Improving Patient Flow by Increasing Early Discharges on a Mother & Baby Unit

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**Project: Mother/Baby Early Discharge**

**Last Updated: 6/25/19**

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**Problem/Impact Statement:**

Discharging a percentage of patients early in the day has many advantages. It helps smooth out the patient churn (admissions, discharges and transfers) within the unit throughout the day, creates bed availability for the Labor and Delivery unit to send patients to and has very important patient safety implications. Mother/Baby—like many other hospital units experiences peaks in patient churn in the early to mid-afternoon which causes a myriad of challenges to patients and staff. As a result, Mother/Baby aims to increase the number of discharges by 11am and streamline key discharge planning activities.

**Scope:**

In Scope: All patients that will be discharged from Mom/Baby

Out of Scope: All other patients on the unit that will be transferred to another floor and/or level of care

**Goal/Objective:**

1. 50% of discharges by 11am by the end of FY 20
2. 50% of discharges by 2:00pm by the end of FY 19
3. 50% of discharges by 1:00pm by the end of FY 19
4. 90% of pending discharges by the end of FY 19
5. Average confirmed D/C to D/C < 2 hours by the end of FY 19

**Baseline Metrics/Current State:**

**Root Cause Analysis:**

**Next Steps**

Interprofessional group meets monthly; review KPI goals/progress and their impact on project goals