Improving the Discharge Process for Surgical Patients Using Lean Methods
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Background
Lack of standard work and effective communication between physicians, nurses, and staff makes discharging patients in a safe and timely manner more difficult. Before this project, discharges on a medical-surgical unit were often delayed, making patients and staff unhappy. Following the implementation of standard work to alert all staff of pending discharges, a nurse to coordinate the discharge activities of the day, and two daily huddles for nursing and ancillary staff, the discharges on this unit became less hectic, more predictable, and more satisfying to patients and staff.

Team Members
Sponsors: Anita Larsen, COO & Chief Nurse Executive; Leslie Hall, MD, CMD
Team Leaders: Kevin Dellsperger, MD, PhD; Jordan Magdits, MBA
Members: Anne Hackman, Mary Williamson, Jill Hedrick, Delinda Straatman, Dan Smith (Nursing); Stephen Barnes, Sharon Bachman (Surgeons); Jeremy Berger, Scott Matz (Resident Physicians); Nicole Alcococ, Thomas Sandifer (Pharmacy); Marcia Dennis (Social Work); Charlottie Hendricks (Care Management); Lindsay Highman (Unit Clerk); Carey Smith (Regulatory); Keith Hampton (Nurse Policy/Standards); Megan Tregnago, Jure Baloh, Julie Brandt, Kristin Harlan, Eric Leemis, Kyndal Riffie (Support)
Facilitators: Doug Wakefield, PhD; Eric Rosenhauer, MBA, MHA

Lean Methods
Aim Statement
To improve patient and staff satisfaction with the discharge process through standard work, improved communication, and safe and timely discharges.

Changes & Standardization of Work
- Yellow and green patient designations
- 24-hour notifications
- Discharge coordinating nurse
- Morning and Afternoon Huddles

Data Collection
The team collected data to identify and resolve many process issues that led to most work being done late in the process and, in turn, delaying discharges.

Value Stream Process Mapping
Out of 226 steps, we found 102 “Red” Non-value added steps (45.1%), 44 “Yellow” Non-value added essential steps (19.5%) and 80 “Green” Value added steps (35.4%).

Lessons Learned
1. Use of standard work can push decision making for discharge from physicians to front-line nurses
2. A discharge coordinating nurse helps to serve as a touch-point between all parties
3. Visual cues are useful in improving communication and signaling various members of the team to initiate specific activities
4. Huddles improve coordination of care among disciplines