

# **Quality Residency Capstone**

#### Crete Area Medical Center Amy Meyers, RN, BSN October 3, 2022

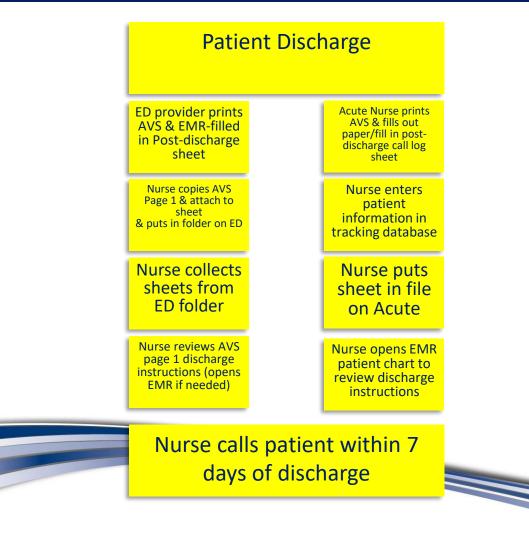
www.nebraskahospitals.org

# Background

- 15 bed Critical Access Hospital with 5 Emergency rooms
- Post-discharge telephone calls were to be completed by Acute and ED nurses within 7 days of discharge for ED, Inpatient, Observation, and Postpartum patients that were discharged to home
  - Large stacks of incomplete questionnaires
  - Low percentage of calls attempted
- Post-discharge call sheets with redundant questions
  - ED had 1 page with 10 questions
  - Acute (MedSurg & Postpartum) had 2 pages with 9 questions

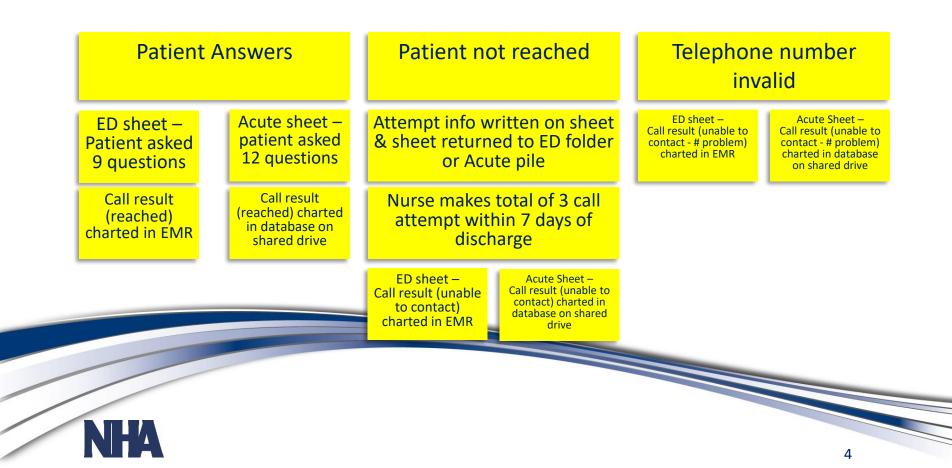


#### Background - Process Map Discharge through First call attempt



## Background - Process Map First call attempt to completion

Nurse calls patient within 7 days of discharge



## Team

- Quality and Health Services Coordinators
- Chief Nursing Officer
- Acute Care Manager
- Acute & ED Nurses
- Paramedics



## AIM Statement

 To increase the percentage of post-discharge calls attempted to 90% for all ED, MedSurg, and Postpartum patients discharged home by July 1, 2023.



### Measures

- Establishing Measures
  - Percentage of post-discharge calls attempted
  - Timing of post-discharge call attempts
    - Baseline data required 3 attempts in 7 days
    - Initial change data required 1 attempt within 48 hours and second attempt within 5 days
    - Final change data required 2 attempts within 48 hours of discharge
  - Percentage of patients reached by post-discharge call
  - Percentage of patients unreached and unattempted
  - Percentage of discharged call logs recorded in computer and on paper



# **Selecting Changes**

- Staff Training
  - Research findings why & when to do phone calls
  - Helping patients with questions/referrals Triage book, transferring calls, community resources, documentation in EMR
- Scripted Questionnaire/Call Log rewritten
  - Scripted Questionnaire was rewritten to be short & concise based on probable patient needs as determined by research & regulations
- Limit call attempts (number and time frame)
  - Initially 1 attempt within 48 hours of discharge and second attempt within 5 days
  - Final goal of 2 attempts within 48 hours of discharge
- All nurses and paramedics assigned calls by charge nurse every day
- Responsibility for all units shared equally with all units

