

# Discharge Planning

## For Patients with Substance Use Disorder

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### PROJECT METHODOLOGY

The purpose of the project is to continuously improve the discharge process for patients with SUD using the Plan-Do-Check-Act approach. This method emphasizes continuous improvement and applies to all healthcare processes.

The methodology promotes the following improvements:

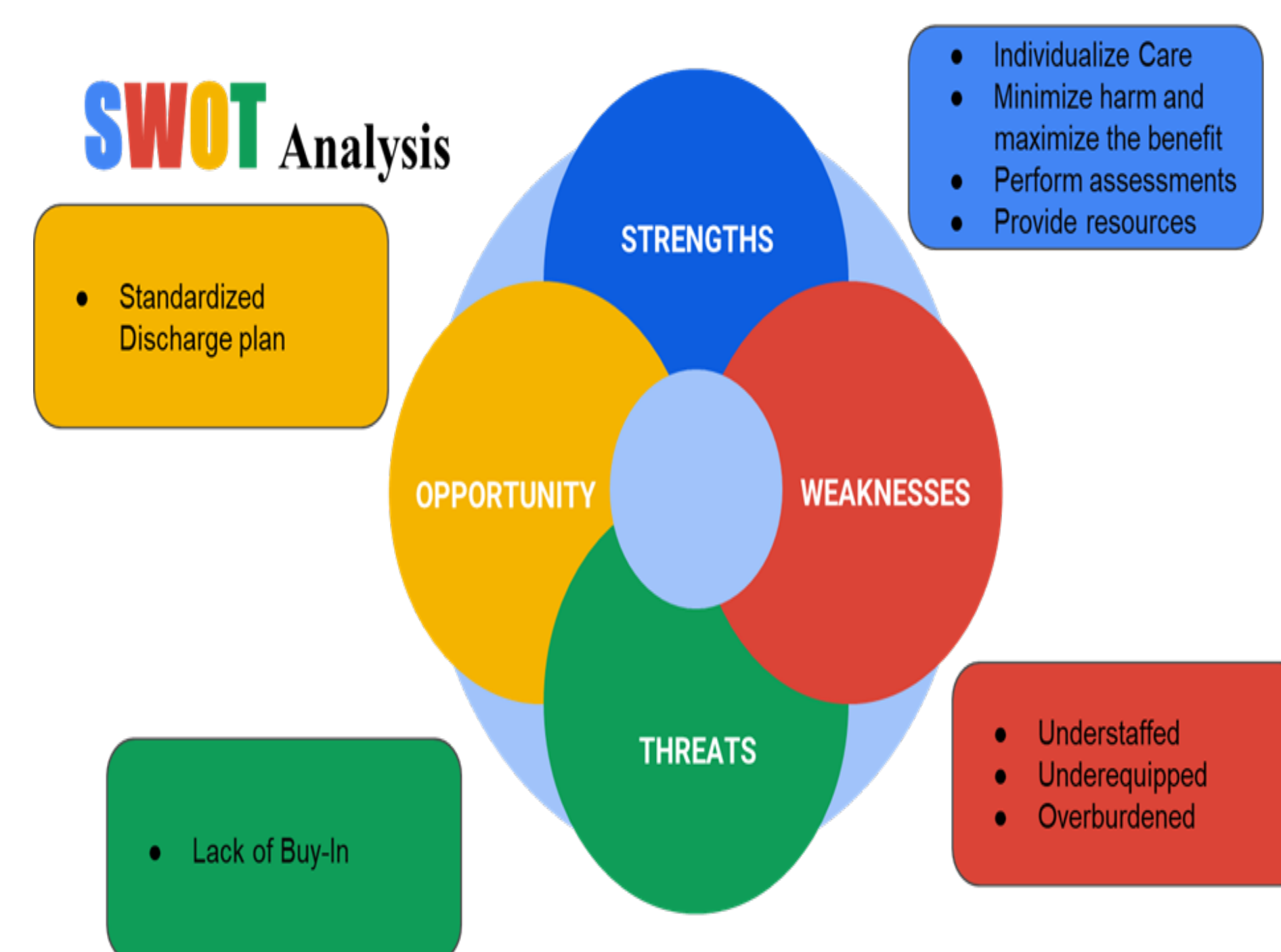
- ❖ Comprehension of standardized discharge instructions for patients with SUD
- ❖ Knowledge of risks for patients with SUD
- ❖ Education for community resources for patients with SUD and their families
- ❖ Patient with SUD outcomes include
  - ❖ Greater ability to become self-sufficient toward recovery
  - ❖ Better communication with healthcare staff in the hospital and community
  - ❖ Lower multiple emergency department visits and hospital readmissions

