

National Early Discharge Initiative Survey

This survey seeks to understand early discharge initiatives at your institution.

Thank you for participating in our Early Discharge Survey. You will now be entered into a raffle to win 1 of 2 Kindle Fires.

Early patient discharge is a priority for the Division of Hospital Medicine

- Strongly disagree
 Disagree
 Neutral
 Agree
 Strongly agree

What is the target time of discharge?

- Discharge patients by 11 am
 Discharge patients by 12 pm
 Discharge patients by 1 pm
 Other set time
 No set time. The goal is to improve the average patient discharge time

You indicated "other set time." Please state what time you use for your target discharge time?

How important are early discharge initiatives compared to the following initiatives for your Division of Hospital Medicine?

	Not at all important	Of less importance	Of equal importance	More important
Reducing 30-day re-admissions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reducing hospital acquired infection (e.g., catheter associated urinary tract infections)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Improving core measures (e.g., pneumonia)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Decreasing mortality index (observed/expected mortality ratio)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Improving patient satisfaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Improving interpreter use for patients whose preferred language is not English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

For the next section, please indicate how often the described factors act as barriers to early discharges at your institution.

How often do physician related delays* act as barriers to early discharges at your institution?

*Factors related to physicians making clinical decisions for their patients. E.g. outstanding consultation recommendations from specialists, new laboratory abnormalities

- Never
 Rarely
 Sometimes
 Often
 Always

Please specify the exact barrier you face for physician related delays

How often do patient related delays* act as barriers to early discharges at your institution? *Any delays specifically related to patients. E.g., awaiting family transport, ongoing questions

- Never
 Rarely
 Sometimes
 Often
 Always

Please specify the exact barrier you face for patient related delays

How often do non-physician related delays* act as barriers to early discharges at your institution? *Any delays related to the internal system, rather than the physician. E.g., PICC line not placed in time, foley catheter not removed in time, busy case manager

- Never
 Rarely
 Sometimes
 Often
 Always

Please specify the exact barrier for non-physician related delays faced by your institution

How often do external system delays* act as barriers to early discharges at your institution? *Any delays related to processes outside of the hospital. E.g., SNF beds not ready or available, pre-scheduled transport delays

- Never
 Rarely
 Sometimes
 Often
 Always

Please specify the exact barrier for external system delays faced by your institution

How often do institution related factors* act as barriers to early discharges at your institution? *Any delays related to other competing quality initiatives. E.g., concern that earlier discharges will result in increasing 30-day readmissions or length of stay

- Never
 Rarely
 Sometimes
 Often
 Always

Please specify the exact barrier for institution related factors faced at your institution

How often do academic factor delays* act as barriers to early discharges at your institution? *Any delays related to trainees. E.g., competing responsibilities (teaching, conferences, clinic)

- Never
 Rarely
 Sometimes
 Often
 Always

Please specify the exact barrier for academic factor delays faced by your institution

Please list any other barriers to early discharges not already specified and indicate how often they act as barriers to early discharges

For the next section, please indicate whether any of the initiatives have been attempted at your institution to improve early discharge rates and if they were successful in achieving that goal.

Promoting earlier discharge orders (e.g., a "campaign")

- Not attempted
 Very ineffective
 Some ineffective
 Neutral
 Somewhat effective
 Very effective

Please specify if this initiative was sustained, defined as becoming usual practice at your institution.

- Sustained
 Non sustained

Daily multidisciplinary rounds (MDR) focused on earlier discharges

- Not attempted
 Very ineffective
 Somewhat ineffective
 Neutral
 Somewhat effective
 Very effective

Please specify if this initiative was sustained, defined as becoming usual practice at your institution.

- Sustained
 Not sustained

Additional rounds with case management separate from MDR

- Not attempted
 Very ineffective
 Somewhat ineffective
 Neutral
 Somewhat effective
 Very effective

Please specify if this initiative was sustained, defined as becoming usual practice at your institution.

- Sustained
 Not sustained

Preemptive identification of prospective early discharges (e.g., the day prior)

- Not attempted
 Very ineffective
 Somewhat ineffective
 Neutral
 Somewhat effective
 Very effective

Please specify if this initiative was sustained, defined as becoming usual practice at your institution.

- Sustained
 Not sustained

Communicating with patients about their anticipated discharge time on the day prior

- Not attempted
 Very ineffective
 Some ineffective
 Neutral
 Somewhat effective
 Very effective

Please specify if this initiative was sustained, defined as becoming usual practice at your institution.

- Sustained
 Not sustained

Discharge readiness checklist

- Not attempted
 Very ineffective
 Somewhat ineffective
 Neutral
 Somewhat effective
 Very effective

Please specify if this initiative was sustained, defined as becoming usual practice at your institution.

- Sustained
 Not sustained

Utilizing the whiteboard to indicate discharge time for the patient and family

- Not attempted
 Very ineffective
 Somewhat ineffective
 Neutral
 Somewhat effective
 Very effective

Please specify if this initiative was sustained, defined as becoming usual practice at your institution.

- Sustained
- Not sustained

Regular audit and feedback on discharge times

- Not attempted
- Very ineffective
- Somewhat ineffective
- Neutral
- Somewhat effective
- Very effective

Please specify if this initiative was sustained, defined as becoming usual practice at your institution.

- Sustained
- Not sustained

Incentives (e.g., bonuses/pay cuts depending on time of discharge)

- Not attempted
- Very ineffective
- Somewhat ineffective
- Neutral
- Somewhat effective
- Very effective

Please specify if this initiative was sustained, defined as becoming usual practice at your institution.

- Sustained
- Not sustained

Dedicated lean or other similar system initiatives addressing earlier discharges

- Not attempted
- Very ineffective
- Somewhat ineffective
- Neutral
- Somewhat effective
- Very effective

Please specify if this initiative was sustained, defined as becoming usual practice at your institution.

- Sustained
- Not sustained

Please specify any other initiatives not already identified above that have been attempted to discharge patients earlier at your institution and their effectiveness

Are there other initiatives not listed above that you would consider implementing

What are the next steps and/or actions to improving your rates of early discharge for your division?

Is your institution a university-based or community-based hospital?

- University-based Hospital
- Community-based Hospital
- Other

Please specify the type of hospital

Are there Internal Medicine residents present at your Institution?

- Yes
- No