Providing Complete Discharge Instructions to the Heart Failure Patient

Team:

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Heart Failure Quality Team made up of: Physicians, PA's, NP's, Staff / Office Nurses, Clinical Managers, Care Management, Bed Management, Pharmacists, CNS, HF Clinic Staff, Coding

••• our journey



Primary Customers

- CHF Patients
- Physicians / Staff
- Community

Each has expectations of us:

- The Heart Failure patients expect to be informed about how to care for themselves after their hospital stay
- Physicians and staff expect to have tools that streamline documentation and support quality care
- The community expects to consistently receive high quality patient care that prevents readmissions and unnecessary costs.



Aim Statement

By 12/31/04, Spectrum Health (Grand Rapids, MI) will improve the documentation of discharge instructions for the heart failure patient from 30% to 80% based on the following discharge criteria as defined by JCAHO:

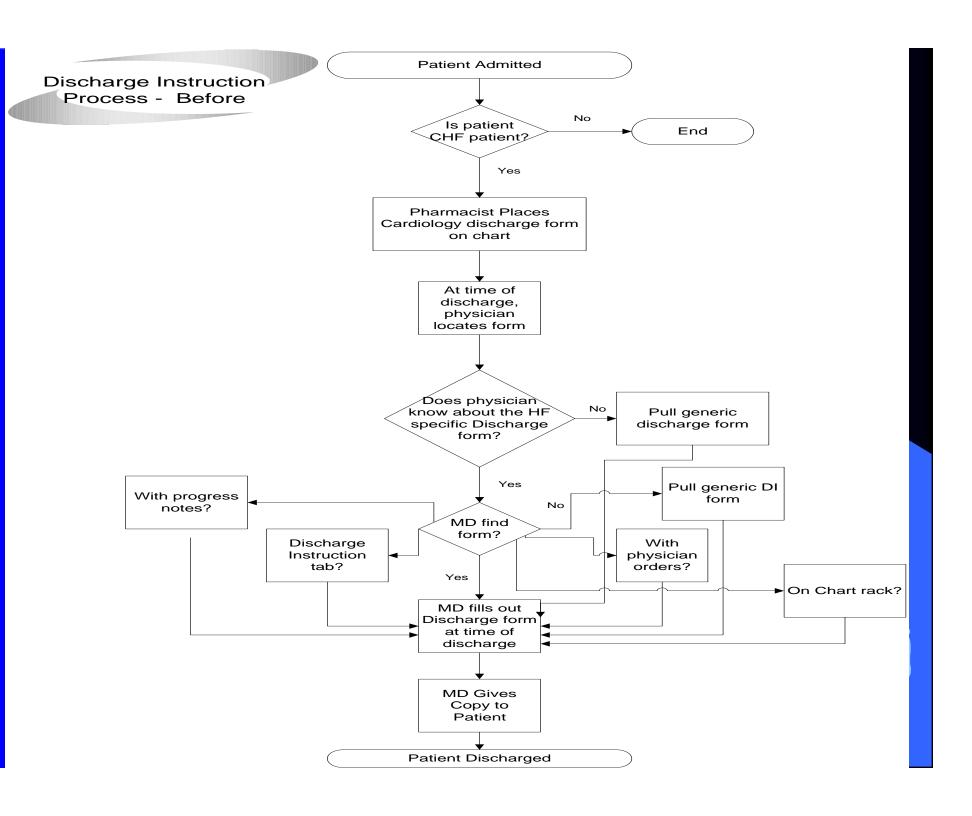
- Activity Level
- Diet
- Discharge Medications
- Follow-up appointment
- Weight Monitoring
- What to do if symptoms worsen



