

Can multidisciplinary discharge huddles improve patient satisfaction at inpatient rehab?

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Objectives

Discharge is a crucial time affecting patients' final perceptions about their hospital care. Clear communication improves patient safety, especially at care transitions [1]. Literature shows that in some healthcare settings, multidisciplinary discharge planning helps patients and caregivers better understand future care plans, thus improving satisfaction and outcomes [2, 3]. This study aims to ascertain whether multidisciplinary discharge huddles at the time of discharge improves patient satisfaction.



Design

Press Ganey [4] standardized inpatient rehabilitation hospital survey was used quarterly to evaluate patient satisfaction in a standalone 42-bed inpatient rehabilitation hospital. Average scores (0-100) were generated in each section and subsections.

Multidisciplinary discharge huddle was implemented at the end of 2018, involving case managers, pharmacists, nursing and rehabilitation physicians gathering with patients and their caregivers to review discharge instructions and medications and to address concerns face-to-face. Previously, the discharge process only involved nursing walking through discharge instructions and medications with the patient and caregivers.

Pre (2018) and post (2019) data were compared and graphed longitudinally, including overall discharge score, subsections of "Staff explained discharge plans", "Training given regarding home care", and "Assistance with post-discharge". The average scores of 2018 were compared with 2019. No other significant change in the discharge process was made during the study period.

Summary of Results

Figure 1.



Figure 2.

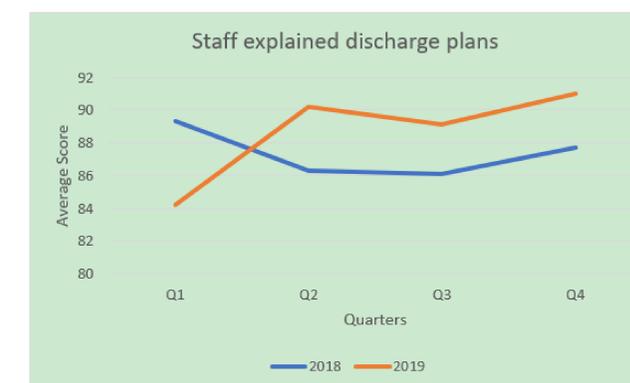
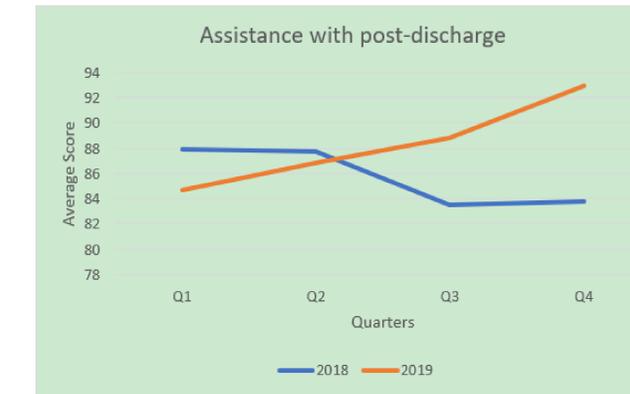


Figure 3.



Figure 4.



Between 35 and 62 patients answered each subsection questions throughout the study period. Figures 1-4 illustrate the improvement of overall discharge score and three subsection scores. Average score increased by 2.6%, 1.5%, 4.4% and 3.0% from 2018 to 2019, respectively.

Conclusions

Our data suggests multidisciplinary discharge huddle improves patient satisfaction in an inpatient rehabilitation setting. The most notable improvement was in "Training given regarding home care". As poor discharge readiness is associated with suboptimal post-discharge coping and readmissions [5, 6], future studies can examine the effect of huddle on long-term rehabilitation outcomes and readmission rates before and after its implementation.

References

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