

Implementing Standardized Post-Surgical Follow-up Calls in Outpatient Surgery

Anne Speer, BSN, RN,
Barbara Wise, PhD, RN, CPNP-AC/PC,
Suzanna Fitzpatrick, DNP, ACNP-BC, FNP-BC

Problem Statement

Bundles of transitional care interventions, which include telephone follow ups (TFUs), have been shown to decrease preventable ED visits by effective communication practices.

Internal data from February 2022 - January 2023, identified 40% of TFUs completed. Assessment revealed a lack of formal workflow processes and validated TFU script.

Purpose and Goals

To implement the evidence-based Re-Engineering Discharge Tool-5 (RED-5) and formal delegation processes within the Mid-Atlantic community hospital's PACU.

Process Goals: 100%...

1. Delegation Adherence (5 RN/week)
2. Red-5 Adherence
3. Attempted and completed calls

Outcome Goals:

1. Number of Escalations
2. Follow-up Appointment Status

Methods

Setting: A Mid-Atlantic community hospital PACU

Population: 1435 outpatient surgical patients
Gynecologic 35%, Orthopedic 33%, General 13%,
Other 19% surgeries

Intervention: New delegation processes and the RED-5 TFU script

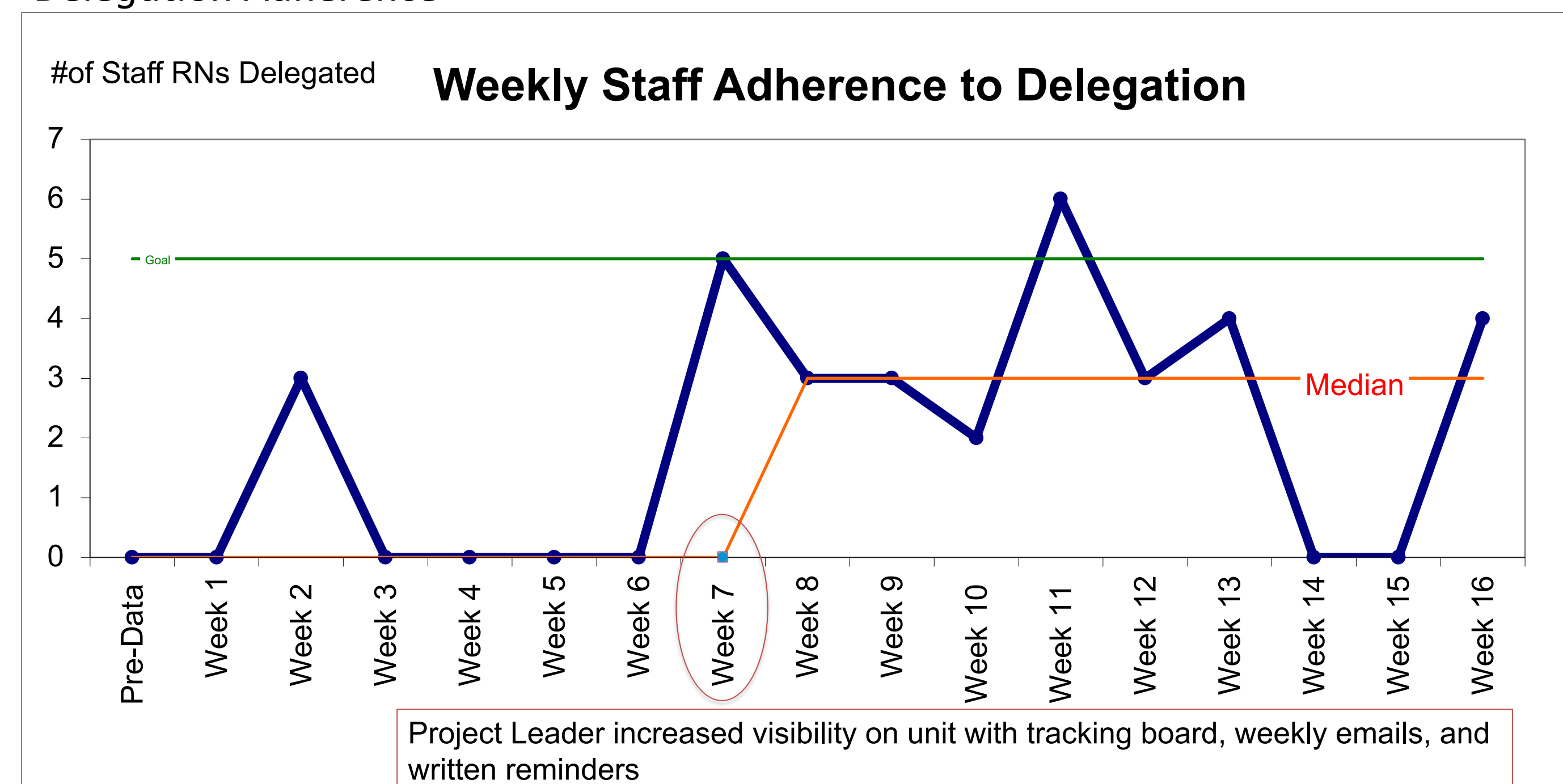
Measures: Bi-weekly audits of delegation, RED-5 adherence, calls attempted/completed, escalations, and appointment status. Used University of Maryland, Baltimore REDCap as an electronic data capture tool.

