

# Guide for Safe Transitions to New Appointments



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# Guide for Safe Transitions to New Appointments

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## Rationale

The purpose of this toolkit is to provide strategies, tools, and education to help ambulatory care facility staff actively engage and prepare patients for a new ambulatory care appointment.

### Understanding the Unique Environment

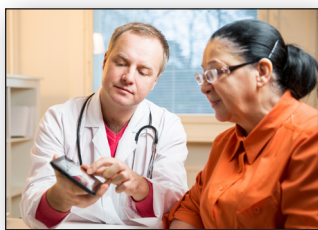
Ambulatory care facilities have numerous regulatory, financial, and quality demands to meet in order to sustain operations. These demands include:

- Meeting or exceeding quality metrics
- Addressing health information technology requirements
- Reducing costs of care
- Providing comprehensive and coordinated care for patients with complex health needs
- Conducting quality improvement activities

In addition to these demands, facilities must operate in a unique environment that involves:

- Brief encounters with patients, with long stretches of time between visits
- Patients deciding when to initiate care or follow up with other health care team members
- Health literacy issues, which can compound the challenges faced by patients who have complex health needs
- Variations among facilities in terms of patients served, roles of teams, and cultures
- Financing models that are often based on productivity-driven payment methods

### Engaging and Preparing Patients



Research has shown that transitioning from one health care setting to another is vulnerable to patient safety gaps, in part due to a lack of effective communication, including the transfer of essential information concerning the patient's plan of care. These gaps have the potential to cause patient harm and safety errors, including increased hospital readmissions. Patients who transition from one clinician to another (e.g., primary care clinician to specialist clinician or vice versa) are especially vulnerable to patient safety errors.

There is also evidence that fewer adverse events occur when patients and their care partners (family members or friends who help in care) are active team members rather than passive receivers of care. The Agency for Healthcare Research and Quality (AHRQ) published a technical brief entitled, "Patient Safety in Ambulatory Settings," which summarized evidence-based practices applicable to ambulatory care settings and tools to improve ambulatory care patient safety practices. The brief reported that:

- Patient engagement is a crosscutting strategy that can enhance ambulatory safety, or if absent, be a barrier.
- Patient engagement interventions should consider the needs of vulnerable patient populations, such as patients with complex medical needs, limited health literacy, and social vulnerabilities. These at-risk patients may require additional support to prevent ineffective transitions of care and other safety issues.

## Using this Toolkit

By preparing patients for new ambulatory care appointments, you can potentially:

- Reduce errors related to transitions of care
- Increase patients' engagement in their own plan of care
- Improve communications among patients and care partners and other facilities
- Address requirements related to ensuring patients have the information they need
- Improve coordination of care
- Enhance overall patient experience

## Toolkit Contents

Tool	Audience	Purpose	Description
Guide for Safe Transitions to New Appointments	Facility Team and Patients and Care Partners	Provide rationale for the toolkit, resources to supplement skills, knowledge and confidence, and implementation steps.	Short word document providing essential information to support successful implementation of tools.
Team Training PowerPoint Video	Facility Team	Educate team members on how to implement toolkit based on opportunities for improvement.	Short, narrated PowerPoint video that should be watched by all team members before implementing the toolkit.
Pre-Intervention Assessment (PIA)	Team Lead	Assess current practices in patient and care partner engagement to promote safe transitions to new clinicians.	Excel workbook with tabs that correspond to key components of patient and staff tools. Responses to questions in the spreadsheet trigger specific recommendations for facilities to consider when engaging patients and family members in care transitions.
Appointment Aide: Preparing for Your Appointment	Patient and Care Partner	Prepare the patient and their care partner to think about and document questions and health information in preparation for a new appointment.	This booklet in word format encourages patients to ask questions, communicate needs and preferences, and be an engaged team member. The pages can be printed individually, printed as an entire booklet, or incorporated directly into your after visit summary (AVS). Team members are encouraged to help the patient review the questions in the Appointment Aide and document essential information and questions.
Checklist to Prepare Patients for New Appointments	Facility Team	Assist the team in supporting the patient's efforts to be prepared for a new health care appointment.	Once the team is aware that the patient has a new health care appointment, this two-page checklist in Word format can be used to prompt team members to reinforce key steps that promote patient engagement and preparation.



