Post-Discharge Follow-up Clinic

Program Rationale

Following hospitalization for an acute illness, most patients require outpatient follow-up in a timely fashion. Due to a myriad of factors, this often proves challenging and creates opportunities for preventable readmissions or return visits to emergency departments.

The UCSF Screening and Acute Care Clinic (SACC) currently offers a setting for patients to be seen for acute problems when their primary providers are unavailable. SACC also provides a potential setting to develop a bridge for patients after hospitalization if timely access to their primary providers is limited. We propose to establish a Transitional Discharge Clinic (TDC) with dedicated appointments for post-hospitalization follow-up. The TDC appointments will orchestrate discharging teams with providers in SACC to specify the issues that need to be followed, ensure that necessary tests are performed, and communicate these issues to patients’ primary care providers.

Project Goals:

1. Provide an avenue for timely outpatient follow-up for patients at high risk for emergency room visits and re-hospitalization, thereby reducing readmission rates

2. Bridge the communication gap between inpatient and outpatient providers in the immediate post hospitalization period

3. Improve the rate of outpatient workups that are completed

4. Integrate with existing and future transitional care centered university-wide projects underway at UCSF, including the Society of Hospital Medicine (SHM) Project BOOST (Better Outcomes for Older adults through Safe Transitions) and Congestive Heart Failure Discharge Project

Objectives:

1. Establish dedicated time slots in SACC for the transitional discharge clinic (TDC) within 1 week post discharge for patients without adequate follow-up.

2. Develop tools for data collection regarding utilization, attendance, and patient and provider satisfaction for the clinic over a six month period

3. Establish a notification plan for PCPs regarding medication adjustments or changes in treatment plans by SACC providers

Process:

1. Notify providers at UCSF from the Moffitt-Long and MT Zion campuses about the availability of appointments at TDC for general medicine and cardiology patients. After initial pilot testing, the intent is to expand access to this clinic to all services.

2. Identify if a patient is an appropriate candidate for the TDC. Appropriate referrals include:
- Patients who require follow-up within a few weeks of hospitalization

- Identified PMD without available clinic time

- A new PMD appointment is scheduled in several months

3. For appropriate patients, the hospitalist or housestaff contacts the discharge coordinators about arranging f/u in SACC 1-2 weeks following the discharge date

4. Discharge coordinators directly contact SACC administrative supervisor and review key information including insurance to confirm patient eligibility. The SACC administrative supervisor schedules an appt during one of the dedicated time slots reserved for the TDC

5. Discharge coordinators will notify the inpatient team regarding the patient’s appointment information. The inpatient team will clearly outline the reasons for hospital follow up in their "Day of Discharge" note, which will be available to SACC providers for the follow up appointment

6. The patient is sent a reminder phone call regarding their appt date/time

7. SACC providers will see the patient and perform necessary interventions. SACC administrative supervisor will collect these notes, which will be reviewed by core faculty.

8. If patients need to be re-admitted, SACC providers will contact the appropriate inpatient providers

Program Evaluation:

1. Collect outcome data regarding utilization of TDC (e.g., # visits per week, time from discharge to TDC appointment, outcome of visit)

2. Capture reasons for TDC visit (e.g., blood pressure monitoring, laboratory check, anticoagulation adjustment, glucose monitoring, radiology study follow up, other pending tests)

3. Provider satisfaction

4. Readmissions, return ER visits, etc

5. Measure completion of outpt tests.

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