

Background

- Patients admitted to an inpatient rehab (IPR) later in the day have a higher rate of returning to an acute care hospital¹.
- Late discharges can occupy beds and lead to late admissions to IPR.

Project AIM

- This project seeks to quantify causes of late discharges from an IPR and determine if dividing resident education between two mornings (Wednesday and Thursday 9 am to 10 am) versus one morning (Wednesday 9 am to 11 am) influences late discharges from an IPR, with goal of reducing late discharges on Wednesday by 20%.

Project Design

- Resident education was split from Wednesday 9 am to 11 am to Wednesday and Thursday between 9 am to 10 am. Late discharges, defined as after 12 pm, were quantified for three Wednesdays prior to the change in resident education times and three Wednesdays after the change.
- Case managers, nurses and resident were interviewed at the end of the day to identify the primary of a late discharge. All late discharges were recorded and tabulated in excel.

Figure

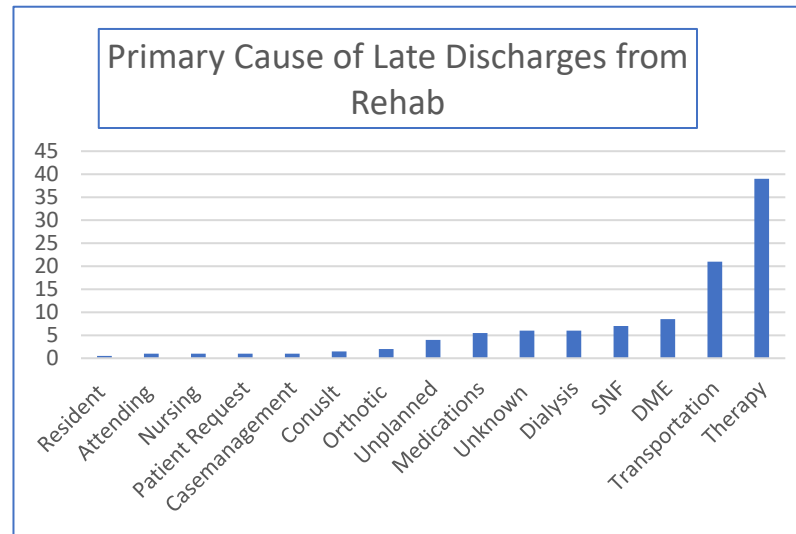


Figure 1: Primary Cause of Late Discharges from Rehab

Results

- Between 09/16/20 and 09/30/20 a total of 17 discharges occurred over three Wednesdays of which 13 were defined as late.
- After resident education was split between Wednesday and Thursday after 09/30/20. A total of 15 discharges occurred on Wednesday between 10/07/20 and 10/21/20 of which 12 were defined as late. Resulting in a 5.71% change increase after the change.
- Details of 105 discharges between 09/16/20 and 10/27/20 (excluding weekends) were analyzed and recorded
- Top 3 primary causes of patient discharging late in order: Therapy on day of discharge, transportation, and DME

Conclusion / Next Steps

- The discharge process is complex involving multiple steps resident education does not appear to be a significant variable contributing to late discharges from an IPR.
- Dividing resident education between two days did not significantly change the rate of late discharges from ECU
- Scheduled therapy on day of discharge was the leading cause of late discharges from the IPR.
- Consider rescheduling therapy on discharge days to the morning to prioritize the discharge process.

References

1. Faulk CE, Cooper NR, Staneata JA, Bunch MP, Galang E, Fang X, Foster KJ. Rate of return to acute care hospital based on day and time of rehabilitation admission. PM R. 2013 Sep;5(9):757-62. doi: 10.1016/j.pmrj.2013.06.002. Epub 2013 Jun 14. PMID: 23770350.