

Driving down readmissions with dynamic discharge follow up team

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Presenter Disclosure Information

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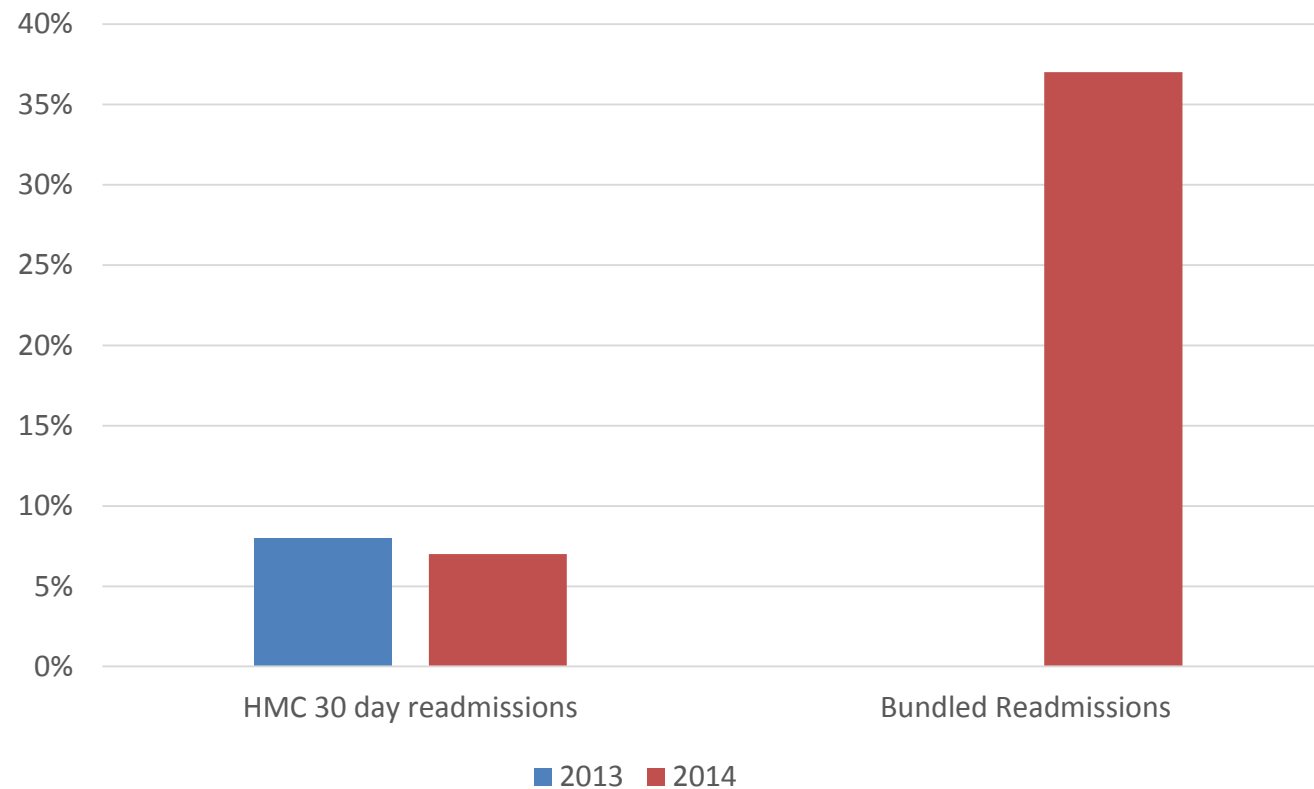
FINANCIAL DISCLOSURE:

A. Richardson: None; K. Morrison: None; R. Light: None; A. Miller: None

UNLABELED/UNAPPROVED USES DISCLOSURE:

