Comprehensive discharge instructions can reduce ED revisit

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Topic: Comprehensive discharge instructions can reduce ED revisit

Purpose: The Purpose of the project is to improve discharge outcomes through better discharge

education to the patients and decrease preventable adverse effects after discharge and to decrease

readmission.

Background: Discharge from the hospital is a vulnerable time for patients. 1 out of 5 patients

experiences an adverse event during this transition period, with one 3rd of these adverse events

probably avoidable. Comprehensive discharge teachings can improve patient understanding and

it is essential to make sure a smooth transition from hospital to home, as the accountability for

patient care transferences from health care staffs to the patients and their caregivers. (Bailey,

2012).

Participants: Management group of the hospitals including Director of Nursing, Managers,

Supervisors and in Charge Nurses. The main target population was bed side nurses and on floor

general practitioners.

Data Sources: Key Performance Indicator (KPI) data and Occurrence variance report (OVR) of

tertiary care hospital between August 2015 to August 2016.

Methods/Discussion: Initially started work on the implementation of discharge instructions in

October 2016 while collected data from KPIs and OVRs raised between August 2015 to August

2016. The major cause of readmission which was identified is improper discharge instructions to

the patient which lead to readmission with the same complaint. Upon observation, it has been

identified that there was no uniform process of the discharge instruction while giving teaching to

the patients. Beside that teaching has been deliver either in Arabic or English. however most of the patient feel difficulty to understand the instructions because of the language. The pilot project has been implemented in 30 bedded medical unit in a tertiary care hospital in which initially staff has been reinforced to deliver teaching in patient's own language by using interpreter already available in the hospital. Secondly, staff has been also trained for the 5 components by using Tech- Back method and instructions including the reason for the hospitalization, the discharge medications, instructions on what to do if the condition changes, coordination for follow-up appointments and coordination for following up on pending tests at the time of discharge Conclusion: An intervention focused on the education of health-care providers about comprehensive discharge instruction, which patient can easily understand may lead to decrease the incidences of readmission.

Keywords: Discharge instructions; teach-back method; discharge teaching; quality improvement; nursing education, readmission; patient safety.

References

Bailey, C. (2012). Reducing admissions through discharge communication. Safety Solutions.

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