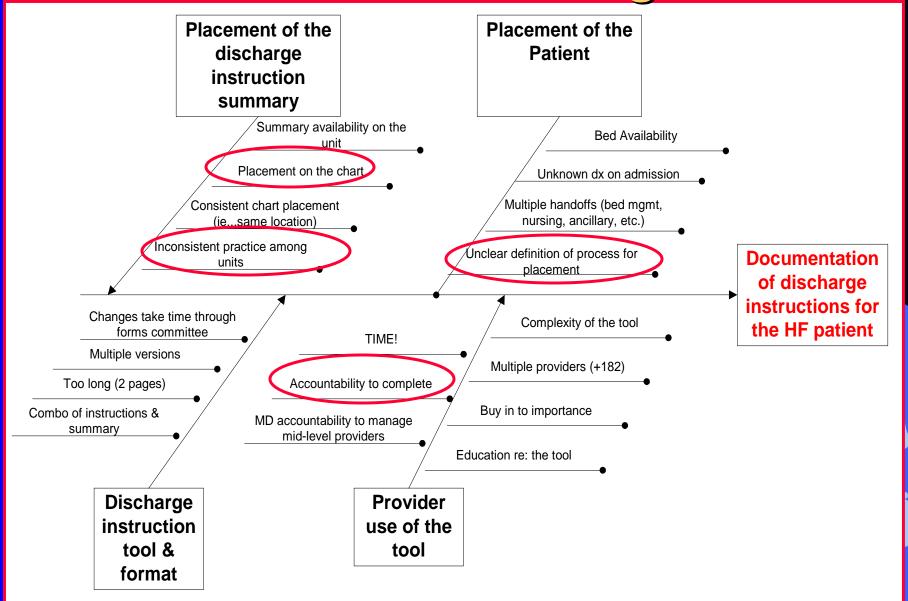
Why Focus on Discharge Instructions?

- Improve patient care
- Heart failure education for patients
 = improved compliance with treatment
 plan and decreased readmissions
- JCAHO measures publicly reported
- Very low compliance rate re: documentation of discharge instructions





