



Nomination

The “How to” stream

Tilbury District FHT

Team-Based Transition Management- A Hospital Discharge Follow-up Process



The achievement is a Hospital Discharge follow-up process and tools focusing on “How To”:

- Implement a team based and patient-centered approach to manage transitions from hospital to home in a primary care setting
- Capture/identify discharged patients using your EMR
- Follow-up with ALL in-patient discharges within 7 days (no triaging, no eligibilities)
- Efficiently perform a medication reconciliation on discharged patients
- Integrate timely screening tools for internal/external referrals (Case Management, LHIN Home/Community Care, Malnutrition, Diabetes)
- Utilize the interdisciplinary team to increase capacity in the hospital discharge follow-up process
- Incorporate different modules of the process depending on available resources

This achievement was conceptualized and developed in partnership with a QI committee that contains multiple patient representatives. The patient representatives continue to provide feedback during monthly QI committee meetings aiding in the evaluation of the process. Patients are surveyed both in-person and on the phone to ensure that their voices are heard and have an impact on the direction of the initiative. This process was designed around patient-centeredness, and aims to assist patients during a vulnerable moment in their life, which is why it has been a priority to include patients throughout the entirety of the initiative.