DISCHARGE AND FOLLOW-UP APPOINTMENT PROCESS

This document describes the process of discharging patients and setting up follow-up appointments.

1. Who can schedule the follow-up appointments?
   Case Managers, Unit Secretaries, Discharge Nurses, Physician Extenders (APRNs/PAs), Doctors, Patient Navigators, Social Workers and an Activities Person can schedule follow-up appointments.

2. When should the follow-up appointment be scheduled?
   Appointments are scheduled the day prior to or day of discharge.

3. What should I consider in setting up and implementing an effective discharge process?
   a. It is crucial to start off by discussing the need for a specific procedure with administration to ensure follow-up appointments are made. Having a dialogue with them ensures that they are aware of the needs, are willing to enforce any changes and can adjust tasks as needed for various positions. Depending on the setting, it may be equally as important to discuss this with the physician practices that work alongside with the facility and follow-up with the patients. For example, talk with the Nursing Director first so that this can be integrated into the hospital discharge policy then send a memo to all nurses that will be a mandatory discharge process.
   b. Tying the follow-up appointment process to performance evaluations or integrating these tasks into the job description may ensure that it is accomplished. Additionally, educating everyone involved about how this affects the facility’s financial status for issues such as readmissions may also improve performance.

4. What are some examples of a discharge process that includes follow-up appointment scheduling?
   There are many ways to incorporate this into the discharge process. We have listed a few below:
   a. Case Managers make the appointments the day prior to discharge.
   b. Schedulers use a discharge hotline to assist them in making the appointments.
   c. Unit Secretaries receive the discharge notices. After discussing it with the patient, they schedule the appointment.
   d. A Heart Failure Inpatient Nurse Navigator works with specified persons on the cardiology service (e.g., APN) to schedule the appointment then an Outpatient Nurse Navigator follows up with the patient to make sure that appointment was made.
   e. Unit Secretaries receive discharge orders, discuss the best times for a follow-up appointment and other issues such as transportation with the patient then calls the doctor to make the appointment. The appointment is added to the discharge instructions.
   f. A Discharge Heart Failure Nurse makes the appointment which is added to the discharge instructions
   g. In large cardiology practices, NPs/Pas can schedule the appointments.
   h. A Quality Improvement Specialist who reviews the admissions inputs the discharge information into a pre-populated discharge list which is then sent to the Unit Secretary for him/her to schedule the appointment

1 The contents of this document are derived from the H2H listserv [5/27/14 – 7/10/14].