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Breathing Easier When a Lung-Health Outpatient Team Has Your Back

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Breathing Easier a Lung Health Outpatient Team Has Your Back



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Background

The goal of this program is to improve the quality of life in COPD patients. An outpatient resource center provides post-discharge follow up to facilitative continuum of care. Frequent readmissions are common in the COPD patient population and have become a focus of the CMS value based measures. Research has shown there to be a 7.1% 30-day readmission rate for a principal diagnosis of COPD and a 20.5% for all-cause 30-day readmission. Understanding the disease process and progression is key if patients are to receive the maximum benefit from their medications. Many of these patients have comorbidities which leads to complicated medication regimens. An early follow up process is recommended by the Global Initiative of Chronic Obstructive Lung Disease (GOLD) to decrease exacerbation related readmissions. Upon discharge, many of these patients are not back to their baseline and are unclear about their treatment regimen. According to the Institute for Safe Medication Practices (ISMP), 94% of patients with COPD and asthma use their inhalers incorrectly which can lead to a reduction of efficacy and poor outcomes. Intensive outpatient monitoring, evaluation, and education are needed to prevent readmissions.

Methods

- ❖ A Lung Health Outpatient Resource Center was assembled using the resources of a multidisciplinary team.
- ❖ The goal is to improve the quality of life and decrease readmissions through the continuum of care.

Methods

- ❖ Prevention strategies are initiated. Pharmacologic and non-pharmacologic interventions are used to complement the individual's treatment goals.
- ❖ The multi-disciplinary team was headed by the Respiratory Department and included: a nurse practitioner (ARNP), respiratory therapist (RT), registered nurse (RN), social work (SW), physicians, and pharmacy.
- ❖ Prior to a COPD patient discharge, an appointment is scheduled at the Lung Health Outpatient Resource Center. During the appointment, the ARNP, RT, and RN evaluate the patient and provides treatment as needed.
- ❖ Education about the COPD disease process and self-management are provided by the respiratory therapist.
- ❖ The team helps identify and reduce exposure to internal and external risk factors.
- ❖ If further interventions are indicated, physicians are notified.

Results

The program started in June of 2017 and data was collected for 9 months. A total of 56 patients were seen in the outpatient clinic; 5 were readmitted for all cause diagnosis and zero were admitted for COPD exacerbation. Results are shown in Table 1 and Figure 1.

Results

Table 1: Data collected for a 9 months period of number of patients seen, readmit, and prevented readmissions.

Month/Year	No of Patients Seen	Readmit	Prevented Readmissions
Jun-17	4	0	4
Jul-17	7	1	6
Aug-17	6	2	4
Sep-17	6	1	5
Oct-17	5	0	5
Nov-17	10	0	10
Dec-17	7	1	6
Jan-18	8	0	8
Feb-18	3	0	3
Total	56	5	51

Lung Health Outpatient Clinic Stats

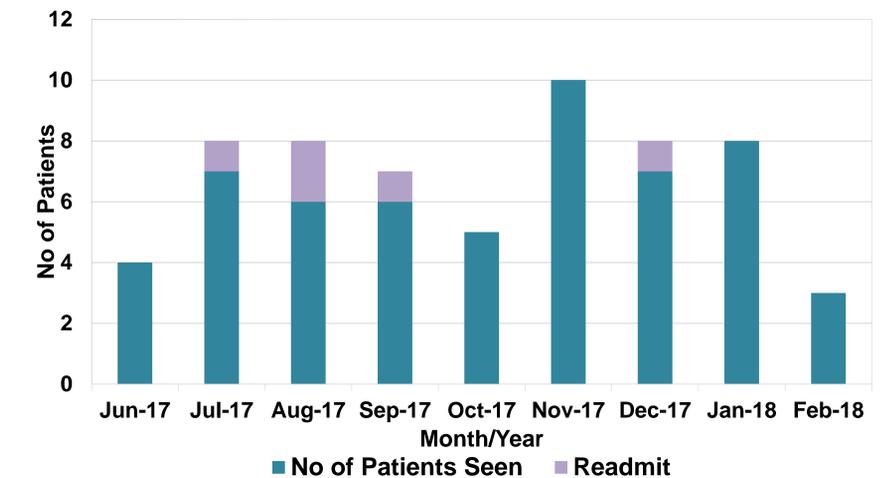


Figure 1: Graphic results for a 9 months period of number of patients seen, readmit, and prevented readmissions.

Conclusion

A multidisciplinary Lung Health Outpatient Resource Center made a significant impact in the reduction of COPD readmission rates.

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Disclosures

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