## Resource Needs

Resources needed will vary across ambulatory settings depending on the identified opportunities for improvement and resources already dedicated to ensuring safe transitions of care and patient engagement.

### Staffing

Existing staff responsible for ensuring patient engagement and/or safe patient care transitions can complete the PIA, identify patients who would benefit from using all or parts of the Appointment Aide, and orient staff on how to use the tools. Existing staff can also help integrate the tools into the after -visit summary process and/or electronic medical records, if appropriate. Consider creative ways you can engage existing or additional staff to address gaps in patient engagement and safe transitions of care.

### Costs

Additional costs to print the PIA summary report, Appointment Aide, and Checklist to Prepare Patients for New Appointments are minimal. Pens or pencils should be made available to patients and their care partners to fill out the Appointment Aide. The main cost is for staff hours needed to address safety issues relative to patient engagement and transitions of care.

### Time

Existing staff responsible for assessing and supporting patients who need transitions of care assistance can integrate the tools into existing processes. Existing performance improvement teams can help complete the PIA, identify patients who would benefit from using the Appointment Aide, and evaluate benefits and opportunities for sustainment. The time spent assessing and supporting patients should improve efficiency and resolve gaps in care relative to patient engagement and outcomes. Implementation start-up may seem time-intensive at the beginning, but should decrease as new and improved process steps are integrated into existing work flows.

## Implementing the Toolkit

The following steps can be used and adapted based on the individual needs of the facility.

### Step 1. Identify a leader or champion.

Having a designated leader who will review the Guide, complete the PIA, and support team training will ensure more effective implementation and adaptation of the materials. This leader will be more successful if they have dedicated hours to focus on implementation and also have authority and respect from other team members.

### Step 2. Engage all team members who are responsible for supporting patient engagement and safe transitions of care.

Determine how you will include the team in identifying opportunities for improvement, identifying patients and staff who would benefit from using the tools, and integrating the tools into existing processes. Schedule and conduct the training using the Team Training PowerPoint Video.

### Step 3. Complete the Pre-Intervention Assessment (PIA) tool.

The PIA can either be completed by the leader or, if time and resources permit, a group of team members. The goal is to obtain an accurate reflection of current practices in your facility relative to engaging and preparing patients for new appointments. The results of the PIA will help you identify which pages of the Appointment Aide would address

opportunities for improvement and/or specific patient needs. Review the results with team members and discuss how you can integrate the tools and resources into existing processes.



#### **Step 4. Identify which patients may need additional support to prepare for a new appointment.**

Once the team is aware that the patient has a new health care appointment, use an existing or new risk assessment to determine which patients may need support to prepare for their new appointment. Multiple factors, such as patient load, patient characteristics, and existing processes, may influence how you decide which patients need additional support.

Patients who are at high risk for complications, hospitalizations, or other adverse events often require additional support to prevent safety errors due to the complexity of their care and the potential for miscommunication or gaps in information shared in the referral process. A risk assessment can help you identify patients who may have medical and non-medical conditions that can affect the patient's plan of care, especially during a transition to another clinician. If your facility is already using a tool to assess medical and non-medical risk factors, then use your existing process to target which patients may benefit from using the Appointment Aide. If you do not have a well-defined process or tool to determine risk, consider using a tool such as the HARMS-8 tool.

If your facility serves a large number of patients who need support to prepare for new appointments, consider sharing the Appointment Aide with a smaller population of patients. This could include patients with a new diagnosis, patients who have multiple chronic conditions, or patients that have documented non-medical areas of risk such as ability for self-management, social support, ability to perform activities of daily living, and self-perception of health. Consider how the risk-assessment questions may be integrated into an existing electronic health record system, the patient portal, AVS, and/or be printed to help ensure patients who may benefit from the tool have access to the Appointment Aide.

#### **Step 5. Begin to share the Appointment Aide.**

Start by asking one clinician or team to share the tool one day a week for the first month. After successfully implementing the tool with a small group of patients or clinicians, consider how you might increase the number of patients who may benefit from use of the Appointment Aide and how the tool could be better incorporated into day-to-day processes.

The Appointment Aide includes questions and prompts to help the patient prepare for a new ambulatory care appointment by discussing and documenting information concerning medications, appointments, key contacts, and signs and symptoms. When giving the tool to the patient, explain that they can use the Appointment Aide to keep track of and communicate their concerns, questions, and preferences and to take notes on important aspects of their care. If a care partner is with the patient, hand the care-partner-specific page directly to the care partner.