Implementation Strategies: Didactic training, TFU script simulation, data sharing with unit tracking board, staff huddles, and monthly staff meetings.



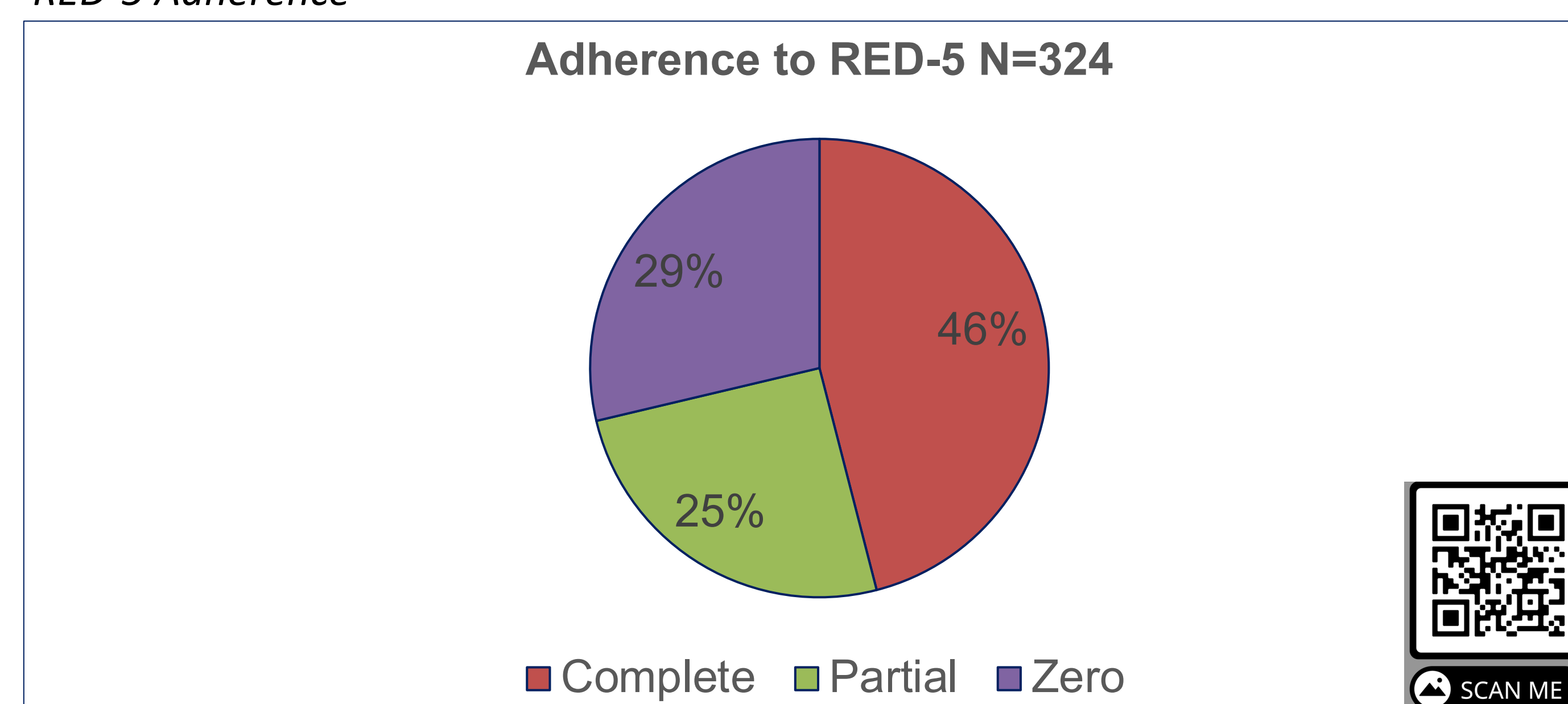
Results

Figure 1.
Delegation Adherence



Note. New delegation process documented 40% (n= 29) of the eligible 72 days.

