Following Up with Patients Discharged from the Emergency Department: A Look at Voice and UCSF
The transition from hospital to home is a sensitive time period for patients and care providers. Patients often need to follow detailed care plans in order to avoid clinical complications while adjusting to their lives back at home. Offering guidance to patients during this transitional period is an undeniably effective measure to prevent adverse events such as hospital readmissions.

One way to remedy a care transition issue, such as the inability to attend a follow-up appointment or fill a prescription, is through proactive outreach with a simple phone call. However, hospital staff is already responsible for admitted patients, and it can be difficult to find time to focus on those that have been discharged. The key is identifying patients who have issues or concerns after returning home. Routing only these patients to the hospital maximizes staff time for intervention.

The same holds true for patients that aren’t admitted directly to the hospital but are treated and released in the emergency department. Because of the fast-paced nature of the ED, patients often leave with only a minimal understanding of the steps to take after returning home. Checking in on these patients is essential.

“They may have gotten some pain meds, lab work, an x-ray or two, but for the most part, they leave without knowing what’s wrong with them. That’s just the way the ED is, we’re not primary care. We treat the issues, but then there needs to be follow up. For the vast majority of patients, the ED — and Healthcare in general — is a whole new world.”

- Sarah Pearce, RN MS
University of California, San Francisco Medical Center
Department of Emergency Medicine
Discharge Coordinator
After acute episodes, patients often return home confused about what steps they should follow. These patients require additional attention from the hospital; however, identifying which patients require further intervention is difficult in an area that sees such a high volume of patients. Sarah Pearce, the discharge coordinator at the University of California, San Francisco Medical Center Emergency Department, understood the importance of following up with patients and empowering them to care for themselves at home.

In order to address the challenge of following up with a high volume of patients, UCSF implemented CipherHealth’s advanced post-discharge calling solution, Voice. Voice calls patients within 24-48 hours of discharge and uses prerecorded messages to assess care plan compliance and overall recovery. Patients with either clinical or satisfaction issues are then triaged and assisted by the proper hospital clinician.

Sarah goes on to explain how the emergency department at UCSF Medical Center has been able to transform the way staff and patients encounter the transition from hospital to home with the use of Voice.

**UCSF ED at a Glance**

- 42,295 ED visits per year
- 2 staff members performing follow up

**Why Follow Up?**

“They don’t know how to get on the phone to call a specialty clinic to say "Hey, I was in the ED, I have a fracture and I need an appointment." UC is intimidating, it’s huge. People need a little support and guidance.”

Streamlined Nurse Workflow

Improved Communication

Empowered Patients
What challenges do you face when following up with ED patients?

Prior to Cipher I would try to call everyone. I was striking out a lot. Patients weren’t answering, they thought we were billing, they weren’t sure who was actually calling them. With Cipher, I am identified right off the bat. The recording says, “Hey, I’m Sarah, I’m a nurse from the ED.” It makes them stay on the phone, and it opens up a totally different dialogue. The patients immediately know that I’m calling to help them even when the system is automated.

Thus far, Voice has reached 64% of UCSF ED patients it attempts.

“I can get through the calls really quickly. I’m utilizing my time much, much more effectively, I’m killing two birds with one stone. To have the technology is so much easier. I don’t know how we were doing this before.”

What have been the patients’ reactions to the automated calls?

I liked the idea that I could personalize the automated system with my voice instead of having a robotic voice. In the beginning, I did not want to do the recording, but then I realize that when I call them back, the patients know it’s me on the phone. It’s like the patients know me. I didn’t understand just how powerful that could be. People will recognize you, and it’s very comforting to them. In a big impersonal place like this, it means the world to people. It feels like you’re truly connecting with the patients.

99% of the time patients are blown away that we would take the time to call them back. They’ll say to me, “Hey, I talked to you before in January when I had a headache, I can’t believe you’re calling again.” I respond, “Yeah, I know, this time I’m calling about your sore throat from this month.” I can go right into Cipher’s online platform to see exactly what’s going on with the patients. People are amazed that we’re calling them back and they really think that this is a personalized system.
I’ve even started calling patients that left without being seen. It is a really great way to touch base with patients who we know we didn’t do a good job with. I call them and say, “My medical director is really worried that you didn’t stay for your visit.” It’s a whole new culture shift. Instead of just moving on because we’re busy, we can say, “Hey, we made a mistake, we didn’t see you, what can we do for you?” Patients have choices too. We’re like an airline, they don’t have to choose us.