The Appointment Aide can be provided in a variety of formats, including paper copies, questions on the patient portal or smart phone app, or other electronic formats already developed by the facility. The tool can be given to the patient whenever you determine that the patient has a new ambulatory care appointment. Encourage the patient to use the questions and information documented in the Appointment Aide to discuss their plan of care with other clinicians.

The Checklist to Prepare Patients for New Appointments contains notes and prompts for the team to promote patient engagement and preparation for the new appointment. The ultimate goal is to ensure the patient and care partner have the information and confidence to communicate with a new clinician. The facility may want to reinforce use of the Appointment Aide during follow-up phone calls with patients and/or the new clinician to confirm effective and safe transitions of care. You can also conduct a warm handoff with the new facility's team. Remember to bill

as appropriate for any patient and care partner education you provide, especially since increased time spent with patients may change the necessary code.

### **Step 6. Integrate the Toolkit into workflow.**

In step five, you will learn what aspects of the toolkit work well in your facility and which components may need to be altered. For instance, some facilities will find a paper tool helpful, while others may wish to create a set of dot phrases and shortcuts in the EHR to incorporate the toolkit into the AVS or other patient education materials. Other facilities may find that the task of using the Appointment Aide needs to be reassigned to improve workflow. Your initial risk assessment may identify other patients who would find the tool useful. Do not skip this step in implementing the toolkit. This customization will help ensure sustainability and use by the team while reducing burden and potential stress associated with implementation.



### **Step 7. Roll out the Toolkit to the whole team.**

Once you have determined how you can integrate the toolkit into existing workflows, begin to provide copies of the Appointment Aide to more patients and their care partners. At the same time, offer the Checklist to Prepare Patients for New Appointments to any clinician or staff who provide information and support to patients concerning their plan of care. The tools can be used jointly by all team members to promote patient and clinician engagement in preparing the patient for an appointment with a new clinician.

### **Step 8. Use resources and other supplementary materials as needed to promote effective skills, knowledge, and confidence among all team members.**

In ambulatory care settings, all health care team members, including physicians, nurse practitioners, physician assistants, health education coaches, and pharmacists, should continuously improve their skills, knowledge, and confidence in patient engagement and safe transitions of care. The resources and other supplementary materials available below can be used to support improved patient safety within your facility and among other ambulatory care sites.

### **Step 9. Evaluate use and benefits of tools and processes.**

Ask staff for input on whether or not patients and their care partners are using the Appointment Aide to prepare for their new appointment and if team members are using the checklist to support patient engagement and preparation. Ask patients and their care partners if they used the Appointment Aide and if the tool helped them prepare for their new appointment. Once you have feedback on what is working and what should be modified, make any necessary change(s), and communicate the changes to your team members. Determine how you may sustain and continue to improve how your facility engages patients and care partners to prepare for new appointments.

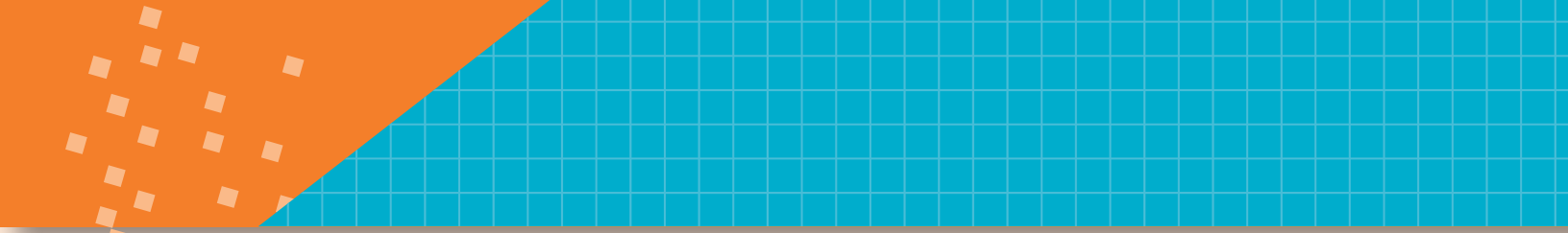
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