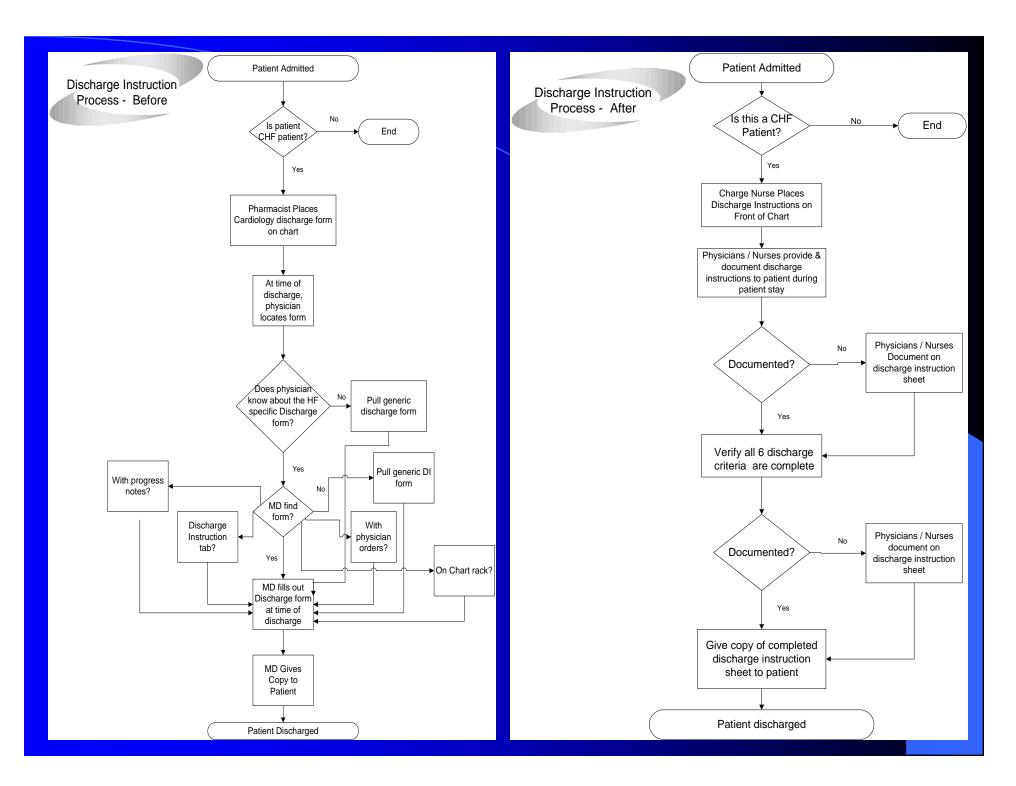
Cause & Effect Diagram



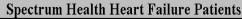
Strategies Implemented

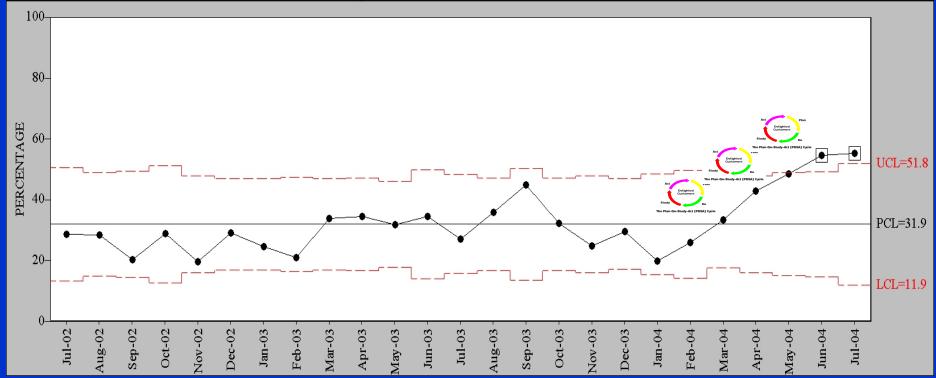
- Educated physicians, residents, nurses, care management
- Clarified appropriate placement for HF patients
- Profiled physician performance
- Implemented multidisciplinary approach to completion of discharge form
- Developed pocket card for nurses with key phrases
- Placed discharge form in front of the chart
- Shared data





Discharge Instructions-All 6 Components





Jan-04

•Order set packets used on 4D

Feb-04

•Revised admission orders

Mar-04

•Presented physician data on order set usage

April-04

- •Focus group with providers
- •Increased involvement of Care Management
- •Consistent placement of patients on units

May-04

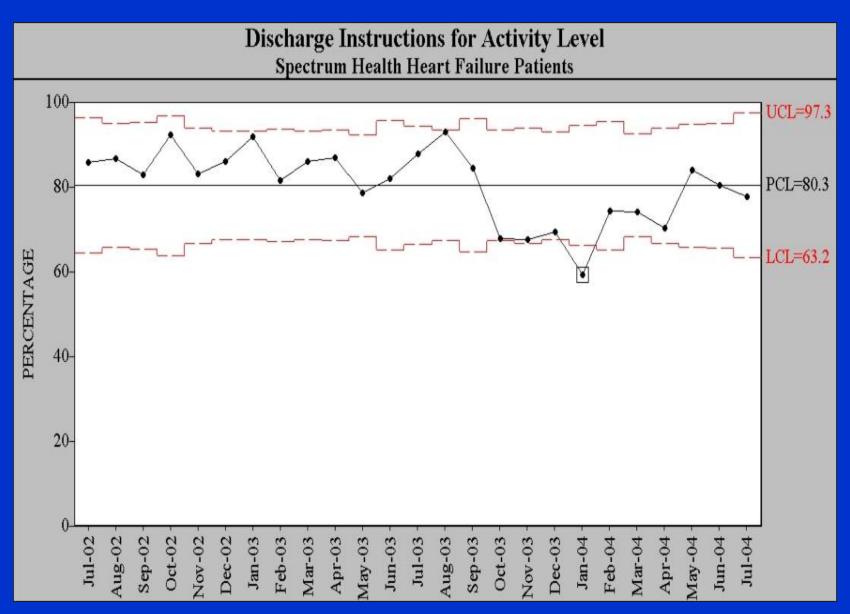
Education session on care of HF patient

June-04

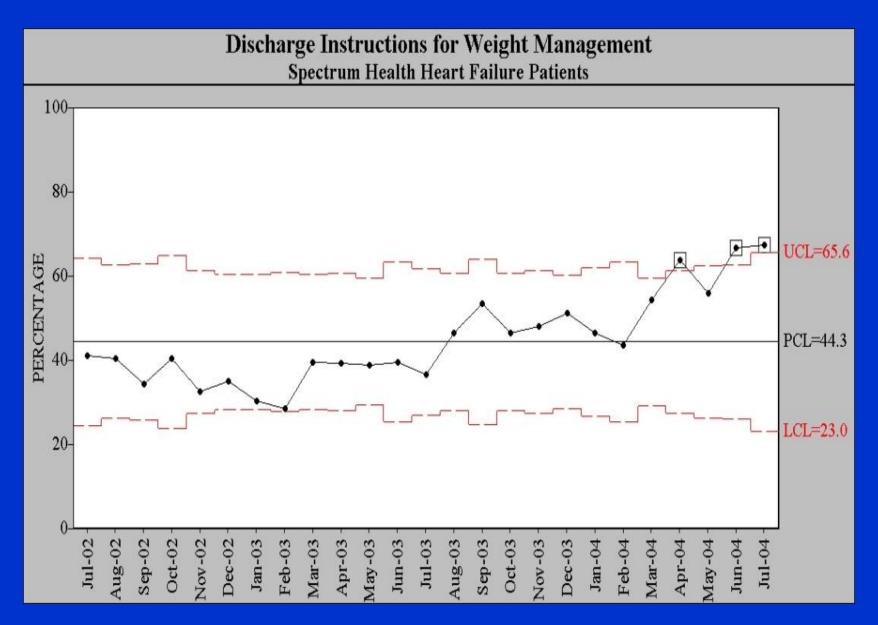
- **Education session on care of HF patient**
- Involved staff in placement of orders sets on chart triggered by BNP

