



# Reducing Patient Discharge Delays and Room Turnover Time: Quality Improvement on a Hospital Medicine Unit



Hospital Medicine Group  
UNIVERSITY OF COLORADO **ANSCHUTZ MEDICAL CAMPUS**

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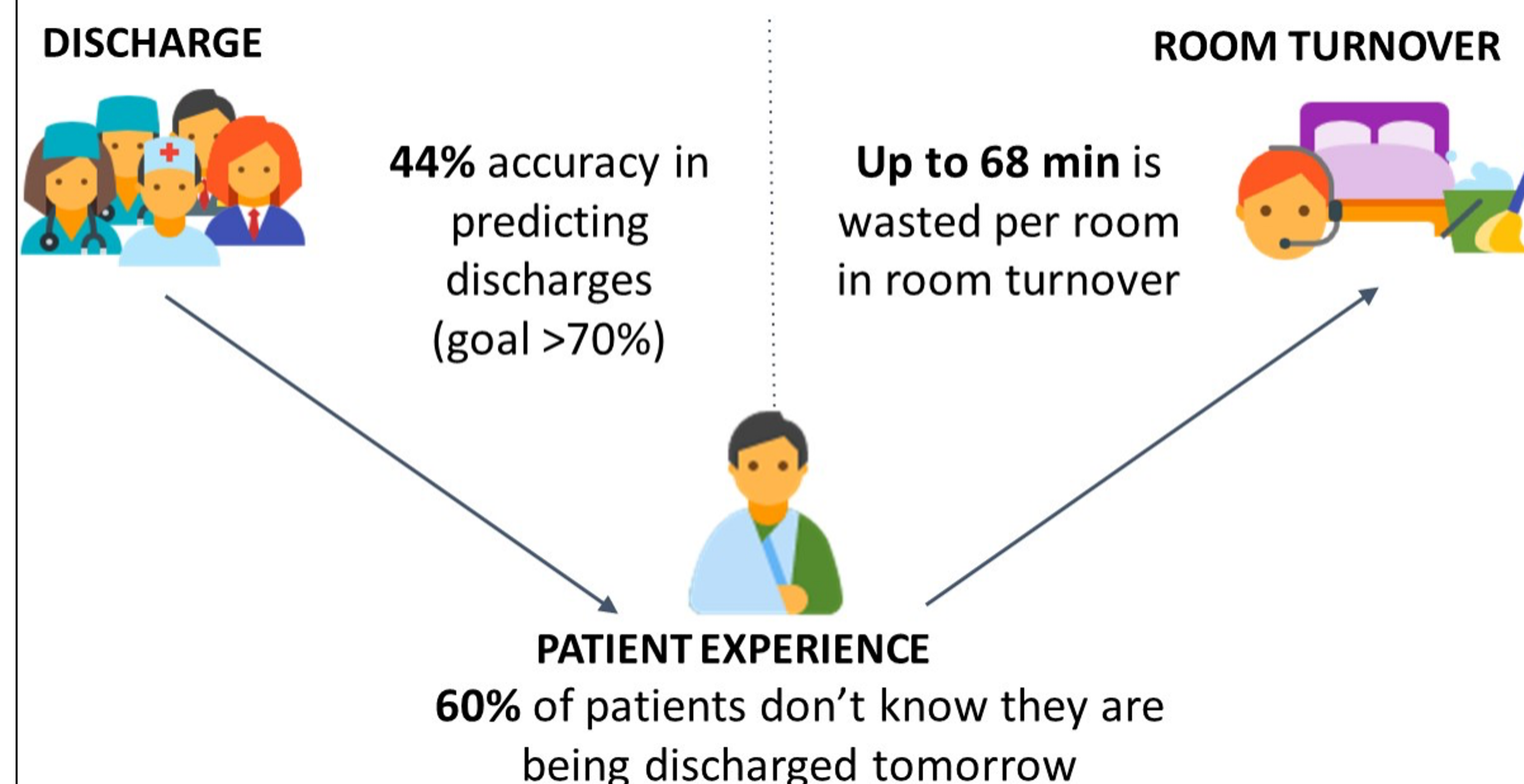
## KEY POINT

✓ We can improve the discharge and room turnover processes by targeting physicians, patients, and systems.

### BACKGROUND

- Hospitals spend an estimated \$2721 for every inpatient day.
- Longer lengths of stay are associated with increased patient mortality and reduced hospital reimbursement, and hinder efficient patient flow through the hospital.
- The average length of stay is impacted by providers, patients themselves, systems, and external factors.

