

Moments that Matter: The Discharge Experience

DISCHARGE PLANNING		DISCHARGE PREPARATION					DISCHARGE FROM FACILITY		HOME		
1 Hospitalization	2 Ready for discharge	3 Consults & training	4 Set up follow-up appointment	5 Discuss transit & destination	6 Review Discharge Instructions	7 Pick up supplies	8 Exit facility	9 Travel home	10 Arrive home	11 Follow-up phone call	12 Follow-up appointment
Veteran health care and discharge needs assessment.	Veteran is eager to change into "street clothes" and go home within the day.	Veteran interacts with support services to prepare for discharge.	Schedule follow-up for soon after discharge.	Talk about discharge travel to home or other options.	Discharge Instructions reviewed with the Veteran.	Pick up supplies or receive them in the room before discharge.	Veterans exit the facility.	Travel with support network or VA-affiliated transport to home or other facility.	The next stage of the Veteran engaging in their own health care.	Primary Care RN calls Veteran within 24-48 hours.	PCP or Specialist appointments.
<ul style="list-style-type: none"> Feel cared for by their medical staff. One trusted person to tie everything together. 	<ul style="list-style-type: none"> Hearing "discharge" is exciting and relieving. 	<ul style="list-style-type: none"> Support staff conveniently available in the facility can help solidify recovery procedures. 	<ul style="list-style-type: none"> When appointment is scheduled before the Veteran leaves, anxiety is minimized. 	<ul style="list-style-type: none"> "I really appreciate how they take the time to go through everything." Veterans appreciate that the Social Worker values their whole health. 	<ul style="list-style-type: none"> Support network included in discharge review. Care teams are thorough and patient. 	<ul style="list-style-type: none"> Supplies delivered to the room. Bypass the outpatient pharmacy line (wrist-band, "golden ticket"). 	<ul style="list-style-type: none"> Well prepared and educated about follow-up care. Staff/Volunteer helps the Veteran. 	<ul style="list-style-type: none"> Ride home or to another facility with support network. Public or VA-affiliated transit options. 	<ul style="list-style-type: none"> Being home. Acting upon their discharge instructions in a more comfortable setting. 	<ul style="list-style-type: none"> "I was surprised I was called so quickly." Waiting 24-48 hours after the Veteran has returned home allows them to take stock of their situation. 	<ul style="list-style-type: none"> Physician seen within a few weeks of discharge. Phone consultations. Appointments scheduled prior to discharge.
<ul style="list-style-type: none"> "Talked to so many doctors, I didn't know who was who." Receive (or perceive that they are receiving) conflicting information. Veterans are uncertain of where they are in the discharge process. Support network may lack information. 	<ul style="list-style-type: none"> Mentioning "discharge" primes Veterans' expectation to leave now. "They say I'm leaving, but no one can tell me when." Hours may pass while Veterans sit dressed, waiting to leave. Delay in discharge orders due to provider availability. 	<ul style="list-style-type: none"> Rush of consultation instructions can be difficult to retain. Time spent training on equipment prior to discharge is not always enough. Equipment at home is not always the same as in the medical center. Equipment room closures on the weekend. 	<ul style="list-style-type: none"> When scheduling falls to the Veteran it can cause support network anxiety and inconvenience. 	<ul style="list-style-type: none"> Home or support challenges not always disclosed. Veterans not always eligible for Beneficiary transport. Lack of social/ support services may impact discharge planning or safe transition to home. Ambiguous or late discharge times can impact options. 	<ul style="list-style-type: none"> Instructions are not always easy to read or follow. Support network not always involved in discharge review. Veteran may be dissatisfied if they do not have a follow-up appointment scheduled. 	<ul style="list-style-type: none"> "Wish they had asked me before filling my meds, I have bottles of this prescription at home." Weekend or late discharges may hinder prescriptions being filled. Provision of necessary supplies upon discharge can be challenging. 	<ul style="list-style-type: none"> Different discharge protocols at different facilities can confuse Veterans. When support network is solely responsible for escorting the Veteran, it can be overwhelming and at times, dangerous. 	<ul style="list-style-type: none"> Time of discharge impacts transportation availability. "My ride is waiting on me and has waited for hours." Without transportation a longer stay may be required. 	<ul style="list-style-type: none"> Realization of the lack of Discharge Instruction understanding. May start to question how to take care of themselves at home. Not prepared for physical limitations. Lack of a support network. Readmission could occur due to multiple factors. 	<ul style="list-style-type: none"> For some, too many calls (specialty and PCP) after discharge can feel intrusive, repetitive, and annoying. Friday discharges limit contact until the following Monday. 	<ul style="list-style-type: none"> Unnecessary in-person appointments. "My doctor could have addressed it over the phone." Appointments scheduled too soon to be beneficial.

MOMENT THAT MATTERS

I heard the word discharge and assumed I was about to leave.

When Veterans hear different members of their care teams mention discharge, they develop certain expectations. Not effectively managing these expectations leaves Veterans and their support network angry and frustrated.

MOMENT THAT MATTERS

I'm overwhelmed with all the information. How am I possibly going to remember this at home?

Veterans know the instructions they are receiving are important, but are typically overwhelmed or distracted. They are not always in the mindset to register the deluge of information or think through what care they will require at home.

MOMENT THAT MATTERS

I need to let my family know when to pick me up. I wish the doctor could give me a day and time.

Getting the method, timing, and destination correct can separate a good discharge from one riddled with frustration. Having a good hospitalization experience, followed by a poor facility departure, can damage a Veteran's entire experience.



