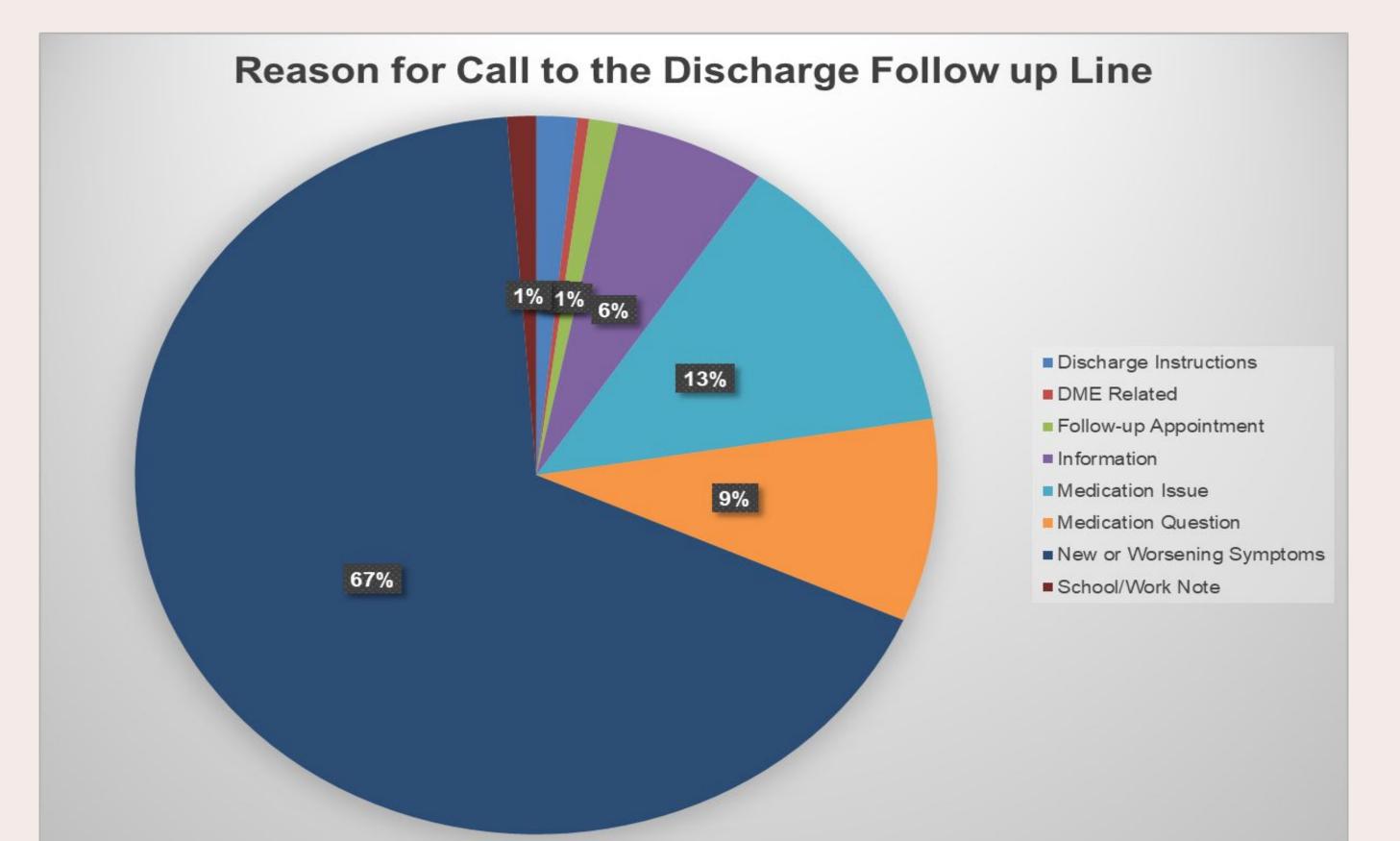
children'shealth?

Got Questions? Call us: Utilizing Telephone Triage to Help Pediatric Patients After Discharge Susan Webber RN, MSN, CPN, CEN, CPEN, TCRN, CCCTM Ann Gosdin MS. APRN, CNS, CPNP-PC