### AREAS FOR IMPROVEMENT



### PURPOSE

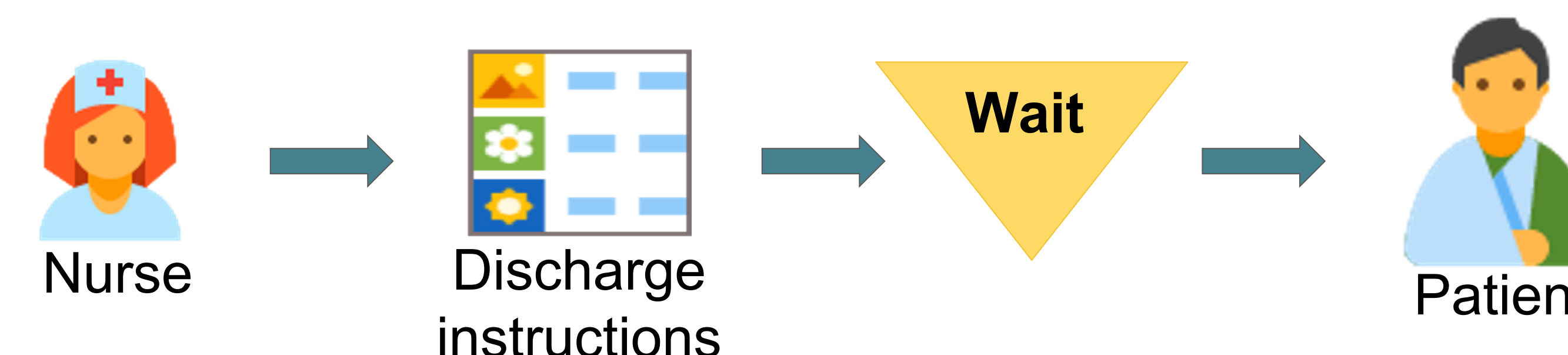
In order to reduce length of stay, we focused on patient and provider barriers to discharge, and inefficiencies in the post-discharge room turnover time.

### RESULTS

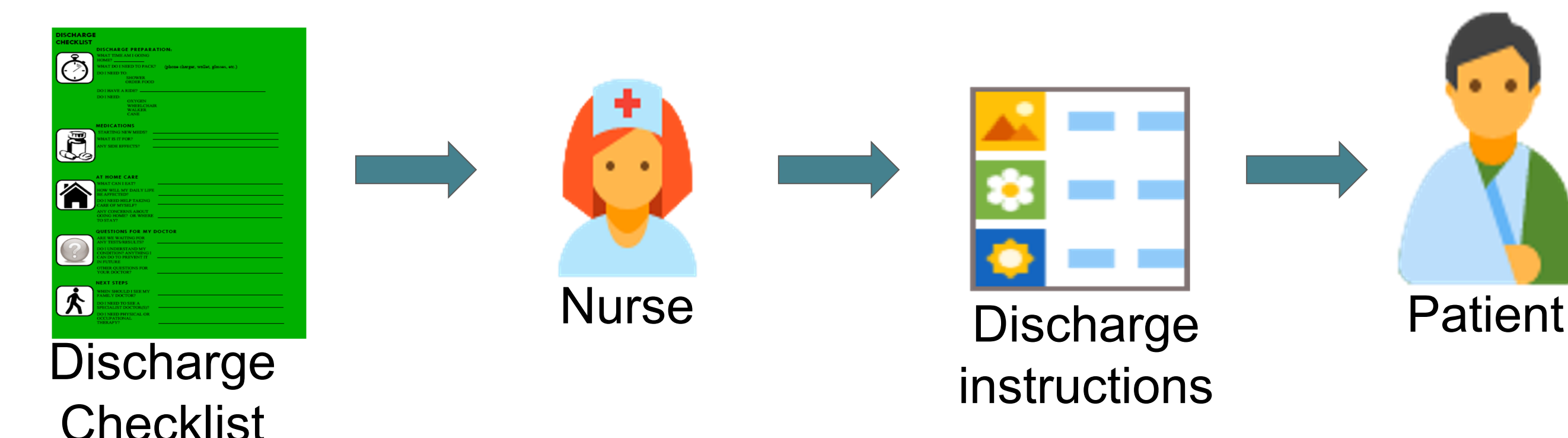
Discharges were most often delayed due to patient readiness, including a lack of awareness of discharge (60% of patients) or lack of transportation from the hospital. More than 69% of patients were discharged on time when provided a Discharge Checklist. From our “stop” sheet, we reduced room turnover time from 192 to 162 minutes, a 16% overall reduction.

