MIH Utilization in Re-admission Reduction

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FORMATIVE EVALUATION
Evidence Based Research

- Timing of follow up visit
- Barriers for patients
  - Medication understanding
  - Medication affordability
  - Understanding of d/c instructions
  - Compliance
  - Dietary
  - Follow-up appointments
Fig 2. Comparison of Readmission Rate (RR) for Patients with (YF) and without (NF) follow-up visits on or before various days.


https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0200691
PROCESS EVALUATION
Our Program

• Case manager identifies patient and presents program
• Secure email referral
• Pt seen in hospital prior to discharge when able
• Follow-up visits
  — 24-48 hour post discharge
  — 7 day post discharge or as needed
Data so far....

- Since May 1\textsuperscript{st} 2019, 76 patients with STEMI/NSTEMI referred to program
- 25 patients participated with 1 readmission – 4\% 30-day readmission rate
- Of the 51 patients who chose to not participate, 11\% were readmitted within 30 days along with several ER and Observation admissions
- Since June, no ER or Observation admissions were noted with participating patients
OUTCOME EVALUATION
Case Study

- 76 y/o female, STEMI with 100% LAD, 4 stents and IABP placement post cath
- EF 30%, previously on no medications
- Discharged home with the following medications:
  - Lisinopril
  - Metoprolol
  - Brilinta
  - Furosemide
  - Atorvastatin
  - Pantoprazole
  - Aspirin
Case Study

• Returned to ER and admitted to OBS less than 24 hour post discharge due to syncopal episode

• What happened?
  – Patient’s medication directions were “take once daily”…so she did…all at the same time.
  – Pt was walking up and down steps
  – Pt figured it was from medications…so she randomly split her meds daily and took at different time, but had no idea what each one was for
Case Study

• Interventions
  – Medication review
  – Dietary review
  – Discharge instruction education
  – Cardiac Rehab
Contact Information

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