

48 Hour Follow up

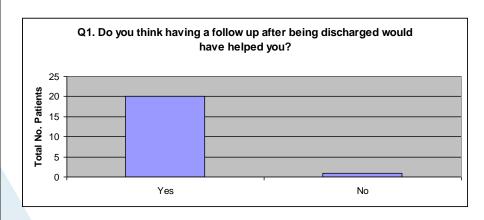
Chronic Care for Aboriginal People

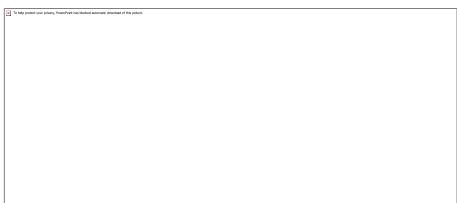
Background

- Developed out of the first Aboriginal specific Redesign Program
- 48 Hour Follow up has been implemented across NSW hospitals since May 2009
- For Aboriginal people over 15 admitted to a public acute facility
- Follow up consists of a phone call within 2 working days of being discharged
- Questions asked:
 - 1. General well being
 - 2. Did they receive their discharge medications or script
 - 3. Do they have their follow up appointments



Patient Survey Results



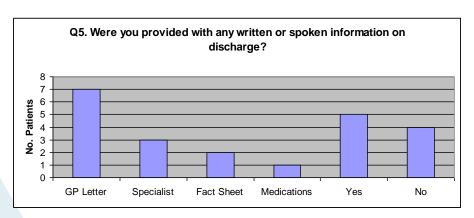


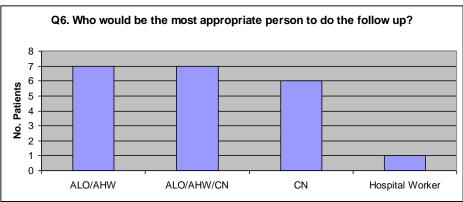


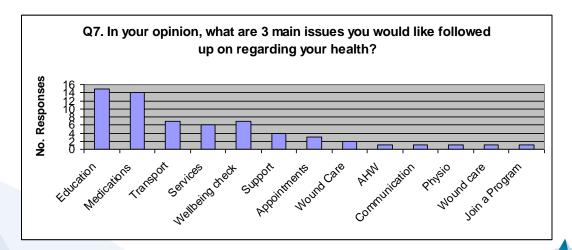




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What we're trying to achieve

- Improve health outcomes of Aboriginal people
- Reduce avoidable readmissions
- Improve communication and linkages with primary

care services



Eligibility

"Aboriginal patients aged 15 years and older with chronic disease are to be followed up within 48 hours or 2 working days of discharge from hospital, by any member of the agreed health provider team."



Scope

- Chronic diseases in scope are based on ICD-10 codes
- Patients admitted specifically for their chronic disease or if their chronic disease is a comorbidity
- Currently this process is only for patients admitted to the acute hospital ward



Key Performance Indicator

Numerator: The number of Aboriginal separations following an acute facility admission, who are followed up within 2 working days.



Denominator: Aboriginal people over 15 years who have an identified chronic condition regardless of LOS



Reporting

- Each LHD sends one report to the Chronic Care for Aboriginal People (CCAP) Program each month
- Number of people discharged from hospital identified as eligible for follow up
- Number of people followed up within 2 working days
- Number of people followed up after 2 working days
- Number of people who were un-contactable
- Number of people who declined follow up
- Number of people who were transferred to another hospital
- Number of people who were deceased



Data

- Over 90 hospitals implemented
- Average of 200 people receive follow up within 2 working days each month
- Additional 100 people receive follow up outside 2 working days
- Re-admissions decrease by 4% compared to those without 48hr follow up



Evaluation

2011 Recommendations

- Dedicated follow up positions
- Clinical involvement
- Home visits
- Supported medication and appointment compliance
- Assessment & education of health literacy
- Self management support
- Activated referrals & linkages with primary & tertiary providers

2013 Current Evaluation



Models

- Different in each LHD
- Centralised model
- Clinical models
- Aboriginal Health worker model
- Links with CDMP





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Thank You!