July-04

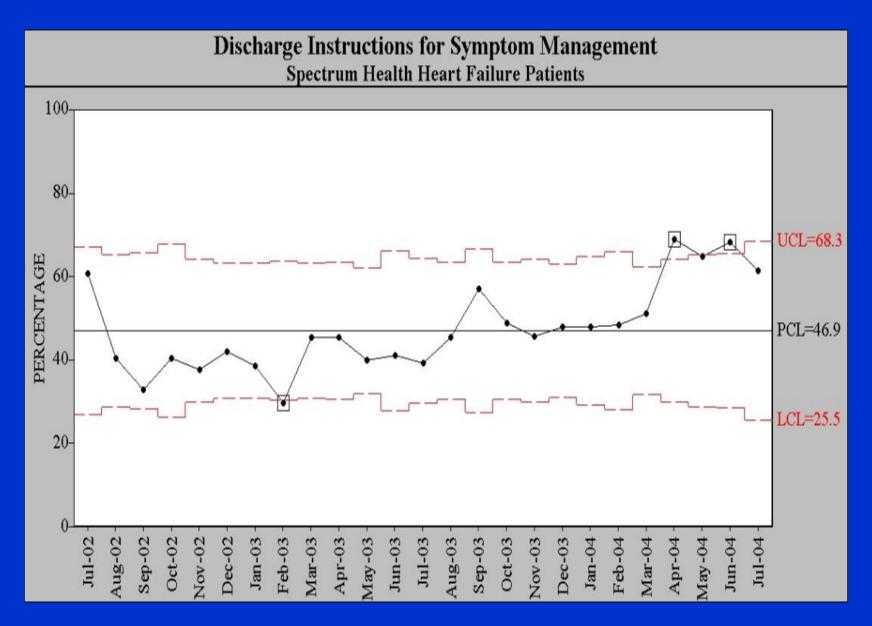
- Develop fishbone diagram of discharge process
- Flow chart discharge process