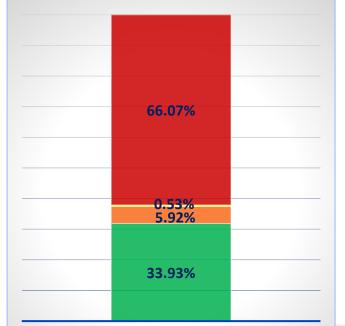




- Plan
  - Researched journal articles & studies
  - Surveyed staff for barriers and suggestions
  - Scripted Questionnaire updated
  - Acquired Baseline data
  - Database to track attempts and results developed
  - Changes implemented in stages over 5 weeks

### **Baseline Measures**

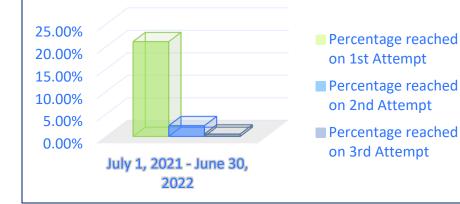
#### Percentage of Discharged to Home patients calls attempted



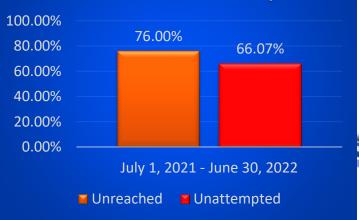
#### JULY 1, 2021 - JUNE 30, 2022

- Percentage Unattempted
- Percentage 3rd Call Attempted
- Percentage 2nd Call Attempted
- Percentage 1 Call Attempted

## Percentage of patients reached by attempt



#### Percentage of Patient Unreached vs Unattempted



## PDSA

#### • Do

- Tracking Database with weekly tracking implemented 7/1
- Staff Training
  - Acute/ED/Postpartum Nurses presentation 7/5
  - Paramedic Meeting presentation 7/19
  - Print-outs of education topics identified supplied 7/20
  - Acute/ED/Postpartum Nurses feedback 8/2
- Limited number of attempts implemented 7/20
- Established times to call implemented 7/20
- Updated Phone Call Scripts/Call Log implemented 7/20
  - Updates/edits made per feedback 7/21-8/3
- Charge nurse assignments implemented 8/2
- Two call attempts within 48 hours implemented 8/12



- Study
  - Will track the post-discharge telephone call attempts using tracking excel database
  - Will update/edit Phone Call Script/Call Log per feedback





- Act
  - Nurses & Paramedics attempting post-discharge telephone calls daily
  - Patient needs addressed by appropriate department(s)
  - Quick reference sheets available to nurses/paramedics



# Implementing Change

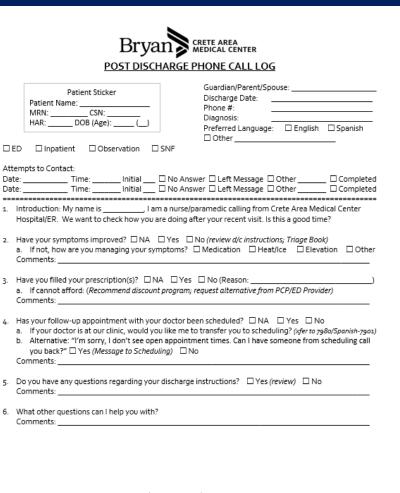
- Tracking Database with weekly tracking
- Limited number of attempts
- Established times to call
  - Times of day
  - Time since discharge
- Staff Training
- Quick-reference sheets
- Updated Phone Call Scripts/Call Log
- Charge nurse assignments



## **Phone Call Scripts**

you back? Yes No

Comments:



