

I Am Listening: Improving Discharge Instructions Among Same Day Surgery Patients in UCLA Santa Monica PTU/PACU

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Introduction: Research has shown that insufficient discharge instructions affect patients' adherence to treatment plans, delays postoperative recovery, causes inadequate pain control, and is related to an increase in hospital readmissions and emergency room visits (Horstman et al., 2017).

Identification of the problem: Anecdotal reports and complaints obtained from routine post-operative phone calls done by PACU nurses revealed that some patients did not receive adequate discharge instructions, or in some instances received no discharge instructions at all.

QI question/Purpose of the study: The purpose of the study is to achieve the following goals:
1. Ensure that UCLA Santa Monica PTU/PACU's ranking on the Press Ganey Ambulatory Surgery Report, Written Discharge Instructions category will consistently be in the 50th percentile and above by January 2019. 2. Ensure that written discharge instructions are provided by PACU nurses 100% of the time by January 2019. 3. Ensure that Discharge instructions (written and verbal) are provided by PACU nurses 95% of the time or greater by January 2019.

Methods: PTU/PACU UPC introduced a yellow discharge envelope to keep the discharge instructions organized. PTU/PCU UPC supplemented the yellow discharge folder by developing the "Partnering with U" flyer. PTU/ PACU UPC conducted a post-intervention phone calls and collected data from a sample of 50 patients.

Outcomes/Results: Press Ganey Ambulatory Surgery Report results showed an increase in the percentile ranking of UCLA Santa Monica PTU/PACU in the Written Discharge Instructions category from Results from the post intervention phone calls conducted revealed that 68% of patients received the yellow discharge folder and 92% of patients received verbal discharge instructions.

Discussion: The results provide initial evidence that use of the yellow discharge folder has significantly affected UCLA Santa Monica's Press Ganey Standing and increased the frequency that patients receive verbal discharge instructions from their health care providers.

Conclusion: The current study demonstrates that the use of researched discharge techniques that has the ability to improve patients' experiences and ensure proper recovery.

Implications for perianesthesia nurses and future research: PTU/ PACU UPC recommends further monitoring of the Press Ganey percentile rank. Moreover, it is recommended that staff education regarding the new discharge process continue.