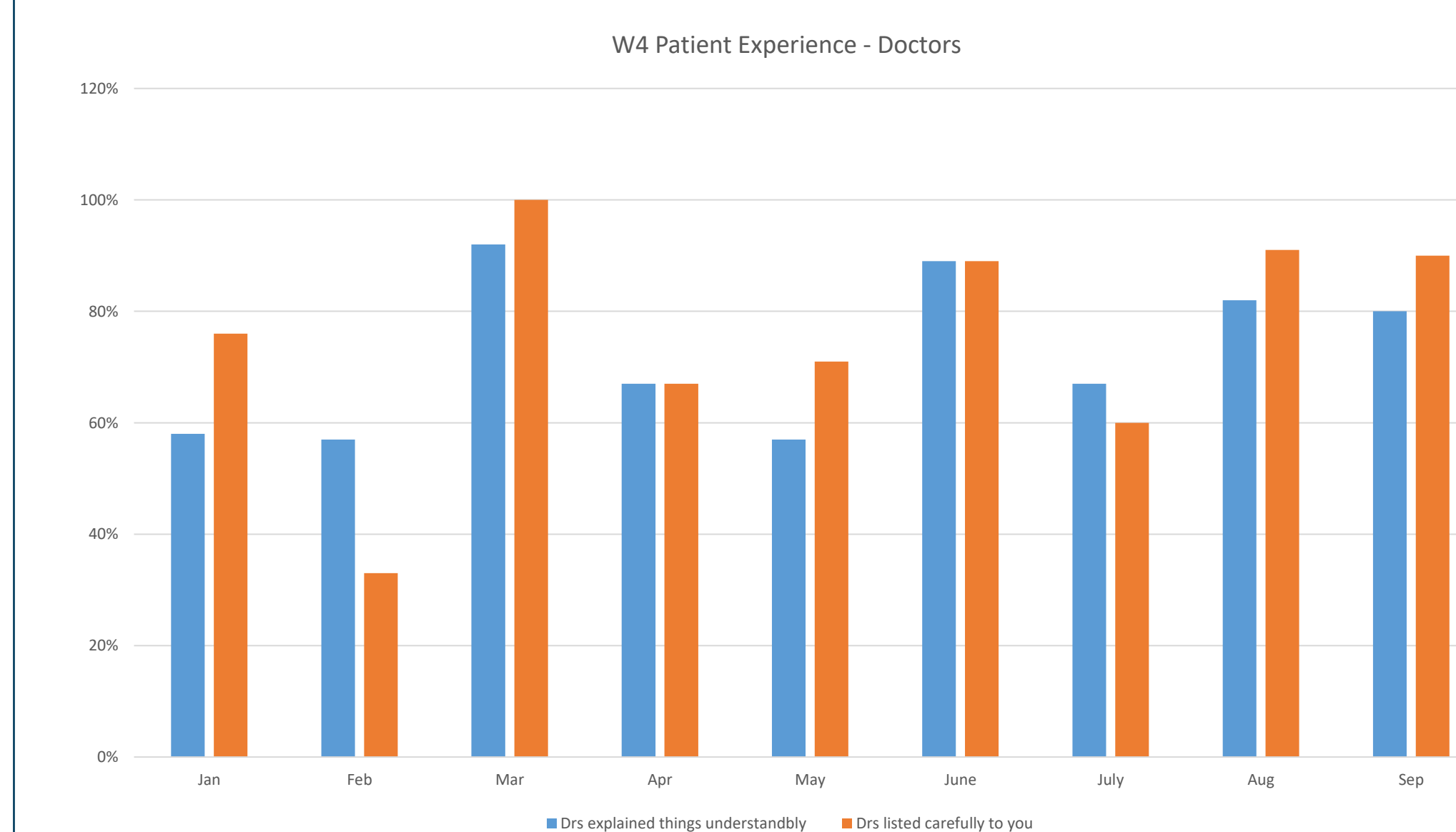


Figure 4. West 4 Patient Experience - Doctors

Conclusions

- Pre-noon discharge percentage improved compared to 4Q 2021.
- Significant improvement in patient experience score for 3Q 2022 compared to Q1 AND Q2 2022.
- Received great support and collaboration from Multidisciplinary team.
- A targeted intervention can significantly improve early discharges. Reinforcement is needed for these gains to be sustainable.
- Encountered unavoidable discharge delays.

Implications for Practice

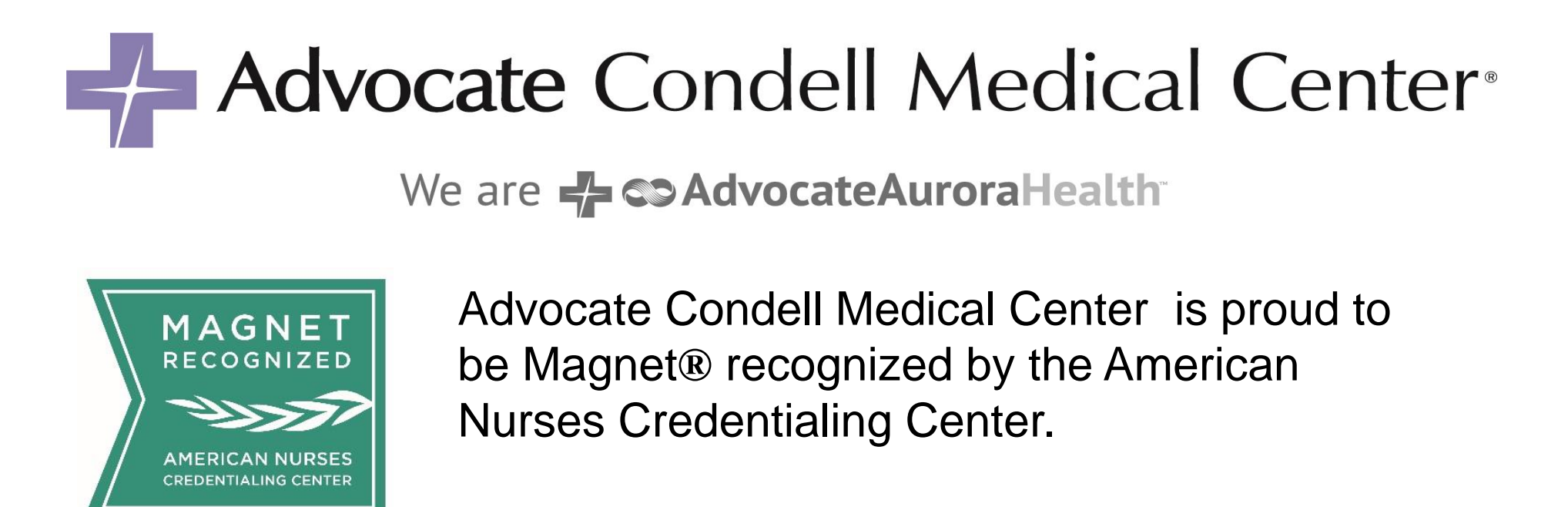
- Promoted interdisciplinary relationship and communication among Multidisciplinary team.
- Improved patient experience : West 4 met patient experience goal for 3Q 2022.
- Early discharges can positively impact patient experience and throughput. Recommend to include ED patient's left without seen and PACU bed wait times in future studies.

References:

Brown, Lauren MSN, RN; Saini, Virender MD; Carter, Chris PharmD, Standardizing Multidisciplinary rounds, JONA: The Journal of Nursing Administration: [January 2020 - Volume 50 - Issue 1 - p 5-8](#) doi: 10.1097/NNA.0000000000000830.

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