

Health

Extending the care team's reach and partnership with patients



A leading academic medical center uses UpToDate Patient Engagement programs to reduce readmissions and scale outreach

When University of Alabama Birmingham (UAB) Medicine, one of the top academic medical centers in the United States, found readmission rates were rising and nurses were struggling to keep up with the demand, they urgently began to seek solutions to address these critical areas.

Emily Dumas, LISCW, MPH, Manager of Care Transitions at UAB Hospital, says patient engagement programs were a key factor in helping UAB address the rising readmission rates as well as providing tangible solutions for such issues as cancellations, scalability, staff efficiency and patient empowerment. The health system was able to use UpToDate® Patient Engagement solutions from Wolters Kluwer to implement actions that directly impact patient care and nursing staff overload.

The goal with UpToDate® Patient Engagement, she explains, is to motivate patients to be active participants in their own healthcare journey. “We support, engage, activate, coach and ultimately partner with our patients through a multimodal approach to patient engagement and communication,” says Dumas.

Deploying the right solutions at key decision points

This is done through multiple modalities:

- Phone calls to collect patient information, schedule appointments and close gaps in care.
- Web-based programs to educate patients, family members, and caregivers to support shared decision-making and provide a documented report of the patient's education pathway.
- A dynamic reporting dashboard and other mechanisms to help monitor patients post-discharge, coach and promote self-management of their conditions.



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Dumas says she is confident that, through UpToDate Patient Engagement, the UAB care team is offering trustworthy content with behavior-based delivery, and can leverage analytics to provide key insights for patients struggling with decisions during the care process.

The benefits of using UpToDate Patient Engagement to engage patients were borne out in three case studies led by UAB to measure and demonstrate the improvements achieved.

Through their case studies, Dumas found that discharged patients needed to be consistently engaged throughout a care transition to have the confidence and ability to successfully manage their health at home. This level of engagement was necessary, she notes, for reducing readmissions and overseeing patient throughput.



Targeting patients in need to use staff time more effectively

Dumas wanted the care team to reach more patients after discharge, reduce staff time spent connecting with low-risk patients, and help discharged patients self-manage their chronic conditions.

“We implemented UpToDate Patient Engagement to extend the reach-of-care team beyond the clinical setting,” says Dumas. “We encouraged self-management, we motivated positive behavior, and we alerted the care team about people who may be at risk.”

The UAB care team has deployed multiple UpToDate Journeys program series to target both general discharged patients as well as patients with chronic conditions such as COPD, heart failure, pneumonia, AMI, and a few other diagnoses they want to track outside of the hospital.

Before UpToDate Patient Engagement, UAB nurses calling patients after discharge only connected with about 66% of their target population. Multiple nurses were calling patients through their average workday, but not every single patient engaged with the calls. Many calls resulted in the nurses leaving a voicemail or having to list them as a “reconnect later.”

By implementing UpToDate Patient Engagement to scale the care management process, more patients were reached post-discharge. Nurses combined with the engagement solutions connected with 21% more patients, reaching 80% of UAB's target population.

"Using UpToDate Patient Engagement allowed the system do the heavy lifting for us and allows nurses to only call back patients who need us most," Dumas says. "This call series enabled us to connect with those patients with red flags. If there's something going on that we need to know about, we have a nurse call the patient back either the same day or next day to check on those issues and hopefully prevent any readmissions."

This allowed nurses to be able to reach more patients post-discharge and to provide immediate interventions for patients in need. Prior to implementing the engagement solutions, just 5.2% of nurses' calls were made to patients with issues. With UpToDate Patient Engagement, 100% of the calls were made to patients with issues.

UAB saw an increase in nursing satisfaction as well because they were able to utilize their nursing skills to talk to patients with every single phone call, not just in attempts. This program was so successful that UAB expanded the use of UpToDate Patient Engagement. As a result, from September 2015 to June 2018, the UpToDate Journeys series made over 407,000 phone calls that did not result in a red flag. Staff was able to focus on only those follow-up calls that had red flags, culminating in saving the equivalent of 1.5 full-time employees per year, and UAB has even seen that number grow since.

"This is probably my favorite program in utilization at UAB right now," says Dumas, "so I'm very excited to hopefully see it expand in the future."



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Changing behavior to lower readmissions

Many hospitals and healthcare systems struggle to effectively manage the health of their discharged populations. Managing recovery, reinforcing key information and motivating behavior change are essential to avoiding complications and readmissions. The hospital readmission reduction program (HRRP) penalizes hospitals with high readmission rates, giving hospitals a financial incentive to lower their readmission rates.

The use of UpToDate Patient Engagement was also associated with better performance in this area. Medicare patients who did not engage with the engagement programs had a 19.4% readmission rate compared to 15.1% for those who did engage. UAB also witnesses better performance with readmission rates for patients with chronic conditions such as heart failure: Those heart failure patients that did not engage had a 24.8% readmission rate compared to 18.2% for those who did engage. Utilizing the call series resulted in measurable benefits across the care continuum for patients with chronic conditions and also general discharge patients of UAB.

Dumas found in practice and through UAB's three studies that UpToDate Patient Engagement was able to help meet the goals of improving patient care with a scalable solution that optimized the workflow and improved utilization of hospital resources. These improvements contributed to the enhancement of patient and staff satisfaction as well as reduction in readmission rates.

"Through our partnership with UpToDate Patient Engagement, we deployed the right solutions at key decision points for better experiences and outcomes," she says.



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About UAB Medicine

Located in Birmingham, UAB Medicine is one of the top academic medical centers in the United States and Alabama's largest single-site employer.

UAB Medicine is anchored by UAB Hospital, which has been named one of U.S. News & World Report's Best Hospitals and the Best Hospital in Alabama, the No. 1 Best Large Employer for 2021 by Forbes magazine, and it received a Top Ten Consumer Choice Award from National Research Corp. The hospital provides care to the sickest patients in the state and offers many services not available at other medical centers in the region, including research trials for promising new treatments.

www.uabmedicine.org/locations/uab-hospital