### PLAN, DEVELOPMENT, AND EVALUATION

This project aims to create a standardized summary when discharging patients with SUD, potentially reducing readmissions and improving clinical outcomes. The following include the deliverables implemented for this project:

- Standardized discharge summary for patients with SUD
- Education for nurses on the unit about the benefits of the standardized discharge summary during a staff meeting with a PowerPoint presentation
- Pre- and post-surveys to measure if they learned the knowledge and skills for discharging patients with SUD

- **What is Substance Use Disorder**
- **Causes**
- **12-Step Program**
- **Signs and Symptoms**
- **Medications**
- **Follow-up Appointments**
- **Community Resources**
- **Support**



### Evaluation

After the patient is discharged, the medical team can have a designated team member to do follow-ups with the patients to ensure they made it to their outpatient appointments.



### THEORETICAL FRAMEWORK

Iowa Model

- The first step is to identify and prioritize the problem of patients with SUD not having standardized discharge papers.
- The second stage is to put together a team to help with the transition. Case management, nursing staff, nursing supervisors, and outpatient resources are all part of the team.
- The third phase in this literature review gathers relevant research and related material.
- Critique and synthesizing research for use in practice is the fourth phase. The fifth stage is to test out the new regimen.
- The sixth step is to implement the practice change.
- The last step is to monitor and analyze the progress and outcome of the patients' discharged with standardized paperwork.<sup>9</sup>

### CONCLUSIONS

This project shows the importance of communication with patients by understanding their discharge instructions, preparing them for a successful discharge process, promoting recovery, and preventing readmissions.

### REFERENCES

1. Bumpas, J., & Copeland, D. J. (2021). Standardizing multidisciplinary discharge planning rounds to improve patient perceptions of care transitions. *The Journal of Nursing Administration*, 51(2), 101-105. <https://doi.org/10.1097/NNA.0000000000000977>
2. Hattangadi, N., Kurdyak, P., Solomon, R., & Soklaridis, S. (2020). Goals of care or goals of life? A qualitative study of clinicians' and patients' experiences of hospital discharge using patient-oriented discharge summaries (PODS). <https://doi.org/10.21203/rs.3.rs-15706/v2>
3. Johannessen, D. A., Nordfjærn, T., & Geirdal, A. Ø. (2020). Substance use disorder patients' expectations on the transition from treatment to post-discharge. *Nordic Studies on Alcohol and Drugs*, 37(3), 208-226. <https://doi.org/10.1177/1455072520910>
4. Nordeck, C. D., Welsh, C., Schwartz, R. P., Mitchell, S. G., Cohen, A., O'Grady, K. E., & Gryczynski, J. (2018). Rehospitalization and substance use disorder (SUD) treatment entry among patients seen by a hospital SUD consultation-liaison service. *Drug and Alcohol Dependence*, 186, 23-28. <https://doi.org/10.1016/j.drugalcdep.2017.12.043>
5. Northeastern Counseling Center. (2021). *Professionals offering hope, help, and healing*. <http://www.nccutah.org/>
6. Pickard, H. (2020). What we are not talking about when we talk about addiction. *Hastings Center Report*, 50(4), 37-46. <https://doi.org/10.1002/hast.1172>
7. SAMHSA. (2020). Mental health and substance use disorders. <https://www.samhsa.gov/find-help/disorders#:~:text=Substance%20use%20disorders%20occur%20when,work%2C%20school%2C%20or%20home>
8. Scott, C. K., Grella, C. E., Dennis, M. L., & Nicholson, L. (2018). Linking individuals with substance use disorders (SUDs) in primary care to SUD treatment: The recovery management checkups-primary care (RMC-PC) pilot study. *The Journal of Behavioral Health Services & Research*, 45(2), 160-173. <http://dx.doi.org/10.1007/s11414-017-9576-3>
9. Weinstein, Z. M., Cheng, D. M., D'Amico, M. J., Forman, L. S., Regan, D., Yurkovic, A., Samet, J. H., & Walley, A. Y. (2020). Inpatient addiction consultation and post-discharge 30-day acute care utilization. *Drug and Alcohol Dependence*, 213, 108081-108081. <https://doi.org/10.1016/j.drugalcdep.2020.108081>

Figure 1: *Freelancing made simple* (2022). We are Indy, Location. <https://weareindy.com>