

# Evaluation of telephone follow-up of patients discharged home from Cabrini emergency department

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**Background** Communication has been identified as one of the major challenges in the Emergency Department setting and it has been shown that a significant proportion of patients do not fully understand the care and discharge instructions they receive. Patients who fail to understand and follow discharge instructions have a greater likelihood of poor compliance and complications after leaving the ED resulting in deterioration and poor patient satisfaction. Early intervention to address these issues potentially averts significant clinical adverse outcomes and improves patient satisfaction.

**Aim** To assess the impact, in terms of post discharge clinical care and patient satisfaction, of a follow-up telephone call to all patients discharged home from Cabrini ED.

**Methodology:** The project was conducted over a 20 week period.

On each day, a nurse contacted all the patients discharged from the Emergency Department the previous day. Any assistance provided and any intervention required was recorded.

**Results:** Of 2316 discharges, 2035 were eligible for a follow up phone call. 1253 were successfully contacted (61.6%). Of these 174 (13.9%) received assistance with the discharge plan. 191 (15.8%) felt the same or worse. Of these 105 received nurse advice, 31 were asked to re-attend ED, 15 had GP follow up arranged, 15 had specialist follow up arranged, 3 had direct admission arranged. Of the 31 asked to re-attend, 13 were admitted. Patient satisfaction was measured via complaints and compliments compared with same period in previous year (27 to 16:  $p=0.091$ ) and (14 to 22:  $p=0.18$ ) respectively. 88% of those that received a phone call felt it was useful or very useful (Press Ganey 2013)

**Conclusion:** Follow up phone call to ED patients discharged home increases patient satisfaction and safety. Other qualitative benefits were noted including improved nursing understanding of patient journey, improved medical notes in particular management plans, improved clerical accuracy of data entry, and early feedback (positive and negative) to staff involved in clinical care.

The Telephone Follow-up Service is now into its third year of operation. The above study was done after the first six months of the service. The program has evolved in time responding to different influences and demands. The issues of establishing an auxiliary patient service within the structure of a busy emergency department has been challenging. Nine senior triage/floor nurses share the roster all enjoying contacting patients they have personally cared for. The improvement to the patient experience is clearly evident with the program being validated by the hospital management as a permanent quality initiative.