

**Discharge Instructions - Who, What, When and Where:  
The Development of a Discharge Liaison Role to Improve the Patient Experience and  
Discharge Planning Process Post-operatively**

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**Introduction:** Ambulatory Surgery Patient Experience Scores related to post-operative discharge instructions for FY19 were at the 38<sup>th</sup> percentile, well below the institutional goal of the 50<sup>th</sup> percentile.

**Identification of the problem:** Team dissatisfaction with the inconsistency and unavailability of discharge instructions post-operatively along with low patient experience scores related to discharge instructions led to the development of a dedicated position and process to coordinate communication with the surgeon and parents post-operatively prior to discharge.

**QI question/Purpose of the study:** The goal of the project was to improve the discharge process and communication of discharge instructions with parents/caregivers resulting in improved patient experience scores, improved team member and surgeon satisfaction and decreased discharge delays.

**Methods:** After development of a Process Improvement (PI) Team, the Discharge Liaison Role and responsibilities were established. The Pilot was presented to the peri-operative teams and surgeons, and a time frame was identified. An initial survey was sent to the surgeons to gauge their satisfaction with the current discharge process.

**Outcomes/Results:** By developing and implementing a dedicated Discharge Liaison Role we improved our patient experience scores specific to the question “instructions nurses gave you about caring for your child at home” from the 38<sup>th</sup> percentile in FY19 to the 90<sup>th</sup> percentile in FY20.

**Discussion:** Implementing the Discharge Liaison Role allowed for consistent and thorough post-operative discharge instructions and provided the opportunity for clarification and coordination of any prescriptions or equipment that may be needed.

**Conclusion:** By developing the Discharge Liaison Role our patients, the team, and the surgeons responded positively, and we realized a significant improvement in our Patient Experience Scores.

**Implications for perianesthesia nurses and future research:** The development of a dedicated Discharge Liaison was essential to the improvement of our patient experience scores and the coordination of timely discharge planning for our post-operative patients. Future research is needed to evaluate of the impact on readmission rates, post-operative complications and decreased discharge delays.