	Brya	CRETE AREA MEDICAL CENTER			
	-	T DISCHARGE PHONE CALL LOG			
	Mom Sticker Patient Name: MRN:CSN: HAR:DOB (Age): ()	Guardian/Parent/Spouse: Discharge Date: Phone #: Preferred Language: English Spanish Other			
	Baby Sticker Patient Name: MRN: CSN: HAR: DOB (Age): ()	□ Vaginal □ C-section Baby: □ Girl □ Boy (□ Circ) Feeding: □ Breast □ Formula □ Both Complication: □ Bleeding □ Pain □			
Dat Dat	e: Time: Initial	□ No Answer □ Left Message □ Other □ Completed □ No Answer □ Left Message □ Other □ Completed			
1.	Introduction: My name is, I ar	n a nurse/paramedic calling from Crete Area Medical Center are doing after your recent visit. Is this a good time?			
	If complications: Have your symptoms improved? □Yes □ No ( <i>review d/c instructions; Triage Book</i> ) a. If not, how are you managing your symptoms? □ Medication □ Heat/Ice □ Elevation □ Other Comments:				
-	Has feeding (breast/bottle/both) been going well? □ NA □ Yes □ No a. If no: Would you like to see our Lactation Consultant in our clinic? □ Yes (xfer to 798o/Spanish-7901) □ No (OB/Gyn Triage Book; refer to Sixpence, Milkworks) Comments:				
-	Does your baby sleep Alone, on his/her Back, in a Crib or bassinette?  NA Yes No (review) Comments:				
	Before you went home from the hospital, did you learn about Abusive Head Trauma commonly known as Shaken Baby Syndrome?   You have a structure of the structure				
	Did you receive information on the CRYing Plan?  Yes No (review) a. Do you have the CRYing Plan ready to use for when you are feeling frustrated with your baby's crying? Yes No (review)				
-	Do you have any questions regarding your discharge instructions?  Yes ( <i>review</i> ) No Comments:				
	What other questions can I help you with? Comments:				
_		late Time			
	llow-up Actions: 🗆 Message to Clinic/PCF				
	Service Recovery/Complaints (Enter BS)	afe/Message to leader)			

Thank you for your concerns. I apologize. I will follow up with our manager. Would you like someone to call

Signature of caller

Date Time

Follow-up Actions: Message to Clinic/PCP Message to Scheduling

#### Service Recovery/Complaints (Enter BSafe/Message to leader)

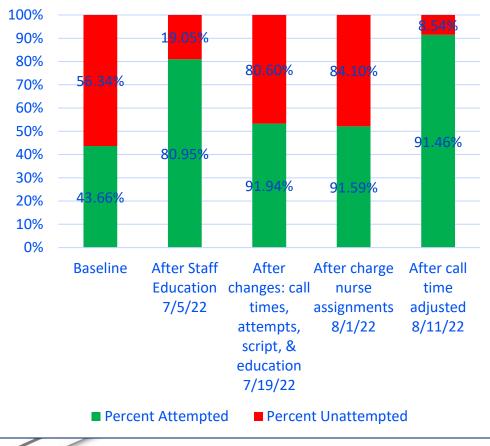
Thank you for your concerns. I apologize. I will follow up with our manager. Would you like someone to call vou back? Yes No Comments:

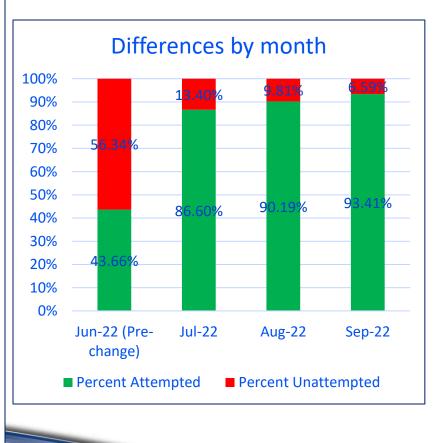
## Data

- Percentage of first post-discharge call attempts within 48 hours of discharge
- Percentage of second post-discharge call attempts within 5 days of discharge
  - Changed to 48 hours
- Percentage of patients reached by post-discharge phone call
- Percentage of call log papers returned to be counted
- Percentage of call logs charted