A. Richardson: None; K. Morrison: None; R. Light: None; A. Miller: None

Challenged by Readmissions



Discharge Calls



Stroke Outpatient Case Manager

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



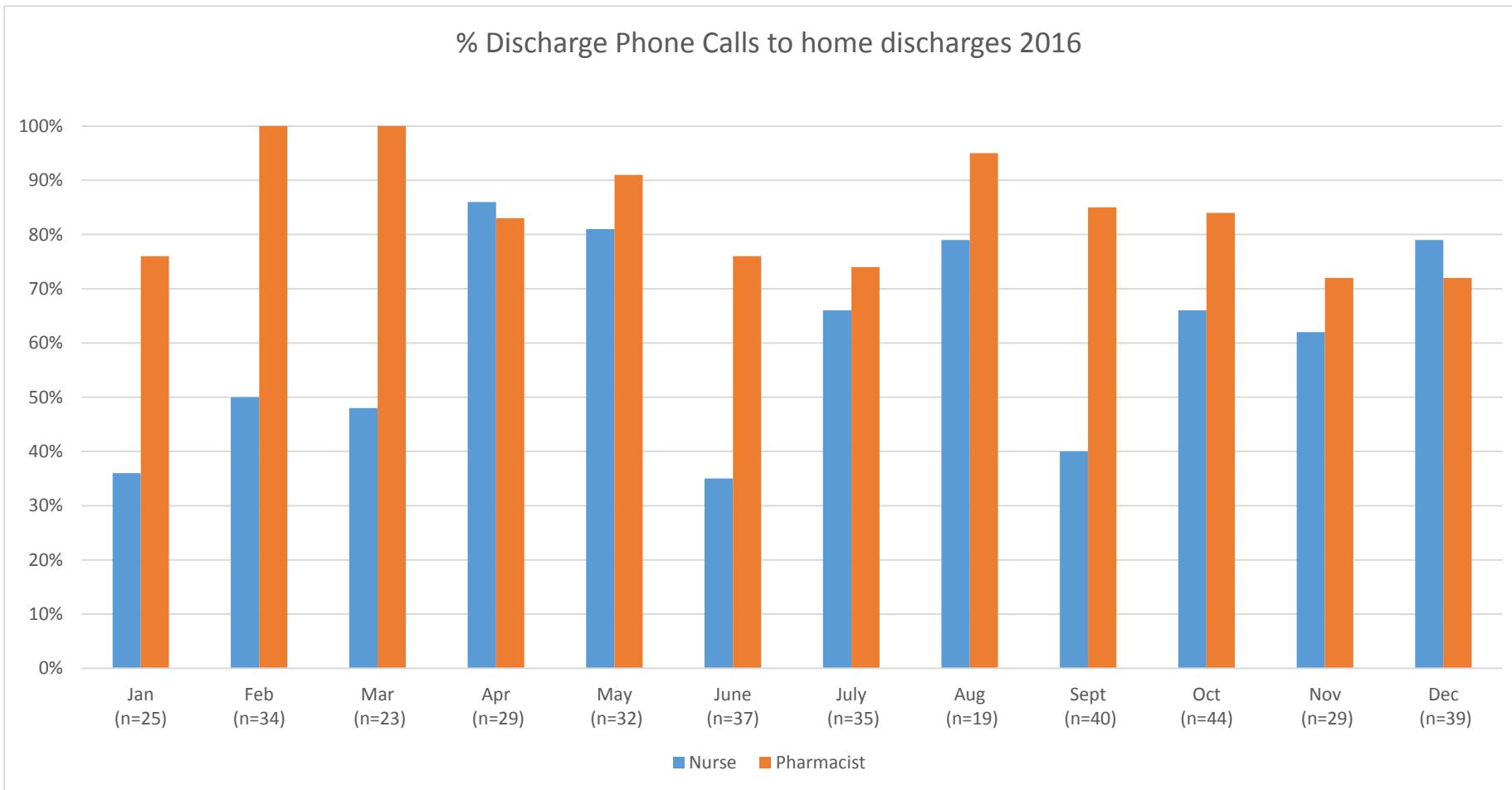
Stroke Transitions of Care Pharmacist

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

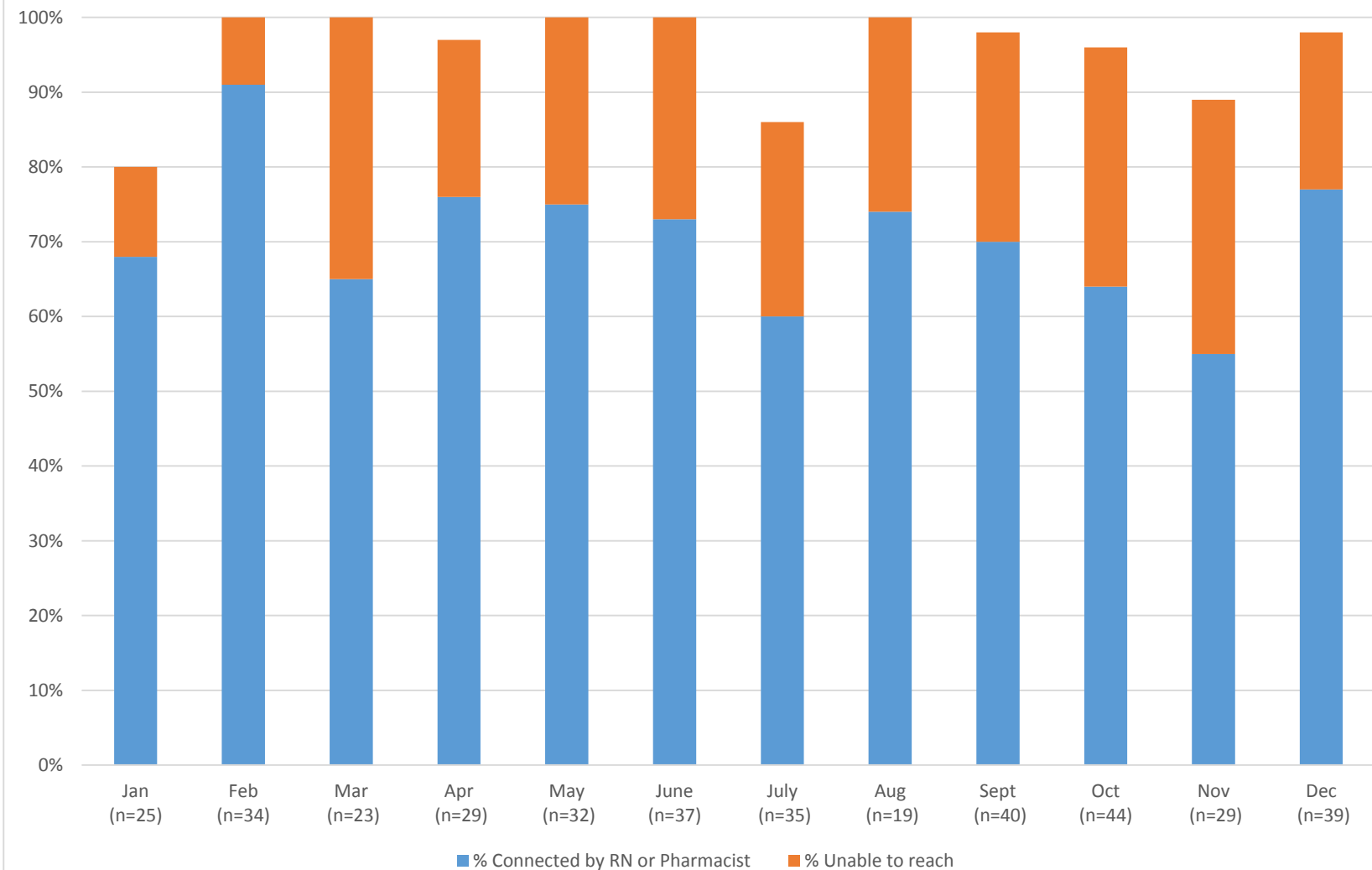
53% received both calls (n=208)