**Follow Up at a Glance:**

Over the course of ten months, Voice was able to reach 3,614 patients who had issues related to their transitions of care and satisfaction. These patients were routed directly to UCSF nurses. The nurses were able to resolve patient issues quickly, typically within 18 hours of when the patient identified a problem.

How are you able to reach 64% of your population with the automated system?

We have posters up in all of the rooms telling them to expect a phone call. The main thing is these posters. I put them up everywhere, they’re all over the place. Now the doctors are saying it. When I call people back and they’ve been here from other visits they say, “Oh, it’s you again, now I have to go to orthopedics, are you going to help me with that too!” We also have after-visit summaries that highlight what we think is going on with the patient. There are pages and pages of [stuff]. I have one line: “You’re going to get a call from me inquiring about how you’re doing when you return home. Answer.”
Many of the patients you are reaching have complicated issues related to transitions of care and satisfaction. How are you able to intervene with patients and integrate their follow up into your day to day work flow in such a fast-paced, high-stress environment?

The system organizes my call. It organizes what I’m going to say. I’ll go on the dashboard and see, “Oh, this patient has trouble with their prescriptions,” and then I have an idea of how to initiate the conversation. In my head I’m thinking, *this call is going to be under five minutes, I can tell from the dashboard.* Okay, *this is their issue, I can focus on what I need to talk about.* Then I will lead them through the conversation. I can move through those calls really rapidly and what I try to do is save the satisfaction calls for when I have a little more time. I can rack up quite a few calls if I don’t get interrupted. I can get through the calls really quickly. I’m utilizing my time much, much more effectively by killing two birds with one stone. To have the technology is so much easier. I don’t know how we were doing this before.

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**Was implementation of the calling system complicated?**

Everything was already set up other than the recording — the platform, the dashboard. All I had to do was show up, make a recording, and BOOM! the next day, I’m already using the thing. I was amazed at the ease at which it was set up and how responsive Cipher was.
What have you learned about your patients through the Voice program?

I’m able to give feedback to the whole department. And it’s not just feedback about a patient that said, “Yay that was great!” I’m able to give them stories — paragraphs — about what’s going on with our patients. We didn’t get this type of feedback about our patients at all before. I even send out a monthly newsletter. It also holds people accountable. It’s about recognizing that we are all human. The staff at the ED has long days. Maybe after ten hours of triaging a nurse doesn’t have the best attitude, but to the patient, this could look horrifying. I send these detailed stories out and I say that this is not meant to make anyone feel bad, but it starts to make people feel accountable. They think, oh, I wonder if it was me that this patient was upset with, I was triaging that Tuesday. The reality is, we work in a very complicated, challenging environment, and sometimes we forget that patients have no idea what’s going on because they can only focus on themselves.
Conclusion

In the fast-paced, high-volume world of the ED, following up with patients can prove to be a challenge for care providers due to the amount of time it takes to call patients, identify issues, and solve problems. By implementing Voice, UCSF Medical Center was able to streamline patient follow up and create positive touch points with patients after they leave the ED, fulfilling a critical component of a patient’s ED visit.

For the care providers at UCSF Medical Center, CipherHealth’s program creates meaningful, efficient, and effective follow up. Voice identifies the patients with issues that require additional attention, while simultaneously providing care coordinators with the information they need to make their calls organized and productive. This improvement in care transitions has led to reductions in readmissions and improved satisfaction among UCSF patients. Overall, Voice helped UCSF better communicate with patients and helped patients better understand how to stay on the path to wellness.
About Us

About CipherHealth
CipherHealth is a New York City-based company founded in 2009 focused on creating solutions that help care providers effectively and efficiently to provide quality care for their patients. CipherHealth leverages technology to make communication between care providers and patients easier, engaging, and more meaningful. For more information, please visit www.cipherhealth.com.

About UCSF
UCSF Medical Center consistently ranks as one of the top 10 hospitals in the United States. Recognized for innovative treatments, advanced technology, collaboration among health care professionals and scientists, and a highly compassionate patient care team, UCSF Medical Center serves as the academic medical center of the University of California, San Francisco. The medical center’s nationally preeminent programs include children’s health, the brain and nervous system, organ transplantation, women’s health and cancer. It operates as a self-supporting enterprise within UCSF and generates its own revenues to cover the operating costs of providing patient care.