### Progress Data Attempted calls

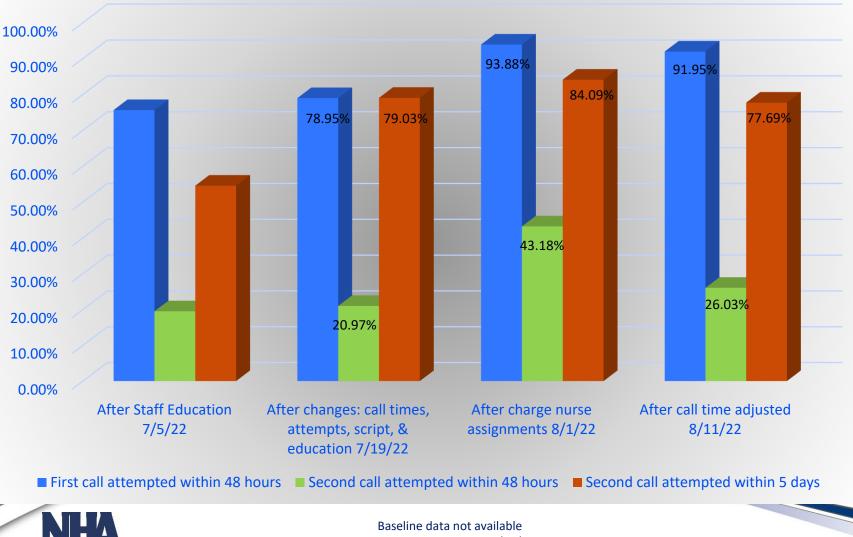
#### Differences post change implementation





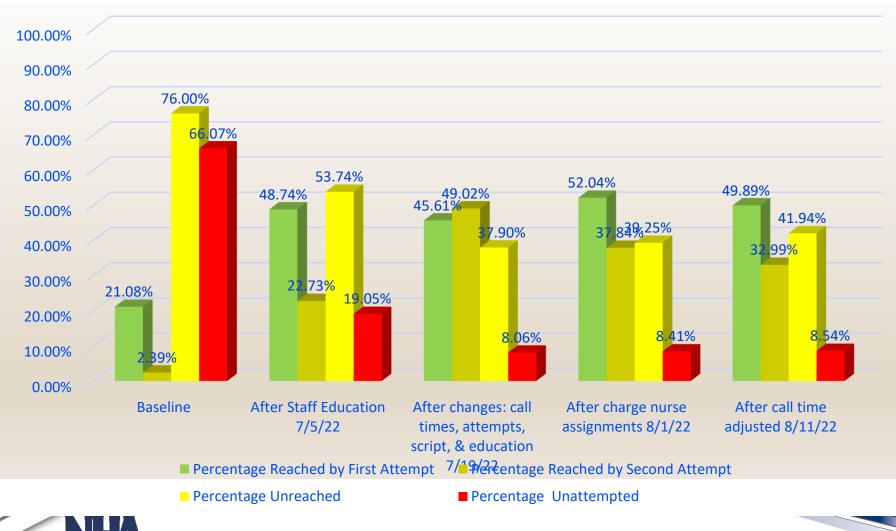
#### NHA

### Progress Data Time of Calls



Data available through 9/30/22

### Progress Data Patients Reached

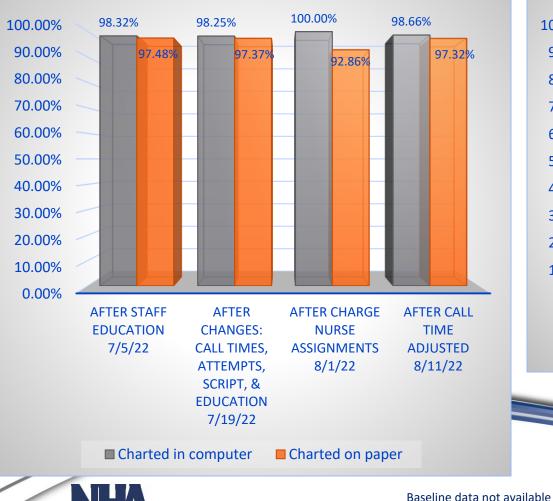


Data available through 9/30/22

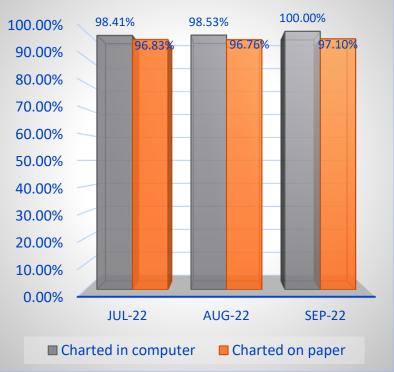
## Progress Data Charting Method

Data available through 9/30/22

**Charting post changes** 



#### **Charting post changes**



20

# Progress Data - Process Map

#### Discharge to first call attempt

#### Patient Discharge

ED provider prints AVS & EMR-filled in Post-discharge sheet Acute Nurse prints AVS & fills out paper/fill in postdischarge call log sheet

