



Mission:

We put the person who needs our care at the center of everything we do.

Vision:

To discover, develop, and deliver a healthier tomorrow.

Our Core Value:

Caring for Our Patients, Their Loved Ones & Each Other.

Teamwork - Integrity – Diversity – Excellence – Safety

Improving communication on medical in-patient population resulting in improved discharge flow.

Additional Information:

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DISCOVER

The Opportunity:

- The Executive Leadership Team tasked a Green Belt team with utilizing the DMAIC principles and methodology to improve the discharge process within the inpatient medical – surgical patient population as Duke Raleigh Hospital.
- Define:** Initial Sensing sessions were conducted with stakeholders to investigate all facets of the current state discharge process. Voice of the customer (VOC) was obtained and translated into Critical to Quality (CTQ) measures. Current state process diagramming was also conducted.

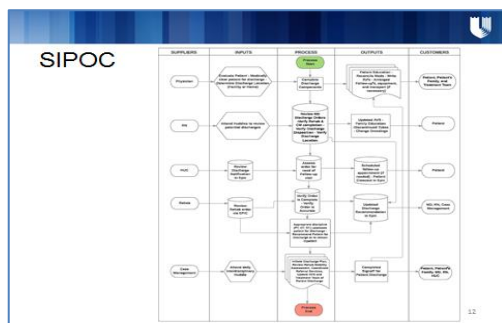


Figure 1: SIPOC Diagram

- Measure:** Surveyed through shadowing with follow up questions 30 discharges on the 4th floor from the time of DC order written through the time the patient left the unit.
- Analyze:** Time delays and roadblocks (communication barriers, equipment need and delivery, medication assistance, coordination of care, aligning patient needs) during the discharge process were noted, and a plan was developed to align the coordination of care with the patient needs throughout the discharge process.

DEVELOP

The Plan:

- Brainstorm with identified team on solutions to improve discharge process
- Utilize survey feedback to identify top initiatives for implementation

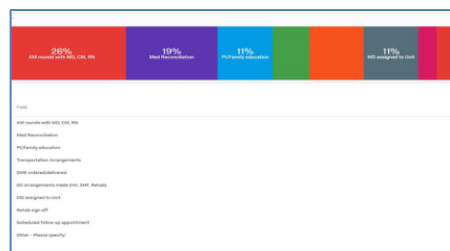


Figure 2: Communication was rated the highest among the working group

- Implement daily rounding through hospital and unit level leadership and support
- Rounding Team to include representation from: Hospitalist Physician, Registered Nurse and Case Manager
- Set a daily-specified time with clearly defined roles and expectations for all of the participants.
- Laminated templates were developed and provided as scripting for nursing staff:
- Roles:
 - Nurse: Announce patient name, attending name, primary diagnosis, overnight issues and concerns for the day
 - MD: Discuss brief medical plan to include expected date of discharge as well as the each patients discharge plan
 - Case Manager: Focus on same day and predicted next day discharges to determine what is needed to expedite discharge

DELIVER

The Results:

- Surveyed through shadowing with follow up questions to the patient as well as staff.
- Evaluated 30 discharges on the floor from the time of DC order written through the time that the patient left the unit.
- Patient satisfaction of the discharge process increased from 46% to 97% satisfied.
- Nursing staff satisfaction of the discharge process increased from 77% to 94% satisfied.

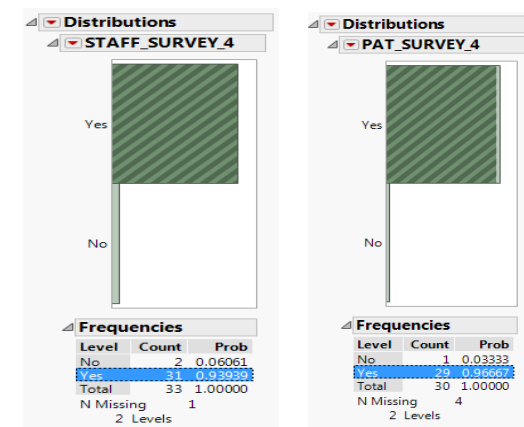


Figure 3: JMP Software Distribution Diagrams

- Control:** Daily, weekly, and monthly follow-up shadowing of daily rounding
 - Continued communication via email to the unit team leadership on the rounding successes/Issues
 - Formal handoff transitioned to unit leadership to include expectations on and requirements to maintain an optimal process.