

Insight into Unnecessary Prolonged Hospital Stays

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Title: Insight into Unnecessary Prolonged Hospital Stays

Background: Prolonged patient stays can have negative implications for the patient, staff and the hospital. Prolonged stays occur when a patient is medically cleared for discharge but still needs to remain in the hospital because another suitable care setting is not available. These delayed hospital discharges have been associated with a decreased ability to participate in activities of daily living (ADLs), frailty, increased age, high comorbidity, cognitive impairment, dependency, and behavioral challenges (Everall et al., 2019). There are many instances where patients are discharged prematurely due to the need of beds for patients coming from the emergency department. This results in a greater number of unplanned hospital readmission among the patients who are prematurely discharged when the hospital is full (Blom et al., 2015). Both delayed hospital discharges and early hospital discharges have impacts on the outcomes of the patient's health, associated costs, and overall effects on the patients, providers, and organizations (Everall et al., 2019).

Project Aim: The aim of this project is to inform healthcare professionals about the increase in unnecessary prolonged patient stays, which is defined as a stay longer than two weeks. By exposing this subject, we can further shed light on the negative impacts it has on the hospital, patient, and nurses. Our goal for this project is to raise awareness about factors that cause prolonged length of stay, such as placement unavailability, support network, and living safety at home (Jette et al., 2003).

Method: This podcast will be supported by evidence-based studies and personal insights and experiences from nurses on R2.

Findings/ conclusions/implications for practice: In recent years, there have been many contributing factors for why patients are having prolonged hospital stays. Eriksson et al. (2018)

found that nurses feel a prolonged stay can negatively impact both the nurse and the patient.. Managers should be receptive to the concerns of patients and work to provide safety and correct placement for all patients (Goulding et al., 2015). Everall et al. (2019) found that patients who had a delayed discharge felt that nurses favored “preferred” patients and did not receive proper care. Patients also felt that they were waiting too long and that they were being socially isolated because of the physical hospital environment.

Implementation Plan: The project will be implemented on R2 at Maine Medical Center. The staff at MMC already tracks patient length of stay. That data, together with evidence from the studies referenced, will be used to generate questions for the nurses about their firsthand knowledge, experiences, and feelings about delayed patient discharges and extended lengths of stay. Nurse interviews will be recorded for a podcast to be posted to YouTube and shared with unit staff.

Method of Evaluating Outcomes: In making this podcast, we hope to affect nurses’ attitudes towards the overall problem of extended patient length of stays and the information provided on the podcast. The number of YouTube views in the two weeks following its post may provide evidence on the reach of this podcast and serve as an estimate of the impact of the project.

References

- Blom, M. C., Erwander, K., Gustafsson, L., Landin-Olsson, M., Jonsson, F., & Ivarsson, K. (2015). The probability of readmission within 30 days of hospital discharge is positively associated with inpatient bed occupancy at discharge--a retrospective cohort study. *BMC Emergency Medicine*, *15*, 37. <https://doi-org.une.idm.oclc.org/10.1186/s12873-015-0067-9>
- Eriksson, J., Gellerstedt, L., Hillerås, P., & Craftman, Å. G. (2018). Registered nurses' perceptions of safe care in overcrowded emergency departments. *Journal of Clinical Nursing*, *27*(5-6), e1061–e1067. <https://doi-org.une.idm.oclc.org/10.1111/jocn.14143>
- Everall, A. C., Guilcher, S., Cadel, L., Asif, M., Li, J., & Kuluski, K. (2019). Patient and caregiver experience with delayed discharge from a hospital setting: A scoping review. *Health Expectations*, *22*(5), 863–873. <https://doi-org.une.idm.oclc.org/10.1111/hex.12916>
- Goulding, L., Adamson, J., Watt, I., & Wright, J. (2015). Lost in hospital: A qualitative interview study that explores the perceptions of NHS inpatients who spent time on clinically inappropriate hospital wards. *Health Expectations*, *18*(5), 982–994. <https://doi-org.une.idm.oclc.org/10.1111/hex.12071>
- Jette, D. U., Grover, L., & Keck, C. P. (2003). A qualitative study of clinical decision making in recommending discharge placement from the acute care setting. *Physical Therapy*, *83*(3), 224–236. <http://dx.doi.org.une.idm.oclc.org/10.1093/ptj/83.3.224>