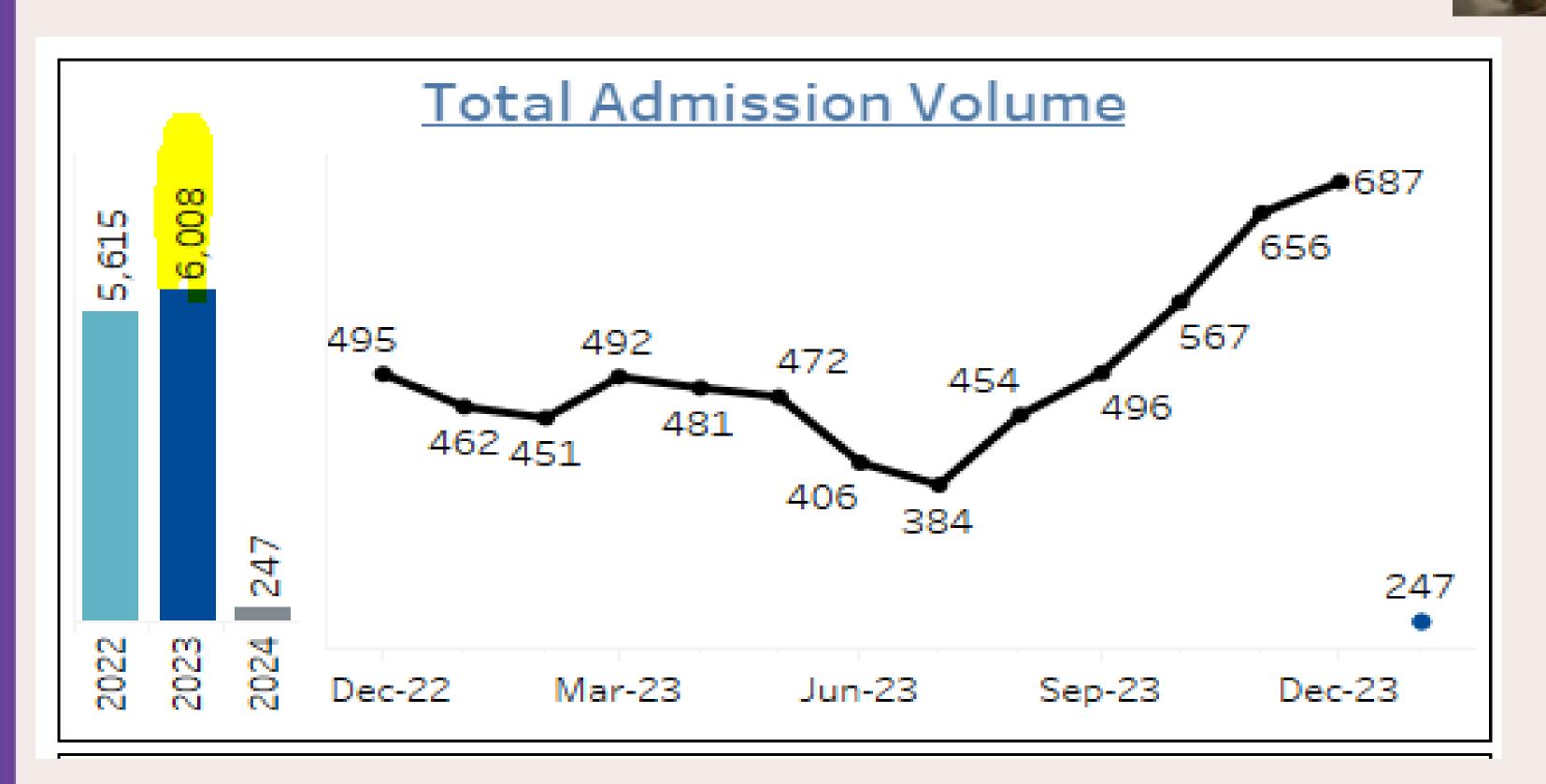


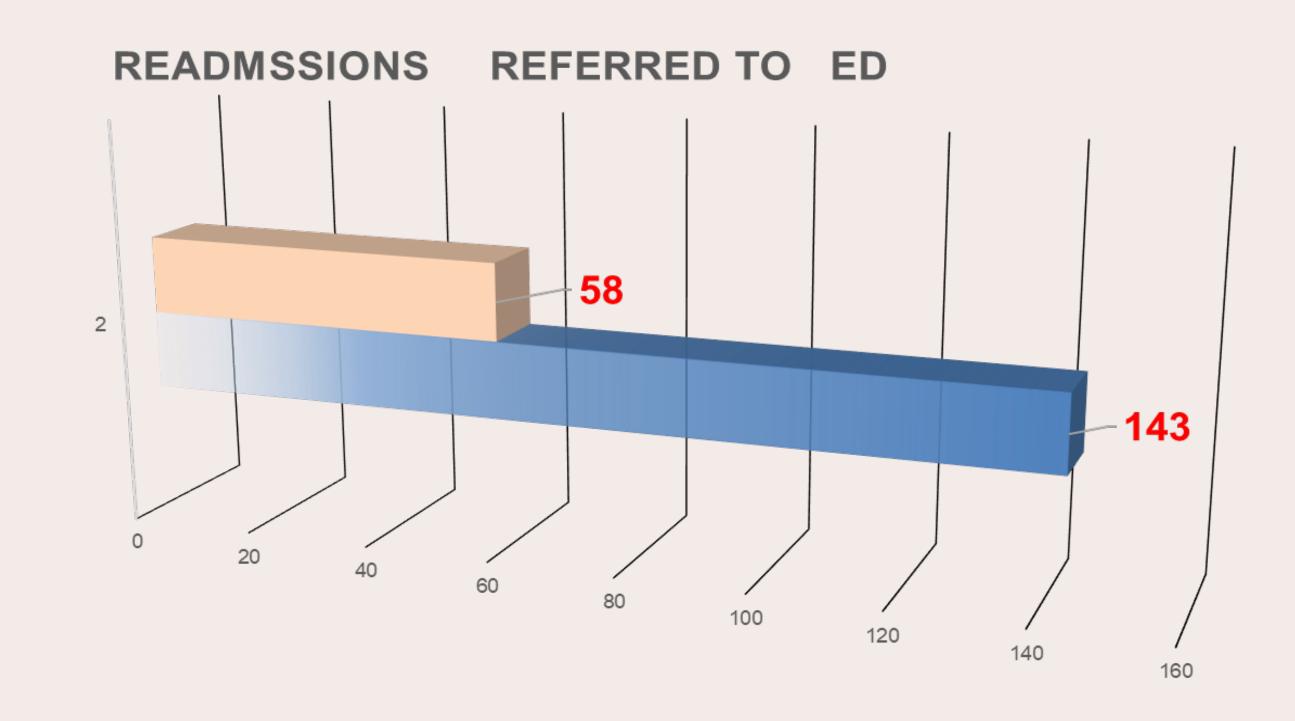
- Discharge follow-up programs reduce avoidable readmissions and unnecessary returns to the emergency department, (Binder & Cox, 2018).
- Our organization needed a defined discharge phone follow-up process
- Information on the After Visit Summary (AVS) included follow-up instructions with the main hospital phone number.
- After discharge, operators route patient calls to the discharging unit, causing staff disruptions.
- Community providers often refer patients back to the hospital
- Post-discharge follow-up phone calls are labor-intensive and may not meet the patient's needs.

Plan: The aim of this project is to determine if patient-initiated calls to experienced triage nurses in a 24/7 centralized call center. can help identify barriers and assist with self-management at home. A pilot program using technology and a new AVS phone number workflow was implemented to engage patients after discharge in January 2021. Patients discharged from the hospital received a standardized text message script utilizing seven discharge-related questions. Responses to the text questions either prompt the user to connect with the Nurse Advice Line (NAL) or move to the next question. The AVS phone number directs calls to the NAL. In January 2022, the NAL partnered with Care Coordination. Symptom-based calls are routed to the NAL for triage 24/7. All other calls were routed to Care Coordinators.









Clinical Findings/Results:

A total of 6008 patients were discharged from the hospitalist service line in 2023.

427 patients called after hour triage line:

Implications/ Relevance:

