

# VA INPATIENT DISCHARGE EXPERIENCE JOURNEY MAP

The VA Inpatient Discharge Experience Journey Map represents a common set of moments Veterans experience while they are preparing to leave a VA Medical Center. The moments represented here are not linear. Rather, the map aims to capture a generalized experience, highlighted by the key moments that matter, as well as bright spots and pain points. By understanding the discharge experience from the Veteran's perspective, VA can better understand where to focus time and resources to maximize Veteran trust. This map is meant to be read in continuation from the Hospitalization Experience Journey Map.

**Moments that Matter:** Moments that are likely to have a more significant negative or positive impact than others within the hospital inpatient experience.

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KEY

JOURNEY PHASE

Moment that matters

Journey moment

☀ Bright Spot

⚡ Pain Point

	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
WHAT OCCURS IN THIS MOMENT	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.
BRIGHT SPOTS	<div>☀ Feel cared for by their medical staff.</div> <div>☀ One trusted person to tie everything together.</div>	<div>☀ Hearing “discharge” is exciting and relieving.</div>	<div>☀ Support staff conveniently available in the facility can help solidify recovery procedures.</div>	<div>☀ When appointment is scheduled before the Veteran leaves, anxiety is minimized.</div>	<div>☀ “I really appreciate how they take the time to go through everything.”</div> <div>☀ Veterans appreciate that the Social Worker values their whole health.</div>	<div>☀ Support network included in discharge review.</div> <div>☀ Care teams are thorough and patient.</div>	<div>☀ Supplies delivered to the room.</div> <div>☀ Bypass the outpatient pharmacy line (wrist-band, “golden ticket”).</div>	<div>☀ Well prepared and educated about follow-up care.</div> <div>☀ Staff/Volunteer helps the Veteran.</div>	<div>☀ Ride home or to another facility with support network.</div> <div>☀ Public or VA-affiliated transit options.</div>	<div>☀ Being home.</div> <div>☀ Acting upon their discharge instructions in a more comfortable setting.</div>	<div>☀ “I was surprised I was called so quickly.”</div> <div>☀ Waiting 24-48 hours after the Veteran has returned home allows them to take stock of their situation.</div>	<div>☀ Physician seen within a few weeks of discharge.</div> <div>☀ Phone consultations.</div> <div>☀ Appointments scheduled prior to discharge.</div>
PAIN POINTS	<div>⚡ “Talked to so many doctors, I didn’t know who was who.”</div> <div>⚡ Receive (or perceive that they are receiving) conflicting information.</div> <div>⚡ Veterans are uncertain of where they are in the discharge process.</div> <div>⚡ Support network may lack information.</div>	<div>⚡ Mentioning “discharge” primes Veterans’ expectation to leave now.</div> <div>⚡ “They say I’m leaving, but no one can tell me when.”</div> <div>⚡ Hours may pass while Veterans sit dressed, waiting to leave.</div> <div>⚡ Delay in discharge orders due to provider availability.</div>	<div>⚡ Rush of consultation instructions can be difficult to retain.</div> <div>⚡ Time spent training on equipment prior to discharge is not always enough.</div> <div>⚡ Equipment at home is not always the same as in the medical center.</div> <div>⚡ Equipment room closures on the weekend.</div>	<div>⚡ When scheduling falls to the Veteran it can cause support network anxiety and inconvenience.</div>	<div>⚡ Home or support challenges not always disclosed.</div> <div>⚡ Veterans not always eligible for Beneficiary transport.</div> <div>⚡ Lack of social/ support services may impact discharge planning or safe transition to home.</div> <div>⚡ Ambiguous or late discharge times can impact options.</div>	<div>⚡ Instructions are not always easy to read or follow.</div> <div>⚡ Support network not always involved in discharge review.</div> <div>⚡ Veteran may be dissatisfied if they do not have a follow-up appointment scheduled.</div>	<div>⚡ “Wish they had asked me before filling my meds, I have bottles of this prescription at home.”</div> <div>⚡ Weekend or late discharges may hinder prescriptions being filled.</div> <div>⚡ Provision of necessary supplies upon discharge can be challenging.</div>	<div>⚡ Different discharge protocols at different facilities can confuse Veterans.</div> <div>⚡ When support network is solely responsible for escorting the Veteran, it can be overwhelming and at times, dangerous.</div>	<div>⚡ Time of discharge impacts transportation availability.</div> <div>⚡ “My ride is waiting on me and has waited for hours.”</div> <div>⚡ Without transportation a longer stay may be required.</div>	<div>⚡ Realization of the lack of Discharge Instruction understanding. May start to question how to take care of themselves at home.</div> <div>⚡ Not prepared for physical limitations.</div> <div>⚡ Lack of a support network.</div> <div>⚡ Readmission could occur due to multiple factors.</div>	<div>⚡ For some, too many calls (specialty and PCP) after discharge can feel intrusive, repetitive, and annoying.</div> <div>⚡ Friday discharges limit contact until the following Monday.</div>	<div>⚡ Unnecessary in-person appointments. “My doctor could have addressed it over the phone.”</div> <div>⚡ Appointments scheduled too soon to be beneficial.</div>

THIS IS A MOMENT THAT MATTERS BECAUSE...

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.

WHAT THE SURVEY WILL ASK

MEASURING EQUITY, TRANSPARENCY & EFFICIENCY

When I was notified that I would be leaving the hospital, it was clear what needed to be done and how much time it would take.

Questions are asked on a Likert scale of 1 to 5

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.

MEASURING QUALITY & EASE

Efforts were made to have my family, friends, or caregivers involved in the explanation of my discharge instructions, when desired.

The instructions that I received before I left the hospital were easy to understand.

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.

MEASURING EMPLOYEE HELPFULNESS & QUALITY

I understood my transportation options before I left the hospital.

MEASURING TRUST

I trust VA for my healthcare needs