

Hospital for Joint Diseases

Rusk Rehabilitation

# Ensuring Patient Satisfaction Through Discharge Follow-up Phone Calls in a Neurological Rehabilitation Unit

MAGNET RECOGNIZED

AMERICAN NURSES CREDENTIALING CENTER

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# Background

- ❖ Press Ganey scores for "Staff Explained Discharge Plans" 3Q13,"and Nurses Instructions Regarding Homecare Meds were below the national benchmark in 2Q13.
- The nursing staff needed to find a solution for developing a patient-centered process for discharge.
- ❖ The transitional care literature reveals that when faced with reality of returning to life at home, patients and their caregivers often feel anxious and uncertain despite being provided with discharge instructions.
- The strategy of post-discharge phone calls was identified.

## Objectives

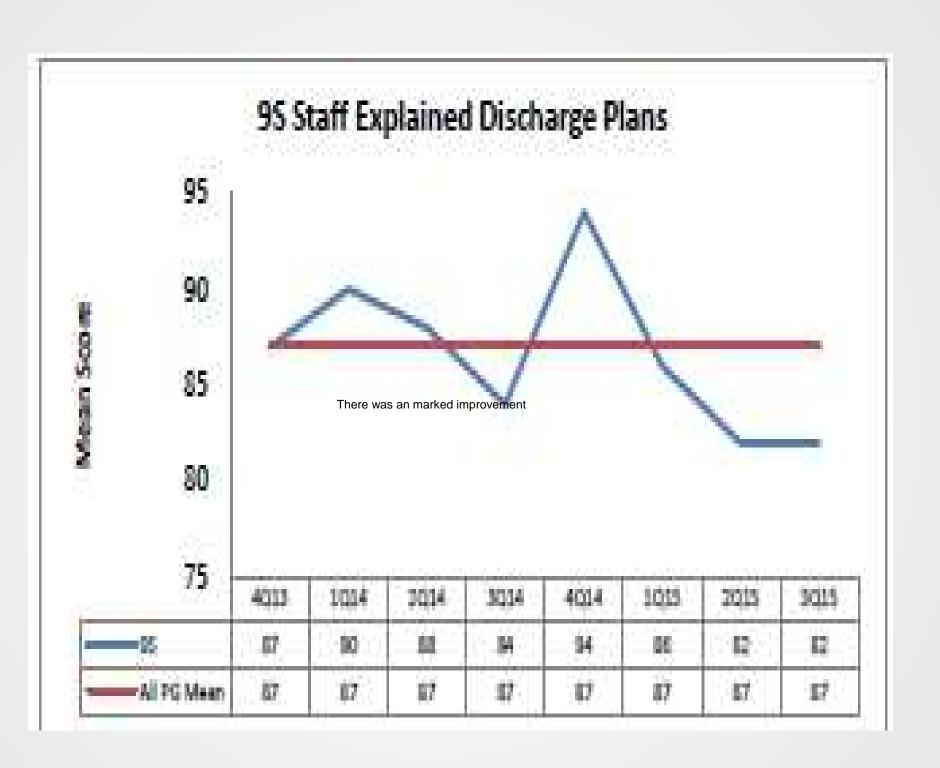
- Improve satisfaction scores by exceeding the national benchmark in the category of:
- Staff Explained Discharge Plans
- 2. Nurses Instructions regarding Homecare Meds
- ❖ Solicit feedback about the discharge process from patients and their caregivers.

# Implementation Strategies

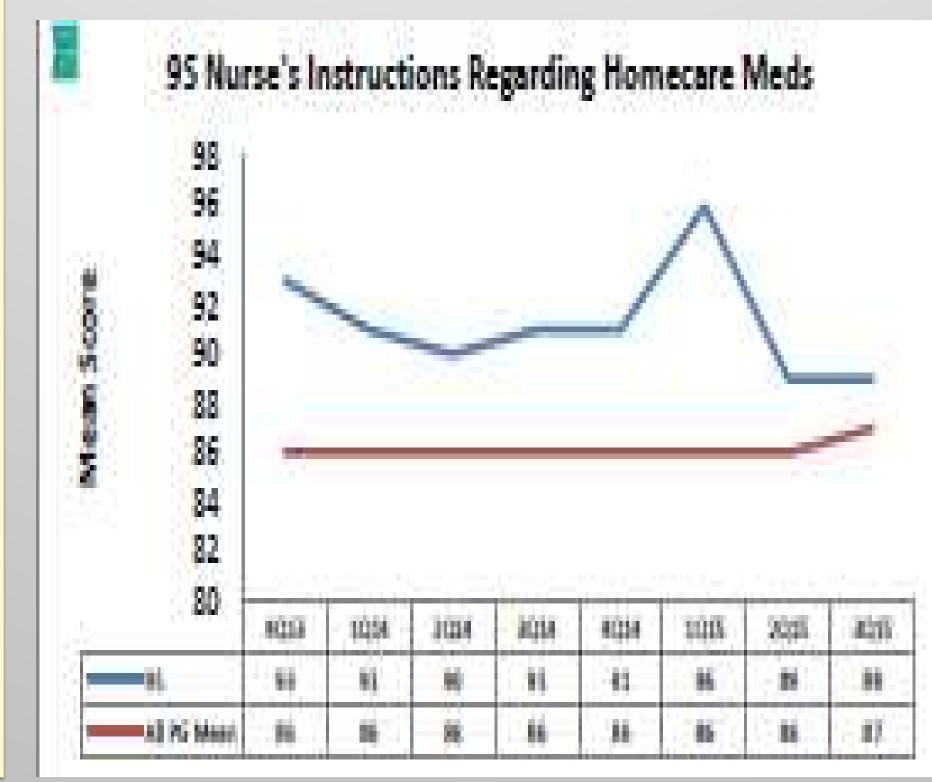
- ❖ A pilot project /practice change on discharge follow-up phone calls was started in July 2013 to reinforce discharge instructions, troubleshoot problems and encourage feedback from patients and their caregivers.
- ❖ Post Discharge phone calls were conducted within 48-72 hours to capture patient and caregiver concerns in a timely manner.
- A standard set of questions were created by the staff to ask for feedback on the discharge process and key discharge components such as medication, durable medical equipment, follow-up appointments and other self care issues.
- The patient and caregiver feedback will assist the nursing staff in development of discharge strategies that will better meet the patients needs.
- Education on Taking Your Medication Wisely was implemented in Sept 2013.
- ❖ Discharge Education Classes was initiated March 2015.