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Moments that Matter: The Hospitalization Experience



ADMISSION		ORIENTATION		TREATMENT, ASSESSMENT & RECOVERY							DISCHARGE PREPARATION				
1	Assessed by clinician	2	Get oriented	3	Understand care plan	4	Treatment	5	Bedside care	6	Talk to care team	7	Room activities	8	Prepare to leave hospital
The moments leading up to a Veteran's inpatient stay; arriving at the hospital and the process of being admitted.		The Veteran is getting settled in their new environment and becoming familiar with people and surroundings.		The Veteran's first opportunity to engage with their health care team about their care plan. This engagement can either strengthen a foundation of trust or damage it.		This moment encompasses the medical treatment of the Veteran throughout their stay, including: tests, procedures, consults, recovery and observation.		Receiving the care determined by the care plan. This may include: monitoring, medication, pain management, bed comfort and fluid management.		The Veteran is able to interact with their interdisciplinary care team to discuss their health and next steps.		How the Veteran may use their time in their room; visiting with their support network, eating meals, therapy sessions and recreation.		Conversations with the Veteran about planning for their discharge.	
<ul style="list-style-type: none">A positive arrival to the medical center is more likely to set a good tone for the rest of their stay.		<ul style="list-style-type: none">Veterans want to know the daily routine. In some medical centers, a white board communicates essential information and updates in an easy-to-read way.Veterans appreciate when the nurse asks for their preferences.		<ul style="list-style-type: none">Veterans value having a cohesive understanding of their care plan."The caregivers recognized me from my last visit. They were all so friendly."		<ul style="list-style-type: none">Having a well-defined plan and clear instructions reduces confusion about next steps.When a procedure goes well, the Veteran is more likely to feel positive about their experience.		<ul style="list-style-type: none">Small interactions with the nursing staff make a big impression on the Veteran; such as ensuring that gowns are fully wrapped around the Veteran and being spoken to by name.Veterans appreciate being treated with dignity while toileting.		<ul style="list-style-type: none">Veterans want autonomy about their health status. This means directly discussing recovery, needs and pain assessment with the care team.Veterans value regular interactions with their staff."It is all about the small things! They knew what I needed before I did and I never had to ask for anything!"		<ul style="list-style-type: none">"My time here has been relaxing so far. I watch TV and movies for the most part.""Talking with other Veterans on the floor keeps me grounded."Having the guidance of dietitians helps build healthy habits."The people. They know you. They don't wait for you to ask. They will offer to help."		<ul style="list-style-type: none">Hearing "discharge" is exciting and relieving.Veterans appreciate when their care team considers their well-being past their inpatient stay.Veterans often want one trusted point person for their discharge plans.	
<ul style="list-style-type: none">Veterans often arrive to the medical center feeling vulnerable, both physically and emotionally. They may struggle in coming to terms with their situation.		<ul style="list-style-type: none">When there aren't immediate rooms available in inpatient units, the Veteran feels in limbo.Veterans don't want to feel rushed in talking to their nurse for the first time. They want to have access to nurses as they get settled in their rooms.		<ul style="list-style-type: none">If family and friends of the Veteran are left out of care plan conversations, the Veteran feels less supported."My podiatrist was out the door before I could ask him a question.""I am sometimes confused because I hear different things from my day and night nurses, as well as doctors, and this information does not always add up."		<ul style="list-style-type: none">Veterans can get frustrated when specialty tests delay their progress or speed of discharge.		<ul style="list-style-type: none">The beds that alleviate pressure ulcers are uncomfortable for some Veterans. They often choose to sleep in their chair as a result."I asked the team when they were going to check my vitals so I know if I have a block of time to sleep.""My bathroom in the ICU felt like a prison toilet."		<ul style="list-style-type: none">"You have too many middle men."A Veteran may miss doctor interaction if they are asleep during rounding.Medical students sometimes make the Veteran feel like a test subject.Lack of specialty medical support can mean a more complicated care plan and complex daily communications."I talked to so many doctors. I didn't know who was who."		<ul style="list-style-type: none">Physical items such as table and bed don't always work together, causing discomfort and potential danger for Veterans.Veterans can be frustrated with their hospital diets, particularly when it comes to flavor and quantity.TV controls and keyboards can be difficult to understand or operate.Veterans with longer-term stays seek ways to counter boredom in the hospital.		<ul style="list-style-type: none">Once a Veteran hears the word "discharge" they might think they are immediately ready to leave and then become frustrated with perceived delays in their discharge process.Veterans are often uncertain of where they are in the discharge process.	

MOMENT THAT MATTERS

Being in the hospital is overwhelming. Everything is unfamiliar. I don't feel good and I'm worried about my health.

Making certain a Veteran is well-oriented to their new surroundings can provide the foundation for an easier, less stressful inpatient stay.

MOMENT THAT MATTERS

I need to know what tests or procedures are going to be done and why they are being done.

Establishing a trusted relationship between Veterans and providers is essential to a positive experience. Clear and transparent communication is key to alleviating fears and vulnerability.

MOMENT THAT MATTERS

I want time to speak with my nurses and doctors so that I can ask them about my treatment and prognosis.

When a Veteran is able to directly interact with their care team, trust is built, understanding increases and the Veteran feels more in control.

MOMENT THAT MATTERS

If I'm going to spend the night, I want to be comfortable and choose how I pass the time.

Veterans value having control over their daily activities, such as: meal quality and regularity, dignified toileting, bed comfort, and access to entertainment.



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