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

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**Recommended Citation**  
Weir, Faye; Moody, Joy; Cyr, Kathleen; Palleschi, Cathy; Tyzik, Stephen; East, Joseph; Morin, Heidi; Nayak, Suneela; Hanselman, Ruth; and Sparks, Amy, "Improving Patient Flow by Increasing Early Discharges on a Mother & Baby Unit" (2019). *Operational Excellence*. 38.  
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Project: Mother/Baby Early Discharge
Last Updated: 6/25/19

Team Members: Kathy Eyr (Name Mgr, MBC), Jennifer Johnson (RN, MBC), Patty Crosby (RN/UB, MBC), Toby Fingerland (MD, OB/GYN), Helen Wad (Lactation), Michelle Remock (RN, MBC), Swallen Clark (RN/UC, MBC), Hard Morris (Dir, FBC), Faye Weir (VP, PCS), Stephen Tyzik (Op Ex), Justyna Coleman (RN/UC, MBC), Karen Friblich (Pharmacy), Cathy Palleschi (Dir, ROW/CICU), Sharon Economides (Mgr, Lactation/Childbirth Ed), Katie Mauro (Mgr, Service Line Programs), Christina Lush-Wells RN (RN/UC, MBC), Stacy Lamore (RN/UC, MBC), Cathy Collins (Social Work), Mary McNulty (Dir Care Management/Interpreter Svs), Joseph East (Dir, Access and Flow), Sarah Austin (CNL, FBC), Diana Jackson (Pharmacy), Kathy McGarr (MD, Family Practice Service), Joy Moody (VP, PCS), John Pulvino MD (Interim Chief of OB), David Cox (MD, Peds Service), Josh Sinkin (MD, OB/GYN), Cathy Palleschi, Joseph East and Stephen Tyzik

Executive Sponsor: Faye Weir and Joy Moody
Facilitator: Cathy Palleschi, Joseph East and Stephen Tyzik

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 1 am 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) 25% of discharges by 11am by the end of FY19
2) 50% of discharges by 2pm by the end of FY19
3) 75% of discharges by 3pm by the end of FY19
4) 95% of discharges by 4pm by the end of FY19
5) Average confirmed D/C to D/C < 2 hours by the end of FY 19

Baseline Metrics/Current State:

Root Cause Analysis:

Countermeasures:

<table>
<thead>
<tr>
<th>Action</th>
<th>Owner</th>
<th>Due Date</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial meeting with the Executive sponsors and key Leadership members to identify the problem</td>
<td>Joe Moody, Faye Weir, Hard Morris, Cathy Palleschi, Joseph East, and Stephen Tyzik</td>
<td>August 2018</td>
<td>Complete</td>
</tr>
<tr>
<td>Meeting to agree upon the project plan and set a date for the root cause analysis (RCA)</td>
<td>Joe Moody, Faye Weir, Hard Morris, Cathy Palleschi, Joseph East, and Stephen Tyzik</td>
<td>October 2018</td>
<td>Complete</td>
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<tr>
<td>Conduct RCA with a multi-disciplinary team to include MDs, RNs, SW, Lactation, Pharmacy, Care Management</td>
<td>Mom/Baby Team, Cathy Palleschi, Joseph East, and Stephen Tyzik</td>
<td>November 2019</td>
<td>Complete</td>
</tr>
<tr>
<td>Develop and deploy a generic After Visit Summary to live at the bedside for patient teaching during the LOS (with specific to be communicated on day of D/C)</td>
<td>Mom/Baby Team</td>
<td>December 2019</td>
<td>Complete</td>
</tr>
<tr>
<td>Develop an impact/effort matrix to prioritize the opportunities for improvement moving forward</td>
<td>Mom/Baby team, Cathy Palleschi, Joseph East, and Stephen Tyzik</td>
<td>January 2019</td>
<td>Complete</td>
</tr>
<tr>
<td>Educate Staff about project (Mother/Baby &amp; ED) care teams, RNs, MDs, residents, Social Work, Pharmacy, Care Management</td>
<td>Mom/Baby team, Cathy Palleschi &amp; Stephen Tyzik</td>
<td>January 2019</td>
<td>Complete</td>
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<tr>
<td>Development of standard education for first hours of stay in Mother/Baby</td>
<td>Mom/Baby Team</td>
<td>April 2019</td>
<td>Complete</td>
</tr>
<tr>
<td>Development of discharge communication tools for both Mother and Baby that will live in the patient record</td>
<td>Mom/Baby Team</td>
<td>July 2019</td>
<td>In Progress</td>
</tr>
<tr>
<td>Develop a survey to assess staff satisfaction with current D/C teaching process and identify staff specific opportunities for improvement during education</td>
<td>Mom/Baby Team</td>
<td>July 2019</td>
<td>In Progress</td>
</tr>
<tr>
<td>Conduct KPI to track success of implementing hour education checklist</td>
<td>Mom/Baby Team</td>
<td>May 2019</td>
<td>In Progress</td>
</tr>
<tr>
<td>动机:Baby UCs attend the OB team huddle at 7:00 a.m., providing info on next day’s early discharge</td>
<td>Mom/Baby Team</td>
<td>May 2019</td>
<td>In Progress</td>
</tr>
<tr>
<td>Mom/Baby KPI to identify next day’s “early discharge” and track barriers to D/C by 11:00</td>
<td>Mom/Baby Team</td>
<td>May 2019</td>
<td>In Progress</td>
</tr>
</tbody>
</table>

Outcomes:

Next Steps:
Interprofessional group meets monthly: review KPI goals/projects and their impact on project goals.