### Results

❖ There was a marked improvement in "Staff Explained Discharge Plans" on 4Q14, however for the 1Q to 3Q 2015 scores are below benchmark.

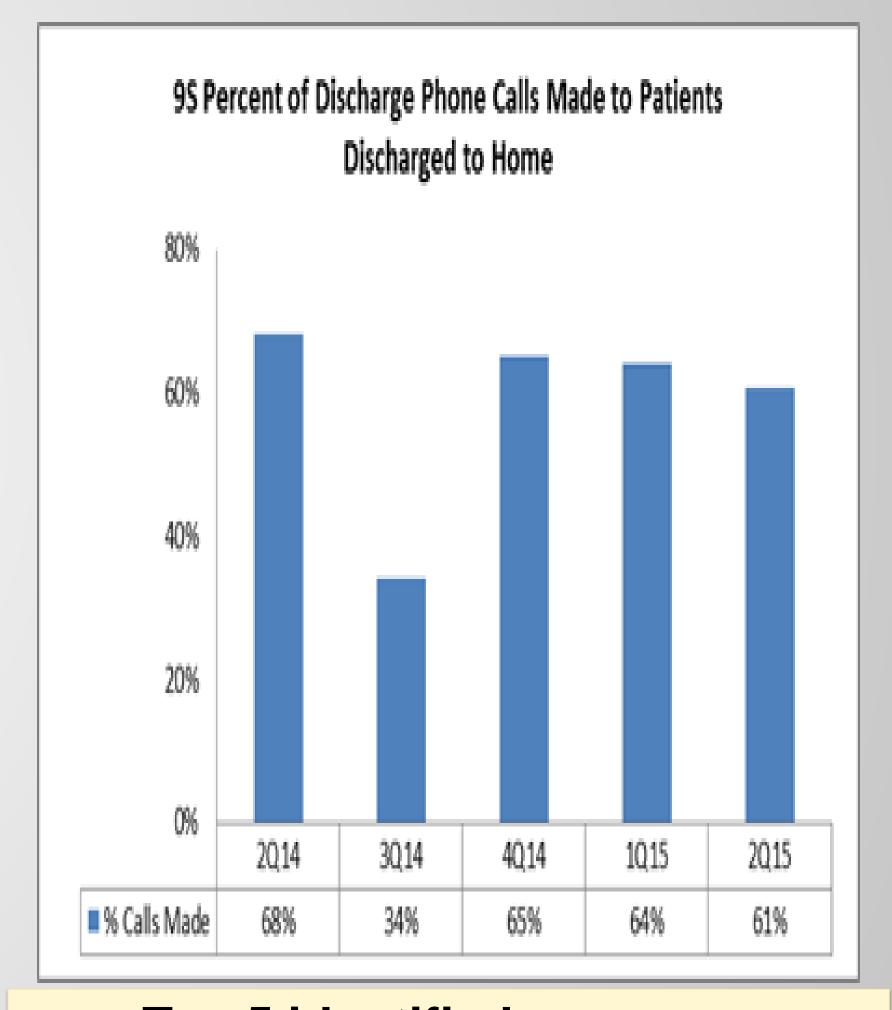


❖Beginning 3Q13 to 4Q14 scores were maintained above benchmark, marked increase noted on 1Q15 at 96<sup>th</sup> percentile. 2Q15 and 3Q15 still above benchmark at 89<sup>th</sup> percentile.



#### Results

The percentage of discharged patients receiving phone calls initially after implementation of the project and remained relatively stable.



#### Top 5 identified concerns:

- Delay in fulfillment of durable medical equipment
- 2. Medication Rx issues
- 3. Medical Questions (MD related)
- 4. Insurance/Co-pay cost of medications/Prior authorizations
- 5. Delay in Home Care Services

# Barriers identified in Conducting Phone Calls:

- 1. Lack of staff time to conduct calls
- 2. Demographic issues
- 3. Language
- 4. Unavailability of person called



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#### Evaluation

- ❖ Based on the feedback received from the phone calls, the nursing staff will revise the questions they ask to be more inclusive of the patient and caregiver identified needs.
- Strategies to help deal with post-discharge concerns need to be implemented.

# Implications

- Discharge phone calls give patients and caregivers a feeling of continued connection with the nurses.
- Furthermore, the discussions help to identify opportunities for improvement in the coordination of care and prevent future problems.

# Next Steps

- Revisit/Modify Discharge Education Class process.
- Staff compliance in educating patients on Taking Your Medication Wisely.
- Develop strategies to address the barriers identified in conducting discharge phone calls.
- Educate and train RN staff on how to conduct the discharge phone calls.

