Timely Ambulatory Follow Up After Emergency Department Discharge

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Background

- Problem Statement: Patients over the age of 65 lack timely ambulatory follow up after discharge from the ED, leading to increased return to the ED, resource utilization, and mortality.

- Project AIM: Within 6 months of intervention, 70% of patients over the age of 65 who were recently discharged from the ED will follow up with their PCP within 7 days of the timeline recommended by the ED provider.

Baseline Metrics

- 1 in 5 residents will be retirement age by 2030
- From 2014-2017 per CDC data, 20% of all ED visits in US were made by patients 60+
- Readmission within 30 days of a previously treated condition accounts for over $52.4 billion
- 30% of patients > 65 y/o lack follow up with PCP within 30 days of Emergency Department Discharge

Proposed Measures

- **Outcome Measure**: Percentage of patients completing PCP follow up visit within 7 days of timeline recommended by ED provider
  Goal: 70% of patients complete follow up with PCP within 7 days of ED recommended timeline
- **Process Measure:** Percentage of patients receiving a call from PCP scheduler within 2 business days of scheduling alert
  Goal: 90% of qualifying patients recently discharged from ED with follow up recommendation receive scheduling call
- **Balancing Measure:** Overtime hours billed by scheduler each week
  Goal: No overtime hours billed by scheduler each week
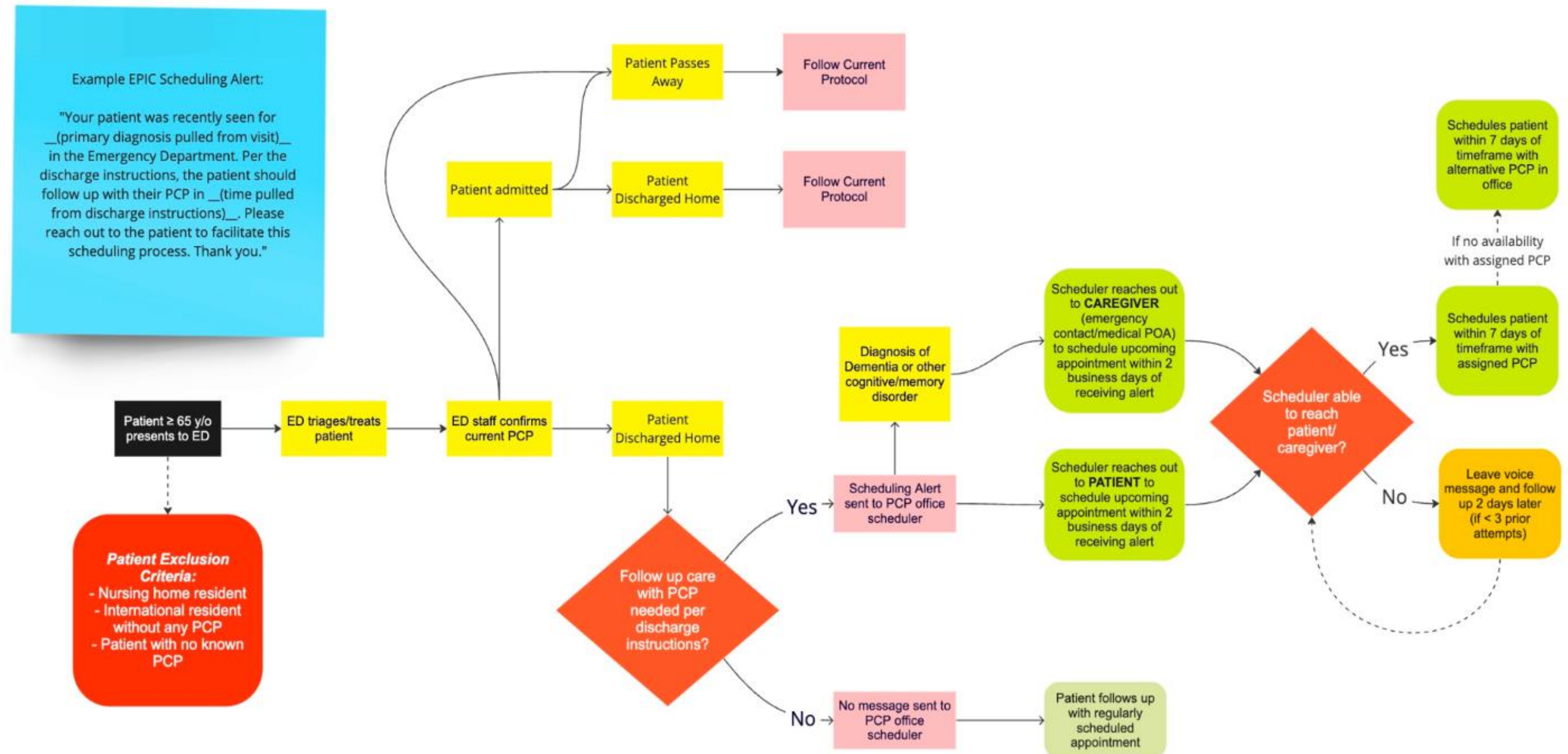
Barriers to Implementation

- **Barrier**: Patients with Cognitive Impairments
  Potential Solution: Program will mark patients with diagnoses of dementia or cognitive impairment to alert scheduler to call caregiver
- **Barrier**: Scheduling Inflexibility of PCP
  Potential Solution: One 20-minute visit held for ED follow up two days per week
- **Barrier**: Overuse of System Causing Increased PCP Burden
  Potential Solution: Have a meeting with ED staff to encourage proper use of the system for reasonable follow up timeframe

Future Directions

- Create Epic alert to identify PCP and send Epic message
- Implement procedure for scheduling alert at Jefferson ED and Jefferson Family Medicine Associates

Linkage to Healthcare Disparities

- Healthcare disparities caused by factors such as race, sex, and socioeconomic status are frequently exacerbated by older age
- Preexisting stereotypes about elderly patients, such as general infirmity, dependency, and incompetence can greatly impact their quality of care
- Elderly patients have an increased susceptibility to chronic disease and disability
- In retirement, many elderly patients grow disconnected to social relationships from work and other routine parts of their employed lives, leading to isolation, depression, and a disconnect

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