

Nursing Led Call Back Model To Improve Follow Up Compliance With Providers After Emergency Department Visit

AIM: Fast Track(FT) and Clinical Decision Unit(CDU) patients discharged from the MGH Emergency Department will show an increase in engagement in follow up with providers within 7 days of discharge from 48 % to 60 %. Engagement in follow up is evidenced by electronic medical record.

Intervention

Presently, nurses provide teach-back discharge instructions to ED patients, then call patients 24-48 hours post discharge to remind patients to engage in follow up.

Utilizing a Plan Do Study Act (PDSA) methodology, this discharge strategy was modified to add a second patient-reminder phone call, administered by HIPAA-certified hospital volunteers 72 hours post-discharge.

Volunteers are provided with a patient list, script, and nurse oversight to eliminate barriers to follow up and connect patient with needed resources.

Adherence with follow-up was monitored through the electronic medical record (EMR) with a positive outcome defined as documented patient contact with provider within 7 days of ED discharge.

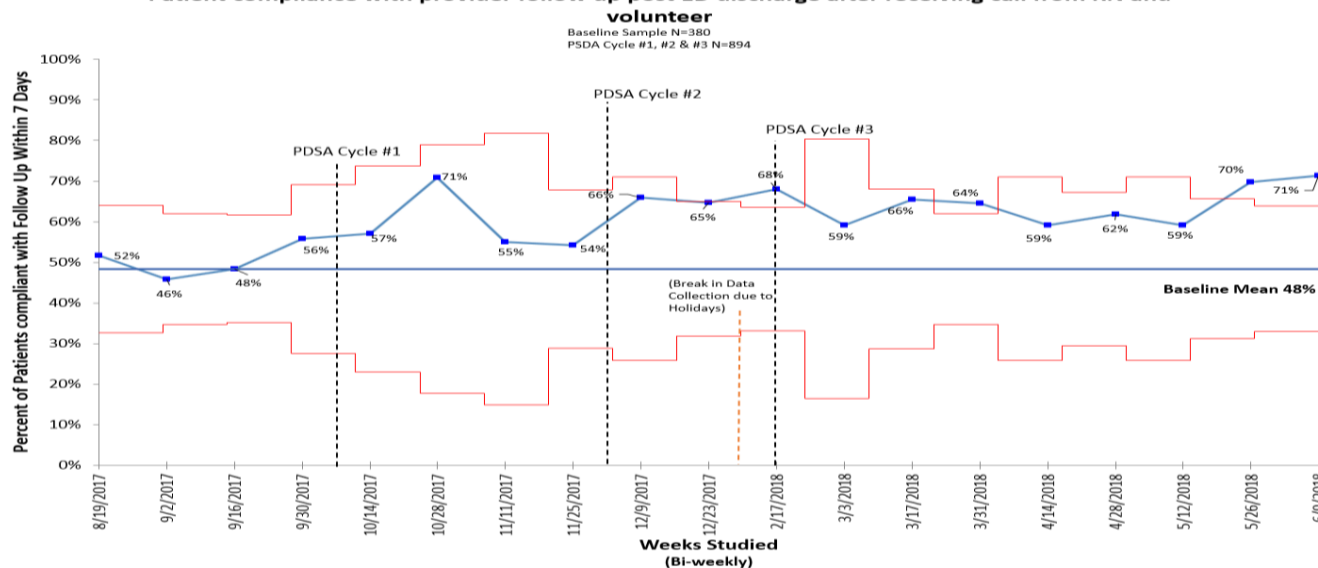
TEAM:

Gloria Salazar, MD
Cassie Kraus, BS
Dawn Williamson, RN APRN DNP
Gopi Dhokai, LMHC
Dianne Farley, RN
Virginia Butler, RN BSN
Jeffery Chambers, RN
Alison Griffin, RN BSN
Kimberly Topping, RN BSN
Urusa Sheikh, BS
Marianne Ditomassi, RN DNP MBA NEA-BC FAAN
Jacqueline Nolan, MPH
PROJECT SPONSORS:
Maryfran Hughes RN BSN MSN NE-BC

RESULTS: 894 patients were evaluated between October 2017 and June 2018.

Engagement with provider follow up increased from 48% (n=182) during pre-implementation period, to 63%(n=563) in post-project implementation

Patient compliance with provider follow up post ED discharge after receiving call from RN and volunteer



IMPLICATIONS FOR PRACTICE

Further studies are needed to determine the impact of this model on patient engagement and re-admission rates.

Project continues to be sustained with designated volunteers working with nurse oversight.

This cost effective model can be implemented by other institutions seeking to improve post ED follow-up.

Team member slide

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