


Strategy Tree Sample

Goal: By end of Quarter 3 2023, ensure 90% of discharges to home include a discharge summary and medication reconciliation to primary care physician (PCP).

Strategy: Improve communication with PCP during the discharge process from skilled nursing facility (SNF) to home to reduce readmissions.

Tactics	Tasks	Who and When	Resources Needed
1. Engage leadership in discharge improvement plan.	A. Schedule a meeting with leadership. B. Prepare an agenda to review data and strategy. C. Identify one SNF unit to pilot.	A. Sally— 3/10 B. Joe—3/16 C. Mary—3/20	• Agenda template
2. Establish a process to ensure PCPs have received discharge summary and medication reconciliation.	A. Complete an audit for patterns/ trends of incomplete discharge summaries. B. Develop a data dashboard. C. Develop a PCP checklist.	A. Mary—4/10 B. Mary—4/25 C. Brenda—4/30	• Audit tool • Data dashboard template • Checklist
3. Educate nursing/discharge staff on implementation of workflow and checklist.	A. Create roles and responsibilities. B. Provide training on new the process and tool. C. Review discharge summary regulations to ensure compliance.	A. Sally—5/10 B. Joe—5/20 C. Mary—5/30	• Workflow outline • Discharge checklist • Training slides • Handouts • Federal regulations
4. Monitor and evaluate performance.	A. Develop and share weekly progress reports B. Observe three staff members to monitor new workflow and collect feedback C. Utilize observation findings to evaluate process effectiveness.	A. Sally—6/05 B. Brenda—6/15 C. Mary—COB Friday every week	• Weekly progress report template • Observation findings

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