Driving down readmissions with dynamic discharge follow up team

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Challenged by Readmissions

- HMC 30 day readmissions
- Bundled Readmissions

- 2013
- 2014
Discharge Calls

Stroke Outpatient Case Manager
- RN calls within 48 hours
- 2016: connected with 61% of patients (n=233)

Stroke Transitions of Care Pharmacist
- Calls within 7 days
- 2016: connected with 83% of patients (n=321)

53% received both calls (n=208)

25% (n=97) unable to reach after 3 attempts
Discharge call trends

% Discharge Phone Calls to home discharges 2016

- Nurse
- Pharmacist
2016 % Discharge Phone Calls to patients dc to home

- % Connected by RN or Pharmacist
- % Unable to reach

Jan (n=25), Feb (n=34), Mar (n=23), Apr (n=29), May (n=32), June (n=37), July (n=35), Aug (n=19), Sept (n=40), Oct (n=44), Nov (n=29), Dec (n=39)
Discharge Call Content

• Review follow up appointments/tests
• Stroke Education
• Medication Review
  – Strategically wait for PCP visit to occur
  – Pharmacist to Pharmacist calls to rehab started

Secondary Gain:
Decreased rehab readmissions
Decreased no-show rate at clinic
Decrease Readmissions

- HMC 30 day readmissions
- Bundled Readmissions

2013 2014 2015 2016

- [Graph showing percentage decrease in readmissions]
Stroke Patient/Family Consultant

• Started in Spring 2017
• Rounds on stroke patients/families
  – Communicates with social work and care coordination
  – Communicates unique needs or circumstances to discharge follow up team
  – Post-discharge contact
• **Impact on patient satisfaction scores:** less gaps in discharge process, increased communication among team members
• **Impact on staff satisfaction:** acknowledgement of positive experiences, institution awards