Figure 2.
RED-5 Adherence



*Note. Of the 22.6% (n=324) calls completed, 71.3% (n=231) adhered partially to the RED-5. See QR code for visual breakdown of questions asked when not complete adherence.

Figure 3.
Eligible, Attempted, and Completed Calls

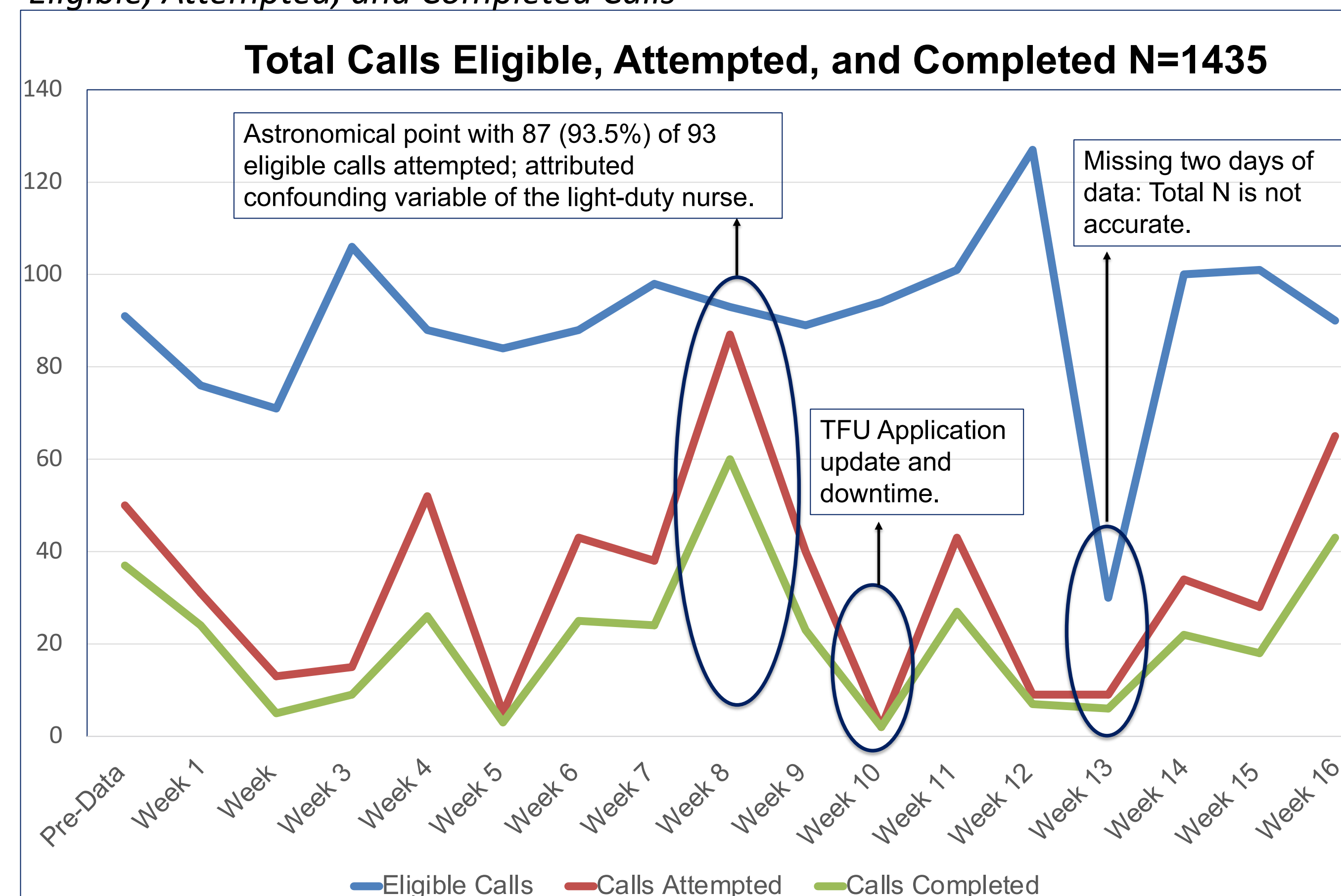
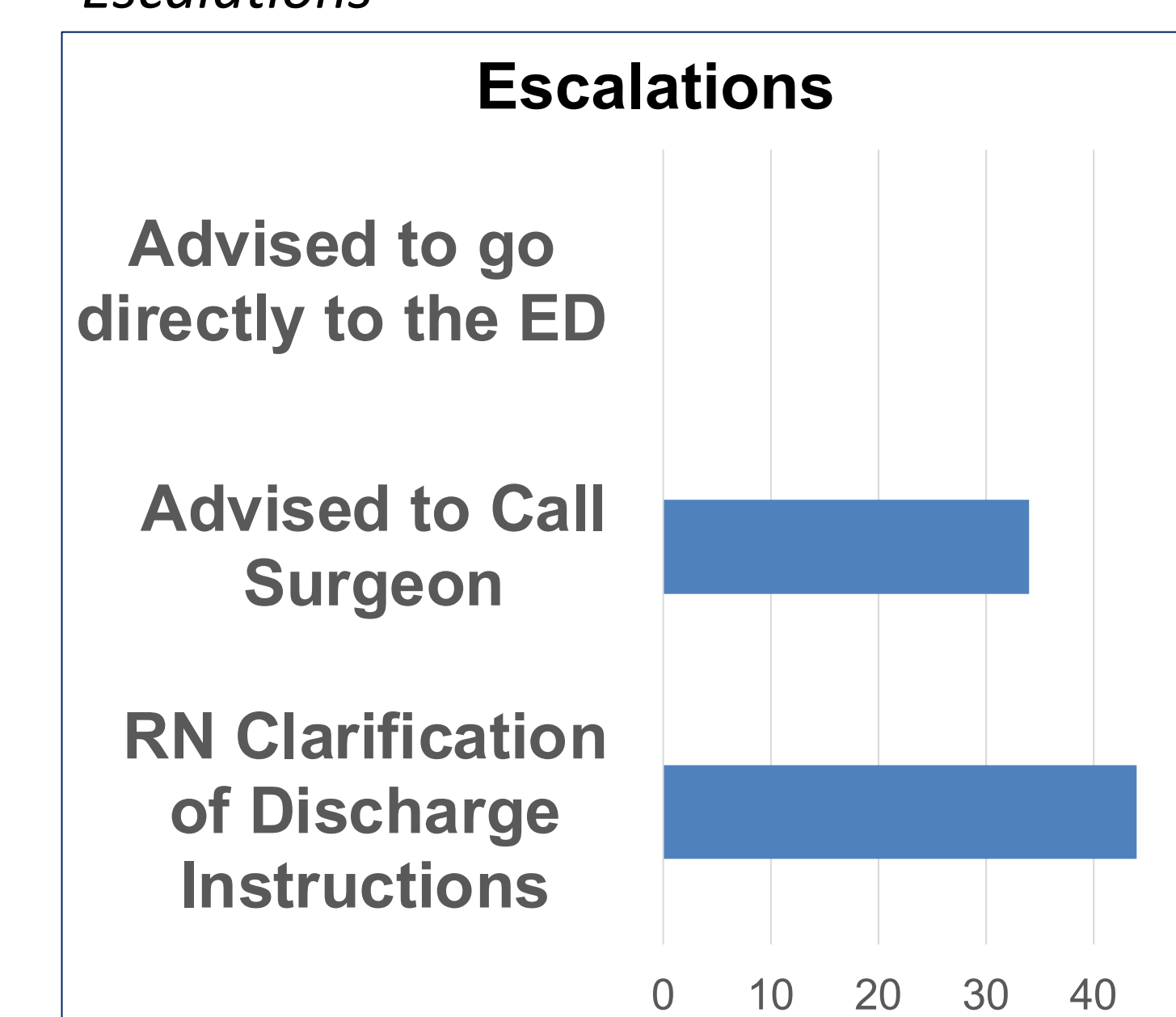
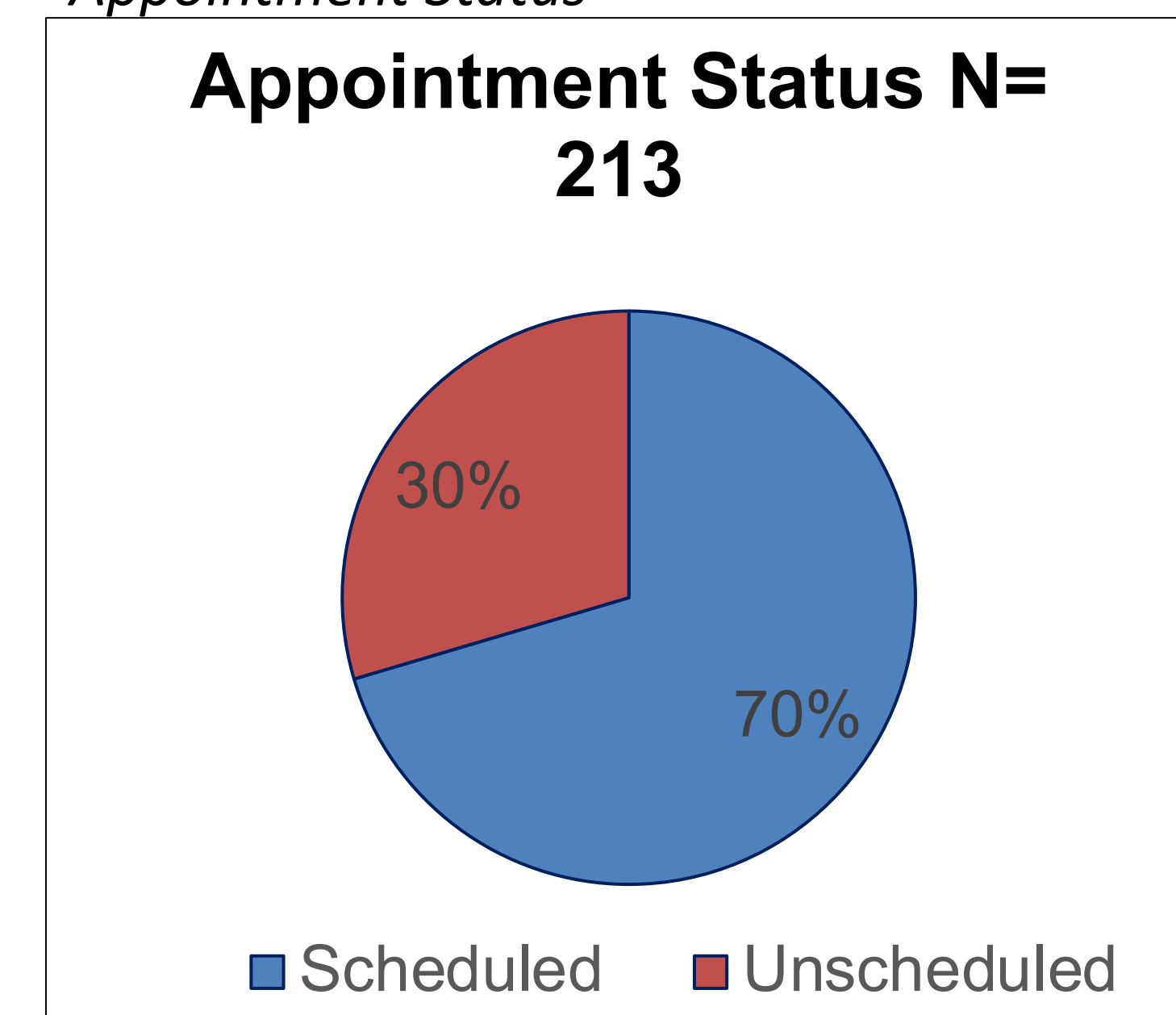


Figure 4.
Escalations



*Note. Of 324 calls completed, 18.2% (n=59) required escalation. Clarification of discharge instructions by RN (n=44) and/or advisement to call the surgeon (n=34). No patients were advised to go to the ED.

Figure 5.
Appointment Status



*Note. Of the 213 patients assessed, 29.6% (N=63) indicated an unscheduled follow-up appointment.

Discussion

Goal Achievement

- Staff Delegation workflow unchanged
- 70% RED-5 script adherence
- Unchanged number of attempted and completed calls
- 18% of patients required instruction clarification and/or surgeon referral
- 30% required appointment reminders

Impact: A standardized TFU script improved postoperative communication. Nationally, 48% of patients did not indicate they strongly understood their care at time of discharge; more than the 18% requiring education and/or referral this project identified.

Limitations: Technology & Leadership Transitions

Conclusions

Implications for Practice: This QI project supports standardized postoperative communication with the RED-5.

Next Steps:

1. Modify workflow processes to support adherence
2. Investigate barriers to fifth question
3. Embed RED-5 script within the TFU application

References

