2nd Place: Integrated Care Coordination-Case Management Facilitated Multidisciplinary Rounding to Improve Discharge Process

Josh Blatt

Kay Werhun DNP, MBA, RN, NE- BC

Lehigh Valley Health Network, kay_e.werhun@lvhn.org

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Integrated Care Coordination-Case Management Facilitated Multidisciplinary Rounding to Improve Discharge Process

Josh Blatt, Kay Werhun DNP, MBA
Lehigh Valley Health Network, Allentown, Pennsylvania

Introduction

Case Managers (CMs) are trained nurses and social workers who organize non-clinical functions surrounding inpatient stay.

CM Functions:
- Education
- Continuity of Care
- Compliance
- Transition Management
- Utilization Management

Barriers to Discharge:
- Gaps in Communication
- Lack of Role Clarity
- Lack of Resources

Objective: Determine if implementing standardized Case Management multidisciplinary discharge rounds would reduce rounding time, decrease the average patient length of stay (LOS), and meet the Institute for Healthcare Improvement Quadruple Aim (better outcomes, lower costs, improved patient experience, and improved clinician experience).

Methods

- 6-Day program for CM facilitated multidisciplinary discharge rounds on 5 Kasch at Lehigh Valley Hospital–Cedar Crest (LVH-CC)
- Key metrics: rounding length, length of stay

Results

Surveyed 9 medical residents on 5 Kasch about experiences with CM and collaborative rounding.

The above table displays responses to a survey distributed to medical residents on 5 Kasch before the rounding pilot was implemented.

Conclusions

- During the pilot, multidisciplinary rounds lasted an average of 30.2 minutes, an improvement from previous rounds which lasted 35-45 minutes.
- Each patient received standard level of care during discharge rounding.
- Modifying rounding leadership requires high buy-in and training:
  - Providers and nurses may be reluctant to release discussion ownership.
  - Case Managers may be challenged by increased responsibility.
- LOS improvement is not measurable at this time.
- Pilot was too short to determine statistically significant change in LOS.

The above graph shows the length of the daily collaborative discharge rounds during the 6 day pilot from 7/18/18 to 7/25/18.

The above graph shows improvement in the LOS for patients on floors 5N and 6N at LVH–Cedar Crest (LVH-CC) after implementation of CM led multidisciplinary rounds.

Future Recommendations

- Conduct complete LOS study after 1 month implementation of CM led rounding.
- Extend program to additional floors in LVH-CC, modifying script to meet needs and challenges of each team.
- Leverage 5 Kasch CMs to train peers.
- Develop Epic report with relevant discharge information to reduce preparation time for CMs.
- Connect inpatient Case Management and outpatient Care Management to reduce LOS.

References