

IMPROVING DISCHARGE PROCESS

Re-Engineered Discharge Vascular Pathway (REDVP): An approach to improving quality of
care transition of patients with peripheral arterial diseases

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On my honor I pledge that I have neither given nor received any unauthorized assistance on this paper. April 25, 2021, Wendy Lobo

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Abstract

Background and purpose: Variations in discharge planning lead to poor transition from hospital to home among patients undergoing lower extremity bypass (LEB). The purpose of this project was to evaluate the implementation of an adapted Re-Engineered Discharge Vascular Pathway (REDVP), a clinical pathway restructuring the discharge process for patients undergoing LEB.

Methods: This quality improvement(QI) project used a two-group pre-and post-intervention design and convenience sampling of patients admitted after LEB from October 2020 to December 2020. Outcome measures included overall quality of care transition score, satisfaction of patients, hospital LOS, and 30- day readmission rate.

Results: A total of 21 participants who met eligibility criteria were included. Eleven patients were identified during the pre-intervention phase, and 10 patients received the REDVP intervention. Care transition scores increased from 66.7 to 100 points ($p= 0.0001$). Satisfaction scores increased from 73% to 100% ($p = 0.001$). The percentage of patients who stayed in the hospital > 7 days was lower in the intervention group (40%) compared to the preintervention group (90.9 %) ($p = 0.02$). Similarly, the 30-day readmission rate was also found to be lower in the intervention group (10%) compared to the re-intervention group (18%) ($p=0.54$).

Conclusion: REDVP aids in optimizing discharge flow for patients undergoing lower extremity bypass surgery. REDVP resulted in improved outcomes; care transition scores, satisfaction scores, and length of stay.

Implications: The discharge process is essential to making sure patients feel prepared and comfortable when transitioning from hospital to home. This QI shows that clinical pathways such as REDVP aid in streamlining the discharge process by reducing variations and improving outcomes.

Keywords: process redesign, clinical pathway, Lower extremity bypass, vascular surgery, RED tool kit