> Nurse enters patient information in tracking database & puts sheet in file on Acute

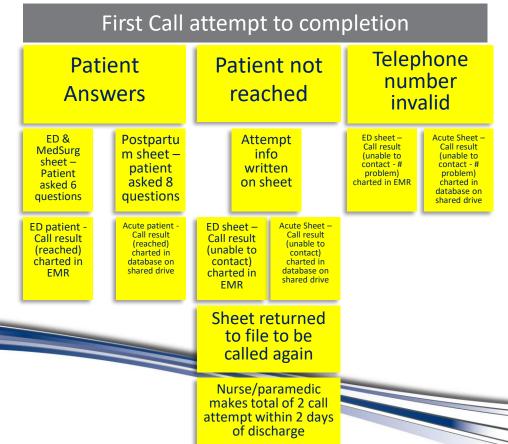
Nurse/paramedic copies AVS Page 1 & attach to sheet & puts in folder on ED

Charge Nurse collects sheets from ED folder & Acute file

Charge nurse assigns each nurse/paramedic on shift sheets to call

Nurse review discharge instructions from copy of AVS first page & EMR if needed

#### Nurse/paramedic calls patient next day



# **Spreading Changes**

- Continued focus on maintaining improvement
- EMR system generated reports to list patients to be called and increase ease of documentation
- Script/Call Log integration into EMR system for electronic charting of discharge follow-up



### Phone Call Scripts Auto filled by EMR

#### POST DISCHARGE PHONE CALL LOG

Name: PATIENT NAME MRN: 00000000 Date of Birth: 00/00/000 (AGE) CMS: 000000000 Department: CAMC Emergency/Acute Class: Inpatient/Observation/Emergency Discharge Date: 00/00/00 (Today's Date) Relationship: Patient contact (from Demographics) Phone #: 000-0000 Preferred Language: LANGUAGE (from Demographics) Diagnosis: DIAGNOSIS (from AVS) (DIAGNOSIS continued if needed)

#### \_\_\_\_\_

- Introduction: My name is \_\_\_\_\_\_, I am a nurse/paramedic calling from Crete Area Medical Center Hospital/ER. We want to check how you are doing after your recent visit. Is this a good time?
- Has your CHIEF COMPLAINT improved? 
   NA 
   Yes 
   No (review d/c instructions; Triage Book)
   a. If not, how are you managing your symptoms? 
   Medication 
   Heat/Ice 
   Elevation 
   Other
   Comments:
- 3. Have you filled your prescription for DISCHARGE MED RX? A Ker No (Reason:

 a. If cannot afford: (Recommend discount program; request alternative from PCP/ED Provider) Comments:

#### 4. FOLLOW UP RECOMMENDED

Has your follow-up appointment been scheduled? 
NA 
Yes 
No
Have you gone to your follow up appointment? 
NA (review recommendation) 
Yes 
No

- a. If your doctor is at our clinic, would you like me to transfer you to scheduling? (*xfer to 7980/Spanish-7901*)
- Alternative: "I'm sorry, I don't see open appointment times. Can I have someone from scheduling call you back?" 
  Yes (Message to Scheduling)
  No

Comments:

		/	/
Signature of caller Attempts to Contact:		Date	Time
Date:	Time:	Initial	□ No Answer □ Left Message □ Other □ Charted
Date:	Time:	_Initial	□ No Answer □ Left Message □ Other □ Charted

Follow-up Actions: 
Message to Clinic/PCP
Message to Scheduling

#### Service Recovery/Complaints (Enter BSafe/Message to leader)

Thank you for your concerns. I apologize. I will follow up with our manager. Would you like someone to call you back? ☐ Yes ☐ No Comments:

#### MOM & BABY POST DISCHARGE PHONE CALL LOG

Name: PATIENT NAME MRN: 00000000 Date of Birth: 00/00/0000 CMS: 000000000 Baby Gender: FEMALE/MALE Baby DOB: 00/00/000 Discharge Date: 00/00/00 (Today's Date) Relationship: Patient contact (from Demographics) Preferred Language: LANGUAGE Phone #: 000-000-0000 Birth: VAGINAL/CESAREAN (from delivery summary) Mom's Follow-up: FOLLOW UP (from AVS) Baby's Follow-up: FOLLOW UP (from AVS)

