

Care Coordination

Lessons Learned

Performance Challenge

A lack of standard procedures and tools for post-operative calls to patients following discharge does not incorporate patient-centered principles of care, and results in unnecessary hospital readmissions and poor health outcomes.

Practice Solution

Establish post-operative care coordination policies and procedures, and provide tools and resources to support care coordination personnel, while activating patients to engage in their post-operative care.

- Institute standard procedures for post-operative calls with a set of questions and information for patients.
- Track the impact on patients and families to ensure the program is patient-centered and meets their needs.

Change Steps

Practices can introduce concrete changes to their workflows and systems to support patient centered, post-operative care coordination:

- Identify the personnel responsible for post-operative calls and scheduling, and utilize a call script to identify the information provided and questions asked of all patients.
- Develop a reporting mechanism to identify the roster of patients in need of post-operative calls on a daily basis.
- Standardize call logging and notes capture from post-operative calls.
- Utilize a patient-centered communication methodology to educate patients and their families about necessary post-operative care.

Establishing post-operative care coordination policies and procedures supports patient engagement and improves health outcomes.

Practice Spotlight

Denver Health is a multi-specialty health care system serving the Denver community for over 150 years. The Denver Ear, Nose, and Throat (ENT) department addresses conditions of the head and neck.

Care Coordination Challenge: Denver Health ENT had no standard practice in place to coordinate post-operative care for their patients discharged from inpatient procedures. Providers followed up with post-operative patients in an ad-hoc fashion without a standardized process for assessing compliance or need as part of patient calls that did occur. Post-operative calls did not incorporate patient-centered principles and assessments for patient understanding or compliance for medication management, wound care, warning signs, or reminders for scheduled visits, which resulted in hospital readmissions and missed appointments, and lost revenue for the practice.

Assigning Post-Operative Care Coordination Roles: Denver Health ENT identified a nurse to make post-operative calls 24 – 48 hours post-discharge using a standardized checklist to review medication adherence, wound care instructions, red flags for recovery, and reasons and methods for contacting providers. The new workflows resulted in improved satisfaction for nurses and providers. Nurses felt engaged by the care coordination work, and it allowed providers to spend more time with patients. In addition, Denver Health ENT was able to work with their hospital partners to standardize post-operative instructions to ensure patients received correct, consistent information from every provider.

Patient-Centered Care Coordination: Denver Health ENT observed that patients and their families received post-operative instructions immediately upon discharge, when they were still recovering and before they had a chance to process questions. Denver Health ENT redesigned the process using patient-centered principles. Patients and their family members received calls at home, after the hectic discharge process, so they had time to think of questions and concerns. Denver Health ENT also incorporated patient teach-back techniques to assess understanding; patients described medication and dosing instructions, wound care procedures, potential warning signs, and instructions for contacting the clinic for follow-up appointments. The phone call encouraged patients to use the after-hours nursing line if there were questions or concerns prior to visiting the emergency department (ED). Nurses also helped patients schedule follow-up appointments during the calls, when possible.

Lessons Learned

Change Tactics

Successful practice transformation tactics fall under the priority areas of person- and family-centered care, and sustainable business operations, in three ways:

- **Care Transitions**—create standardized post-operative processes for follow-up with the patient after discharge.
- **Person- and Family-Centered Care**—design post-operative processes to be patient-centered, utilizing the teach-back method to answer patient questions and prepare them for follow-up.
- **Staff Vitality**—designate a position (e.g., nurse) dedicated to making follow-up calls to patients after discharge.

Resources

[ACP Practice Advisor’s Module on Care Coordination](#) prepares practice leaders to improve communication, organization, and teamwork between staff, patient, and family members, and other external entities. ACP’s module is a step-by-step guide for introducing care coordination to practices that provides them with a starting point for creating patient-centered post-discharge procedures to ensure that patients understand their post-operative care needs. (*login required*)

[Center for Care Innovations Innovation Spotlight](#) describes how one clinic introduced care managers to provide continuity of care between the hospital and primary care settings.

[The Knowledge Share](#) resource includes a how-to guide for adopting care management email notification systems.

Practice Spotlight

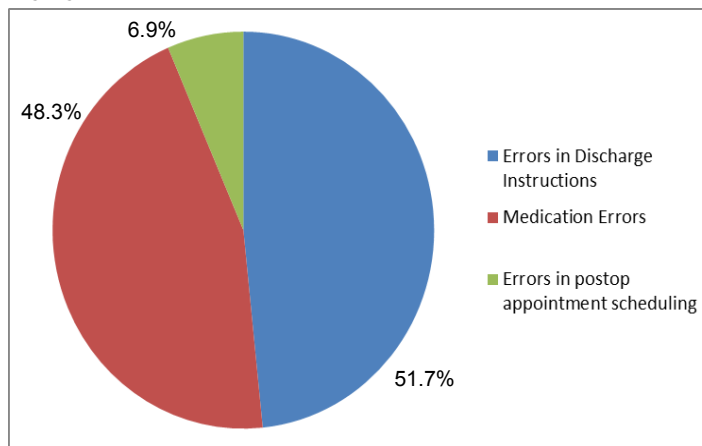
Measurable Impact on Post-Operative Care: Four critical measures were used to track the impact of this new care coordination initiative:

- Errors discovered/corrected
- Post-operative clinic visit no-shows
- ED visits within 14 days post-operation
- Use of after-hours nursing line

The Denver Health ENT team collected data for 522 successful post-operative calls between December 2016 and December 2017, comparing results with like-service outcomes from other specialty clinics: OMFS, pediatric surgery, ophthalmology, and urology.

Errors discovered/corrected: 5.6% of patients had errors discovered during follow up calls, and the Denver Health ENT team corrected 100% of them.

Figure 1: Percentage Distribution of Post-Operative Discharge Errors by Type (2016-2017), Denver Health ENT



Impact: Standardized, patient-centered, post-operative follow-up calls resulted in a reduction in medical errors and adverse events, a 50% reduction in the number of missed appointments, and a 33% reduction in 14-day post-operative ED visits. This initiative avoided 21 ED visits per year, with an average cost of \$5,164 per visit and annualized savings of \$108,461. In addition, this change process resulted in improved staff satisfaction; nurses felt valued and physicians had additional time with patients, which improved productivity.

Denver Health ENT’s success led to the adoption of this system by other Denver Health system departments. The orthopedics clinic adopted a similar post-operative system and their no-show rate decreased by 2.8%, while the eye clinic’s missed appointments dropped 3% in one quarter.