

Expanding Hospital Wide Utilization of the Problem List at Discharge for Inpatient Units

SMART AIM

Increase the percentage of inpatient problem list that are updated within 24 hours of discharge from 35% to 85% by 8/2025.

Increase the percentage of inpatient problem lists marked as reviewed at discharge from 14% to 85% by 8/2025.

GLOBAL AIM

Improve the accuracy of the problem list and clinical documentation

DRIVERS

A: Clinician knowledge and consensus around problem list maintenance

B: Standard problem list workflow

C: Provider engagement around the problem list

D: Epic enhancements for the problem list

E: Optimal problem list documentation

INTERVENTIONS (LOR #)

Provide education on what belongs on the problem list at admission and discharge (A, B, C, E) (LOR 1)

Education on the mark as reviewed button in Epic (A, B, C, E) (LOR 1)

Share the data with division staff (individualize and/or division data) (B, C) (LOR 1)

Creating problem list visual reminders (B, D, E) (LOR 1)

Add a prompt to the discharge summary to update and review the PL (B, D) (LOR 2)

Make the PL a quality incentive (C) (LOR 1)

Create a favorites list for the most common problems (B, D) (LOR 1)

Develop hospital Wide Problem List Policy (A, B, E) (LOR 1)