#### DISCHARGE CHECKLIST

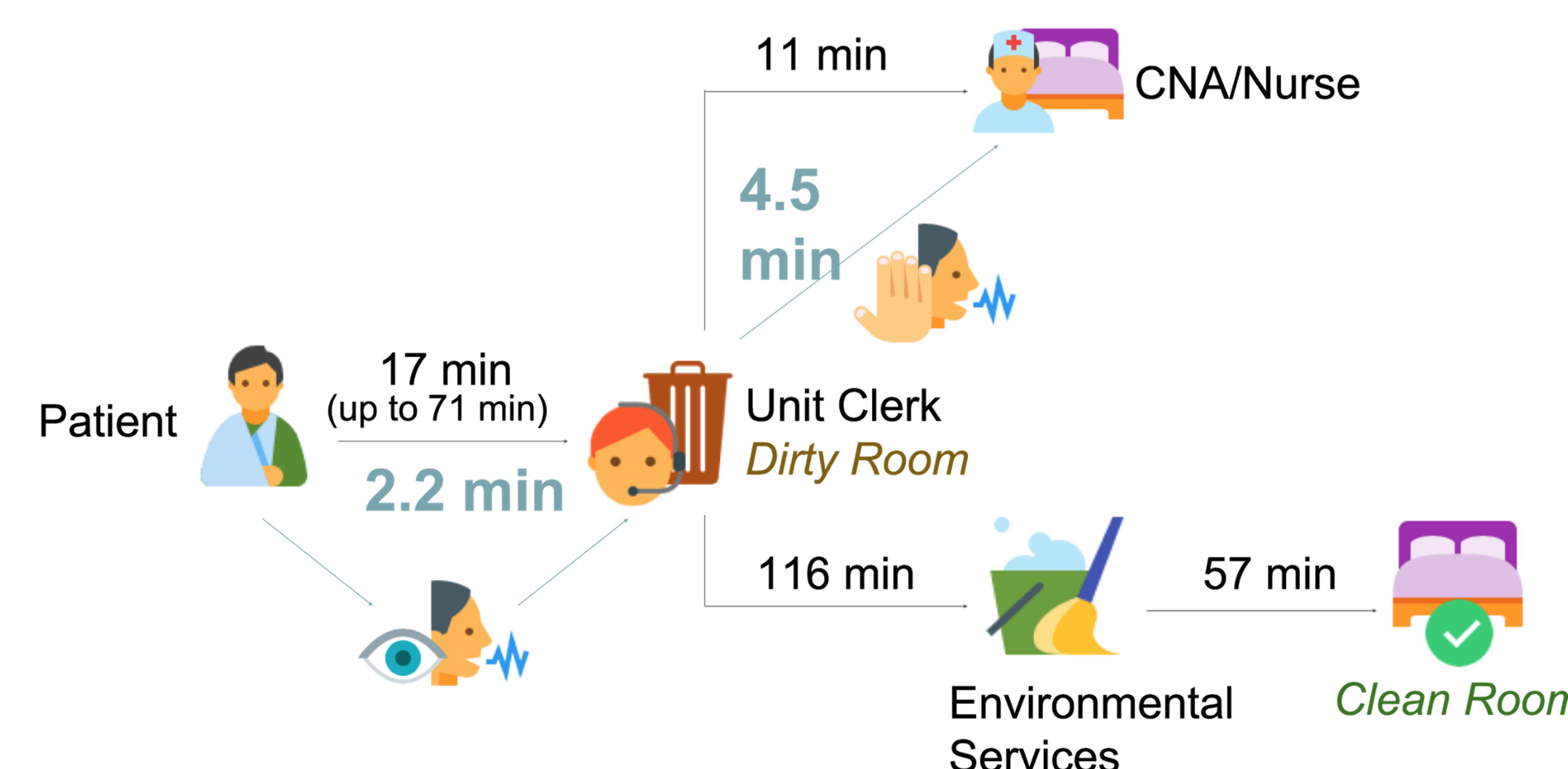
##### Current



##### Proposed



#### ROOM TURNOVER RESULTS



### CONCLUSIONS

- Tracking avoidable discharge delays can improve discharge prediction accuracy. We recommend implementing a standardized identification process.**
- As 60% of patients are unaware of their discharge time, we recommend implementing a patient-centered Discharge Checklist to improve patient readiness and satisfaction.**
- Room turnover time can be reduced and cleaning response times can be improved by addressing communication inefficiencies amongst hospital-wide entities. Efforts to expedite turnover time can include patients notifying a unit clerk of their departure and utilizing CNAs/volunteers to initiate turnover.**

### REFERENCES

- (1)The Kaiser Family Foundation’s State Health Facts. Data Source: 1999 - 2015 AHA Annual Survey, Copyright 2016 by Health Forum, LLC, an affiliate of the American Hospital Association, “Hospital Adjusted Expenses per Inpatient Day.”

### ABOUT THE HISP PROGRAM

The Health Innovations Scholars Program (HISP) is an intensive summer experience for pre-clinical medical students from across the country. As an initiative of the Young Hospitalist Academy Program at the University of Colorado Hospital (UCH), it accelerates mastery of the skills necessary to be a strong physician leaders and healthcare innovators.