Discharge Planning - Evidence Update
January 2012

Wishing you all a very Happy New Year! Welcome to the first 2012 bulletin on Discharge Planning being produced by the HEFT Library Services. This bulletin is produced to support VITAL for Nurses core skills programme developed in the Trust. This issue will highlight evidence published in the previous four weeks. Full text articles can be accessed with your HEFT Athens ID.

**Admission prevention**

Nothing to report.

**Bed management**

**Portion control opportunities: Real time gains for hospital patient throughput**
Goldberg A.J., Robbins S.B.
Streamlining the discharge process to increase bed availability is an outcome measure of multidisciplinary efficiency and effectiveness; it signals that the hospital's systems, people, and processes are aligned to deliver the best patient care possible.

Available in fulltext at EBSCOhost       Available in fulltext at ProQuest (Legacy Platform)

**Capacity planning**

Nothing to report.

**Discharge coordination**

Nothing to report.

**Discharge process**

**Improving the discharge process by embedding a discharge facilitator in a resident team.**
Finn K.M et al
Journal of Hospital Medicine. November; 6(9) p. 494-500
The authors sought to assess whether embedding a nurse practitioner on a medical team to help physicians with the discharge process would improve communication, patient follow-up, and hospital reutilization.
High-quality hospital discharge summaries-general practitioners expectations.
Bally K et al
Therapeutische Umschau. January; 69(1). 5-7
The article emphasises the importance of hospital discharge summaries that ensure treatment continuity after hospital discharge.
Available in fulltext at EBSCOhost

Education and Practice
Nothing to report.

Estimating dates for discharge
Nothing to report.

Multidisciplinary team discharges

Discharge planning: A multidisciplinary challenge
Fong, A et al
Canadian Journal of Cardiology. September 2011; 27(5) p. SUPPL. 1(S361)
A multidisciplinary team developed the Care Map in an attempt to meet the care needs of patients by facilitating communication between care providers. The purpose of this paper is to identify the underutilized sections within the Care Map and analyze the reasons why they were not completed.

Why early discharge in stroke care can be vital for recovery.
Skrypak, M et al
Health Service Journal. 6 January 2012.
Available in fulltext at ProQuest (Legacy Platform)

Nurse-led discharge

The effectiveness of protocol drive, nurse-initiated discharge in a 23-h post surgical ward.
Webster, J et al
International Journal of Nursing Studies. October; 48(10) p. 1173-1179
This article highlights research by randomised controlled trial in Australia evaluating the effectiveness of a protocol driven, nurse-initiated discharge process on discharge time, patient satisfaction and adverse events.

Patient centred discharges

Evaluating a fast-track discharge service for patients wishing to die at home.
Moback, B et al
International Journal of Palliative Nursing. October; 17(10) p. 501-506
This article highlights research evaluating the effectiveness of a new fast-track discharge service (FTDS) for patients wishing to die at home or in a care home. Available in fulltext at EBSCOhost
Readmissions

Managing Hospital Readmissions: An Overview of the Issues
Cornett, B et al
Journal of Health Care Compliance. November; 13(6) p. 5-14
The article focuses on several issues regarding the management of hospital readmissions. It highlights the study by doctors Stephen Jencks, Eric Coleman, and Mark Williams which spurred a focus on finding ways to solve rehospitalizations in the U.S. It discusses the Program for Evaluating Payment Patterns Electronic Report (PEPPER).
Available in fulltext at EBSCOHost

Hospital Perspectives on Reducing and Preventing Readmissions
The article highlights the perspectives of some hospitals on the reduction and prevention of hospital readmission in the U.S. It mentions the increasing trend in hospital-acquired infections (HAIs) that been one of the contributing factors of hospital readmission. The efforts of the hospitals to adopt infection-prevention measures, including patient isolation and handwashing, are also discussed.
Available in fulltext at EBSCOHost Available in fulltext at ProQuest (Legacy Platform)

Incidence of potentially avoidable urgent readmissions and their relation to all-cause urgent readmissions.
van Walraven, C et al
CMAJ Canadian Medical Association Journal. October; 183(14) p. E1067-72
The authors reviewed urgent readmissions to determine which were potentially avoidable and compared rates of all-cause and avoidable readmissions.
Available in fulltext at EBSCOHost Available in fulltext at ProQuest (Legacy Platform)

Early discharge and hospital readmission after colectomy for cancer.
Hendren, S et al
Diseases of the Colon & Rectum. November; 54(11) p. 1362-7
This study aimed to determine whether hospitals discharging patients early had increased readmission rates.
Available in fulltext at Ovid

A comparison of preventable hospitalisations and readmissions in Danish Healthcare system.
Schiotz, M et al
BMC Health Services Research. December; 11 p. 347
The authors investigated population rates of hospitalisation and readmission rates for ambulatory care sensitive, chronic medical conditions in the two systems.
Available in fulltext here.

Can emergency department nurses performing triage predict the need for admission?
Beardsell, I and Robinson, S
The article highlights a research conducted in Southampton into the effectiveness of emergency department (ED) triage for bed management. The accuracy of ED nurses in predicting at the triage stage which patients
would need to be admitted was examined. The value of comprehensive clinical investigation, not appropriate to triage but required for making the judgement, was highlighted.

Available in fulltext at Highwire Press

**Can post-acute care programmes for older people reduce overall costs in the health system?**

Hall, C.J et al  
Health & Social Care in the Community. January; 20(1) p. 97-102

In this paper, the authors review the current evidence on the likely costs and benefits of community based post acute care discharge services and consider whether they are potentially cost-effective from a health services perspective, using the Australian Transition Care Programme as a case study.

**The relationship between hospital admission rates and rehospitalizations.**

Epstein, AM et al  
New England Journal of Medicine. December; 365(24) p. 2287-95

Efforts to reduce hospital readmissions have focused primarily on improving transitional care. Yet variation in readmission rates may more closely reflect variation in the underlying hospitalization rates than differences in the quality of care during and after discharge.

Available in print at Good Hope Hospital Library.

**Simple discharges and Complex discharges**

**Discharge planning program for asthmatic children.**

EkIm, A  
The article highlights that the structure of discharge planning for asthmatic children is consisting of an interview during which information was provided on the nature of asthma, the recognition of risk factors and how to avoid them, on drugs and devices.

**Further Information**

Multiple sources – websites, journals and healthcare databases – have been searched for evidence published in the last four weeks are identified and highlighted here. For a detailed list of sources that have been scanned, please contact Preeti.Puligari@heartofengland.nhs.uk or ext 47836 (Good Hope Hospital)

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