- Introduction: My name is \_\_\_\_\_\_, I am a nurse/paramedic calling from Crete Area Medical Center Hospital/ER. We want to check how you are doing after your recent visit. Is this a good time?
- 2. Complications: DIAGNOSIS

#### Circ: YES/NO (CIRCUMCISION Dx on baby)

Have your symptoms improved? 
Yes No (review d/c instructions; Triage Book)
a. If not, how are you managing your symptoms? 
Medication Heat/Ice Elevation Other
Comments:

- 3. Feeding: BREAST/BOTTLE/BOTH (from OBSTRK)
  - Has feeding (breast/bottle/both) been going well? 🗆 NA 🗆 Yes 🗆 No
  - If no: Would you like to see our Lactation Consultant in our clinic? 
    Yes (xfer to 7980/Spanish-7901)
    No (OB/Gyn Triage Book; refer to Sixpence, Milkworks)

Comments: \_\_\_\_\_

- Before you went home from the hospital, did you learn about Abusive Head Trauma commonly known as Shaken Baby Syndrome? 
  Yes 
  No (review; dontshake.org)
- 6. Did you receive information on the CRYing Plan? Set Yes No (review)
- a. Do you have the CRYing Plan ready to use for when you are feeling frustrated with your baby's crying? Yes No (review)
- Do you have any questions regarding your discharge instructions? 
  Yes (review)
  No
  Comments:
- What other questions can I help you with? Comments:

		/	1			
Signature of caller		Date	Time			
Attempts to Co	ntact:					
Date:	Time:	Initial	□ No Answer □ Left Message □ Other □ Charted			
Date:	Time:	Initial	□ No Answer □ Left Message □ Other □ Charted			
Follow-up Actions:  Message to Clinic/PCP Message to Scheduling						
Service Recovery/Complaints (Enter BSafe/Message to leader)						
Thank you for your concerns. I apologize. I will follow up with our manager.						
Would you like someone to call you back? 🗆 Yes 📄 No						
Comments:						

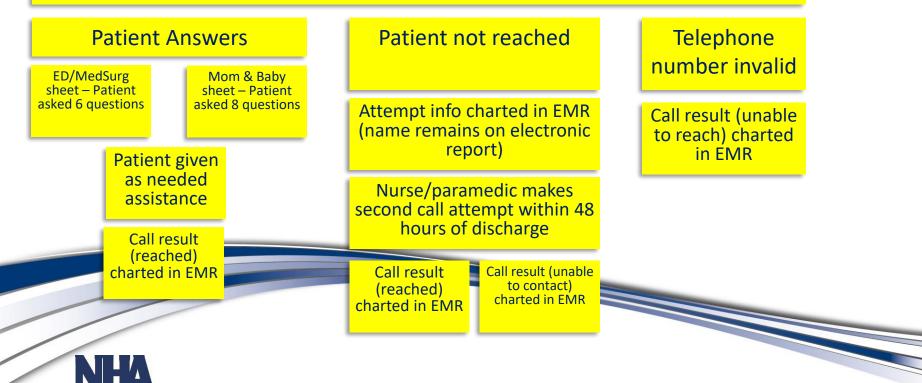
#### Final Goal - Process Map Discharge to completion

#### Patient Discharge

Electronic call log created in EMR & patient's info will auto-generate on report

Charge nurse assigns discharged patients to staff to call from EMR report

Nurse/Paramedic calls patient within 48 hours of discharge



## **Questions**?

#### Amy Meyers Amy.Meyers@bryanhealth.org



## References

- IHI: The Science of Improvement: How to Improve <u>http://www.ihi.org/resources/Pages/HowtoImprove/ScienceofImproveme</u> <u>ntHowtoImprove.aspx</u>
- Langley GL, Nolan KM, Nolan TW, Norman CL, Provost LP. <u>The</u> <u>Improvement Guide: A Practical Approach to Enhancing Organizational</u> <u>Performance</u> (2nd edition). San Francisco: Jossey-Bass Publishers; 2009.
- The Plan-Do-Study-Act (PDSA) cycle was published by W. Edwards Deming in <u>The New Economics for Industry, Government, and Education</u> [Cambridge, MA: The MIT Press; 2000]. For more on the development of the PDSA cycle and how it differs from PDCA, see: Moen RD, Norman CL. <u>Circling back: Clearing up myths about the Deming cycle and seeing how it keeps evolving</u>. *Quality Progress*. November 2010.