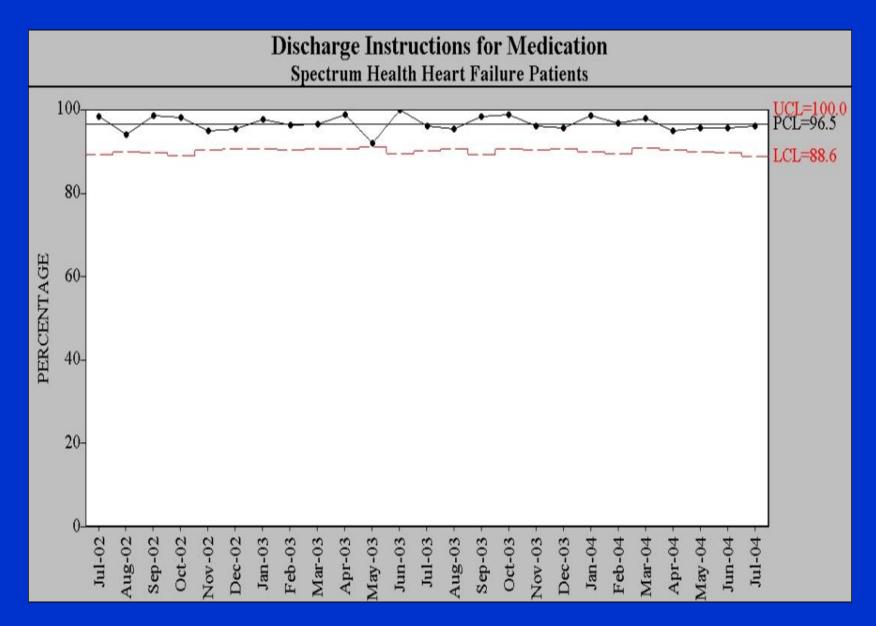




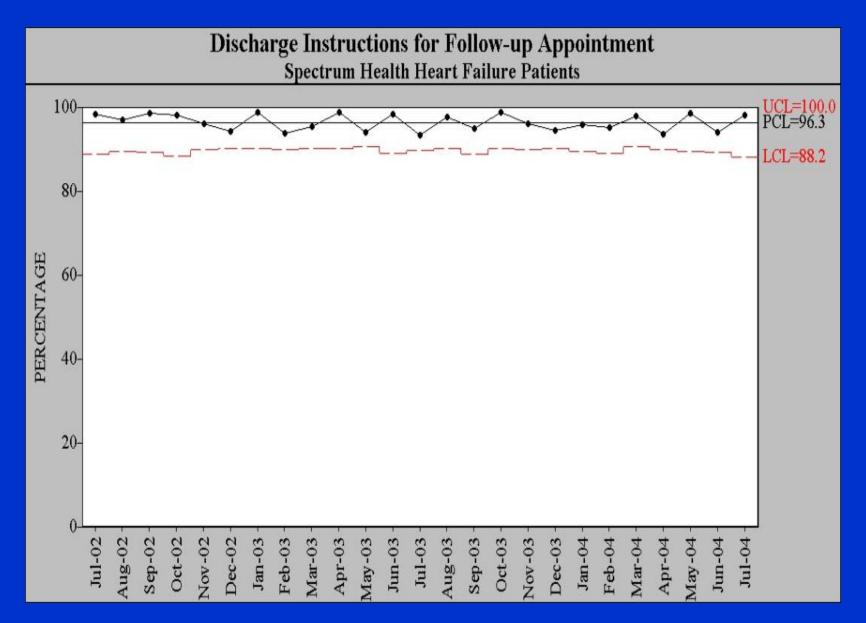




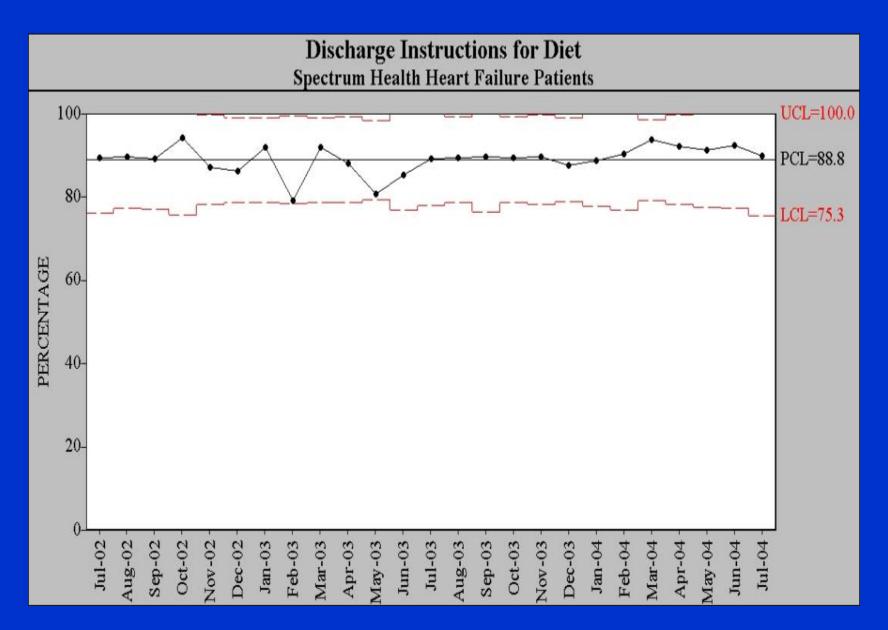














Next Steps

- Audit HF charts immediately post discharge
- Provide feedback to physicians / staff
- Continue to share data on 6 discharge instruction criteria
- Profile hospitalist groups and educate them
- Place quality improvement staff on units to detail the work

