

Interdisciplinary DISCHARGE COMMITTEE MEETING MINUTES

Date: 10/6/16

Time: 1200-1300

Location: Pemberwick Conference Room

Recorder: Barbara Leafe, MSN

P=Present, A=Absent, E=Excused

ATTENDANCE							
E	Carol Ann Doherty, BSN	E	Sonia Hunter, BSN	E	Peggy Lennon, MSN	P	Stacey Bardin, BSN
E	Catrina Lozenski, BSN	P	Chris Song, MD	E	Anne Marie McGrory, MSN		
E	Cynthia Dorce, BSN	P	Herb Archer, MD	P	Kim Acevedo, MSN		
E	Myla Anderson, PharmD	E	Yauheni Solad, MD	E	Amy Somboonthum, MSN		
P	Ginny Di Sapio	P	Barbara Leafe, MSN	E	Carol Collins, BSN		

Agenda Item	Presenter	Discussion	Outcome/Follow-Up	Responsible Person
Time 5 minutes Welcome & Approval of Minutes	Herb Archer, MD	Minutes accepted, no additions or deletions	None	All
Time 10 minutes Old Business	All	How have the changes been accepted? <ul style="list-style-type: none"> Kim has attended rounds and requested the red, yellow, green status, the unit secretary updated the status in Epic following rounds Unit secretary paged the residents, hospitalists and case managers 5 minutes before rounds 	Red, yellow, green status is going well Kim reported residents are attending, however late for the 1330 start	All
Time 20 minutes New Business	All	What is next? Unit Secretary <ol style="list-style-type: none"> Prints patient lists with DC status at 0700 Pages Discharge Rounds group page including Residents, hospitalists, case managers Enters updated status, red, yellow, green in Epic Print updated list, place in managers office 	Report out at next meeting Request a report in Epic for analysis of accuracy of prediction of discharge in next 24 hours	All Dr. Archer will send email to Dr. Solad to enter a request to JDAD team Kim and Catrina
Time 10 minutes Recap	Herb Archer, MD	Continue to maintain structure of rounds and add adjustments one at a time once achieved previous adjustment.		

		<p>Nurse manager states there is a need for a consistent person to lead the interdisciplinary rounds. She is not available everyday due to demands as nurse manager and Stacey Bardin proposed the idea of Transition of Care Nurse to replace the position of admission/discharge nurse role.</p> <p>Transition of Care Nurse Role</p> <ol style="list-style-type: none"> 1. Identify Patients with complex care needs 2. Meet with pts/family from admission to D/c 3. Collaborate with team members to overcome barriers to safe transition to home. 4. Prepare patient for transition to home 24hrs prior to discharge. 5. Follow up with patient within 24-48hours post D/c. <p>Discharge Rounds Leader</p> <ol style="list-style-type: none"> 1. Maintain structure of rounds 2. Start and stop on time 3. Document red, yellow, green 4. Hand off documentation to Unit Secretary 	<p>Kim and Catrina</p> <p>Stacey Bardin-Proposal of the Transition of Care Nurse Role on Medicine (Pilot).</p>	<p>Stacey Bardin/Barbara Leafe</p> <p>Transition of Care Nurse role Pilot accepted by the group and Barbara will evaluate process for proceeding with budget-neutral position development and meet with VRC to approve position change.</p>
<p>Agenda next meeting</p>		<p>Review structure of rounds, develop measures and TCN role development and implementation plans.</p>		<p>All</p>

NEXT MEETING WILL BE HELD

DATE: 10/27/16 TIME: 1200-1300 LOCATION: Pemberwick Conference Room