 Utilizing patient-initiated calls after discharge from the hospital to experienced pediatric triage nurses

- 287 (67%) had new or worsening symptoms
 05 (22%) had modication issues or quastions
- 95 (22%) had medication issues or questions
- 7 (2%) patients had questions about their discharge instructions.
- Other patient/ caregiver inquiries were about durable medical equipment, general information, work or school notes, and follow-up appointments.
- 7% of the total discharges for the hospitalist service contacted the NAL.
- Of the 6008 patients discharged from the hospitalist service, after triage from the NAL, 143 were referred to the emergency room.
- Of the 143 referred to the emergency room, 58 were readmitted, which is 0.01% of the total discharges

helps to proactively address issues after discharge

 Patients can call 24/7 to get expert advice at the time of their own need





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2002



References

About Children's HealthSM

Children's HealthSM is the eighth-largest pediatric health care provider in the nation and the leading pediatric health care system in North Texas, providing a full spectrum of health care services—from daily wellness and primary care to specialty visits and critical care. Holding eight disease-specific care certifications from The Joint Commission, Children's Health has been consistently named one of the nation's top pediatric providers by U.S. News & World Report. The Children's Health system includes Children's Medical Center Dallas, as well as Children's Medical Center Plano, multiple specialty centers, Our Children's House rehabilitation facilities, physician services and the Children's Medical Center Research Institute at UT Southwestern.