Increasing Transitional Care Clinic Referrals at a Veterans Affairs Medical Center: A Quality Improvement Project

EMORY UNIVERSITY SCHOOL OF MEDICINE
Department of Medicine

Scott Gillet[1*], Steven Lewis[1*], Tucker Pope[1*], Daniel Resnick[1*], Tony Z. Zhuang[1,2], Tina D. Hunter[2], Carol E. Charles[2], Sherron S. Johnson[2], Viva L. Snowden[2], Jolly M. Thomas[2], Myrtle P. White[2], Daron Williams[2], Kendra N. Ivy[2,3], Alexander T. Matelski[1,2], Hanna Freeman[4], Jeffrey Cheng[5], Jack Novack[6], Tre'Cherie Crumbs[1,2], Robert DeStefano[2,3], Monee Amin[1,2,3], Dominic Cruz[1,2,3], Sanjay Ponkshe[1,2,3**], Joyanna Wendt[1,2,3***]

Affiliations: [1]Emory University School of Medicine, Atlanta, GA, [2]Atlanta Veterans Affairs Medical Center, [3]Morehouse University School of Medicine, Atlanta, GA, [4]Mission Hospital Medicine, Asheville, NC, [5]Ohio State University, Columbus, OH, [6]Prisma Health, Columbia, SC, *Co-primary authors, **Co-senior authors

Atlanta VA Medical Center
Patient Centered Care...Second to None...One Veteran at a Time

Introduction and AIM statement

- Patients admitted with heart failure and COPD exacerbations are medically fragile and high risk for ED and hospital readmissions at the Atlanta Veterans Affairs Medical Center (VAMC).
- In August 2022, the Transitional Care Clinic (TCC) was established to streamline outpatient care for medically fragile patients.
- We implemented quality improvement interventions to increase the number of TCC monthly referral orders from 13 to 15 by April 2024 at the Atlanta VAMC.

Methods

- The primary outcome measure was defined as the number of TCC referrals each month from VA teaching teams.
- Two "Plan Do Study Act" (PDSA) cycles were then implemented. PDSA #1 implemented on 6/1/2023 involved placing placards in all team rooms educating residents about the purpose of the TCC clinic, appropriate candidates, and how to place a referral.
- PDSA#2 implemented on 12/17/2023 involved a monthly education primer to guide teams in the TCC process flow.

PDSA Cycles and Fishbone Diagram

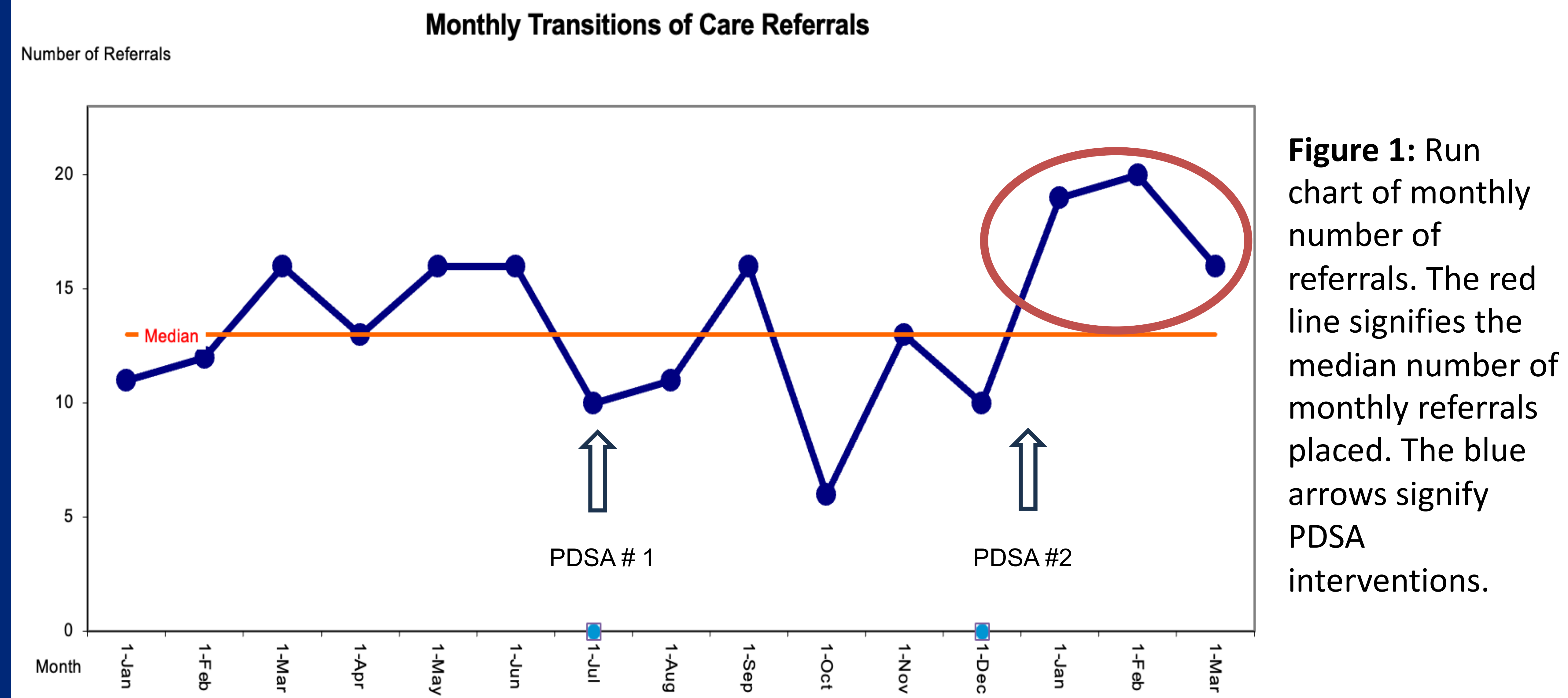

Figure 1: Run chart of monthly number of referrals. The red line signifies the median number of monthly referrals placed. The blue arrows signify PDSA interventions.

