Patient safety is at the heart of every discharge home. In an “always culture”, when it comes to our patients discharging to their next level of care…it’s all about communication.

TACTICS

Discharge at Admission:
We must start with the end in mind, and start talking to our patients and their families about discharge long before their last day with us.

Post-Discharge Help:
We must talk with our patients about the help they will have upon their discharge, and to talk about it starting with their first day in the hospital.

Written Health Information:
Introducing these written materials at admission will allow you to reference them throughout your patient’s stay.

Patient & Family Preferences:
Ask your patients directly about their needs and preferences, and write them down on their communication board.

Teach-Back Method:
Ask the patient to repeat back their instructions and education as if they were teaching you.

Understanding Medications:
Before our patients go home, we need to be sure that they have a clear understanding of what medications they are taking and why they are taking them.

Day of Discharge Process:
If we have done our job well throughout our patient’s stay, all of this information should simply be a review of what they already know.

HCAHPS QUESTIONS

The following HCAHPS questions are addressed in the Discharge training:

1. Did staff talk with you about whether you would have the help you needed when you left?

2. Did you get information in writing about symptoms and health problems to look for when you left?

3. The hospital staff took my preferences and those of my family into account in deciding what my healthcare needs would be when I left the hospital.

4. When I left the hospital, I had a good understanding of the things I was responsible for in managing my health.

5. When I left the hospital, I clearly understood the purpose of taking each of my medications.

TAKE AWAY

Be sure to begin with the end in mind and begin discussing your patient’s discharge plans at admission. Identify a caregiver early; discuss plans, preferences, and goals for your patient’s discharge and continue to keep discharge planning as a topic of discussion throughout their stay.

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