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

Discharge call trends



2016 % Discharge Phone Calls to patients dc to home



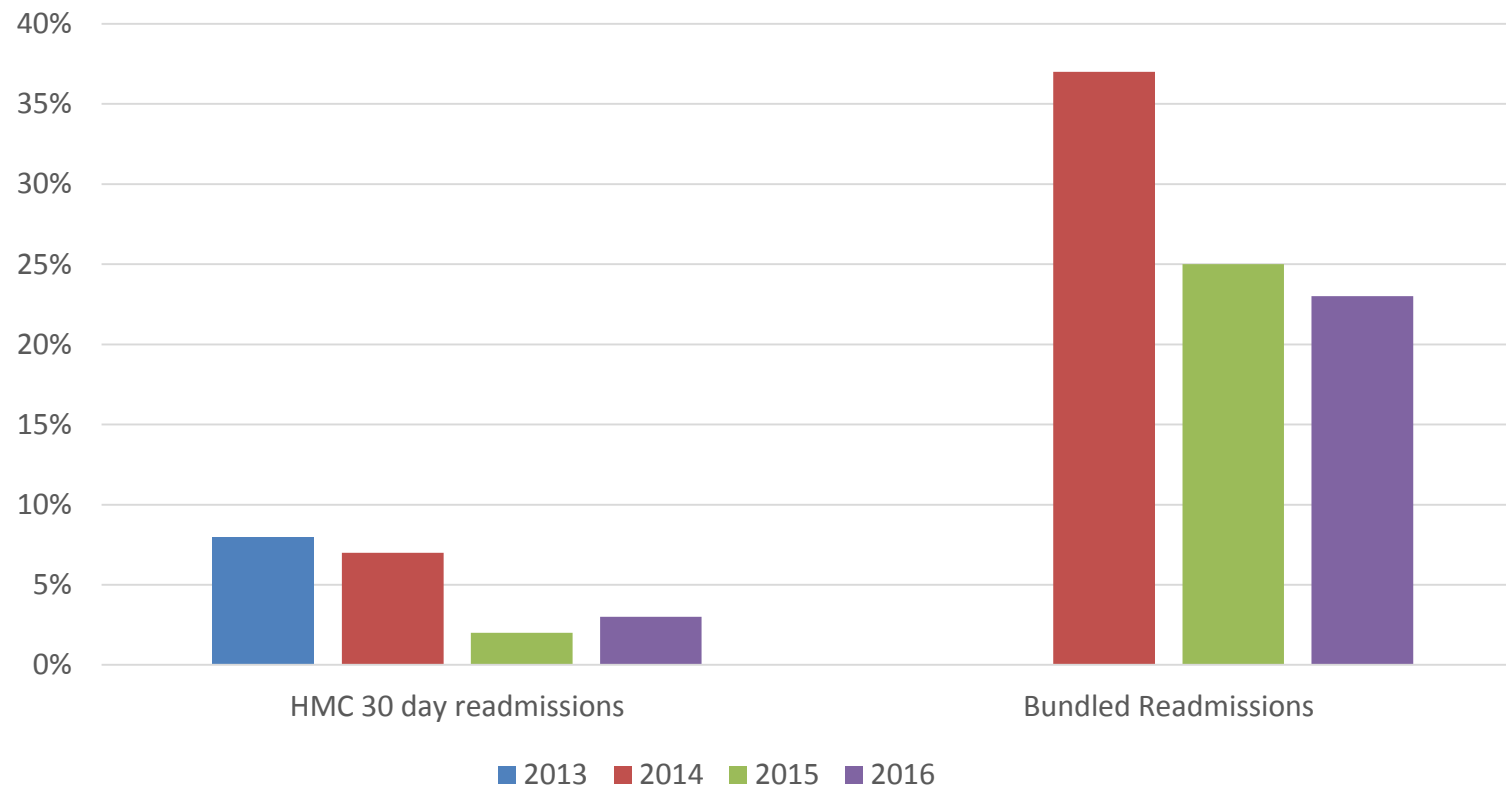
Discharge Call Content

- 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



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

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QUESTIONS?