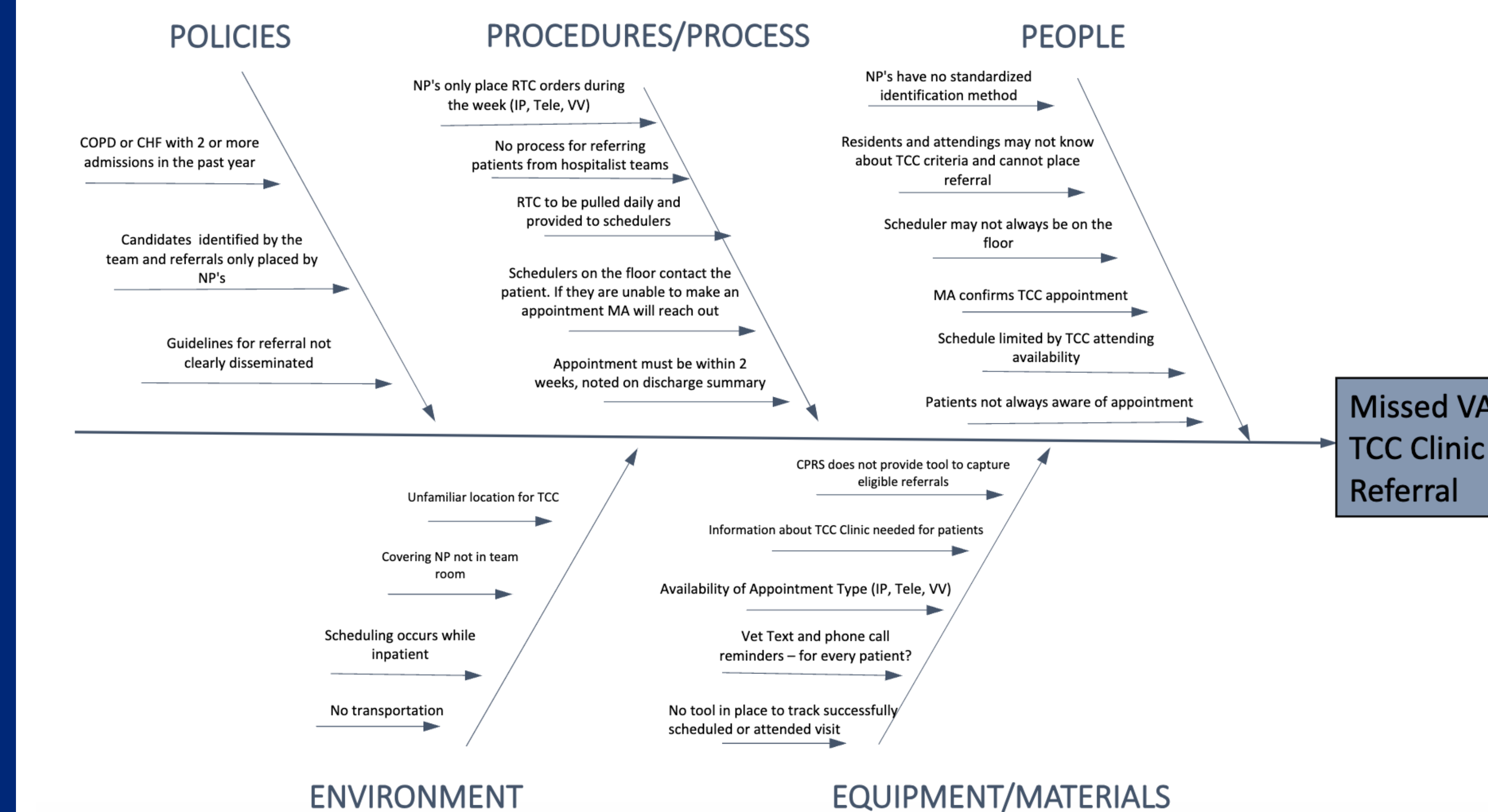

Figure 2. Fishbone diagram highlighting areas of intervention.

Characteristics	Overall Cohort (n = 191)
Sex	Male: 178 (93.2) Female: 13 (6.8)
Race	Black: 141 (73.8) White: 34 (17.8) Other: 6 (3.1) Unknown: 10 (5.2)
Appointment Type	In-Person : 97 (50.8) Telephone : 73 (38.2) Virtual : 21 (10.1)
Most Common Referral Diagnoses	Heart failure: 102 (53.4) COPD/asthma : 21 (11.0) Infection: 15 (7.9) AKI: 8 (4.2) CAD/angina: 8 (4.2) Syncope: 7 (3.6) Malignancy: 5 (2.6) CVA: 5 (2.6) Others: 20 (11.5)

Table 1. Patient characteristics and referral diagnoses.

Results

- Baseline, post-PDSA 1, and post PDSA 2 average monthly referrals were 13.6, 12.6, and 18.3 respectively.
- PDSA #2 significantly improved referral order rates by 135% from baseline.
- Most common referrals included heart failure, COPD exacerbation, AKI, and CAD/angina.

Conclusions

- The TCC is a robust mechanism for ensuring timely follow up for medically fragile patients.
- Placards placed in resident team rooms and monthly education primers are effective interventions to increase referral orders

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