



# A Communiqué to North East LHIN Primary Care Partners

## From the Desk of Louise Paquette, North East LHIN CEO

July 2016

### Reducing Hospital Readmissions through Follow-Up Visits within Seven Days of Discharge

Hospital readmissions have an impact on our entire health system from affecting patient outcomes to ED wait times to overall system sustainability. The most recent Ministry-LHIN Accountability Agreement (MLAA) scorecard shows readmission of patients within 30 days of discharge from hospital (for HIG group conditions) at 17.8% for the NE LHIN region, with the highest percentage being those patients who suffered from congestive heart failure.

#### Research Says...

Research in the *Journal of the American Medical Association* ([Hernandez et al, 2010](#)) examined associations between outpatient follow-up within seven days after discharge from a heart failure hospitalization and readmission within 30 days.

*"Patients who are discharged from hospitals that have higher early follow-up rates have a lower risk of 30-day readmission."*

*"Not only is it important that early post-discharge follow-ups occur, it is also essential that the patient is connected with the right health care provider."*

[Czarnecki et al](#) (2013) examined the aftercare experienced by 56,000 higher-risk patients with prior cardiovascular disease or diabetes who had been sent home from an Ontario ED with a diagnosis of "chest pain." The study discovered that 25% of these patients had not seen a physician through follow-up within 30

days. Further research revealed that patients who saw a cardiologist following their ED visit had a significantly lower risk of death or myocardial infarction at one year compared to people seeing a primary care physician only.

#### One local example: Powassan and Area FHT

This FHT piloted an **In-Patient Hospital Discharge Program** to reduce the rate of readmission, use of the ED, and to increase access to the right provider. Patients who are discharged now receive a check-in call from one of their nurses. Last fall, Powassan presented the program and its EMR tools at the Telus Health Symposium in Sudbury. It hopes to share these tools with other FHTs. It has also drawn on the work of the City of Lakes FHT in creating its processes.

*"The phone call assessment occurring 24-72 hours post-discharge ensures that the patient is being seen by the right provider at the right time. If a patient's needs are better suited for a Social Worker, then the follow-up assessment phone call can determine this," said ED Anna Gibson-Olajos, Powassan FHT.*



Working alongside our Quality Lead, Dr. Reena Dhatt, quality drives everything we do.

The week after discharge can be a high-risk and vulnerable time for patients. However, this time-period can be positively impacted by primary care providers.

Patients who receive a timely follow-up call or visit from their primary care provider are more likely to remain out of hospital.



#### What can you do to help improve re-admission rates?

- Sign up for eNotifications through OntarioMD's Hospital Report Manager (HRM) to receive real-time electronic notification whenever a patient has been discharged from the ED, or admitted or discharged from hospital in-patient units to improve follow-up care. Contact [report.manager@ontariomd.com](mailto:report.manager@ontariomd.com) to enroll.
- Find out how you are performing. Health Quality Ontario offers a free, confidential Primary Care Practice Report that provides information about your practice while comparing it to regional and provincial data. Click here to sign up.

For information please contact: Jennifer MacKinnon, Primary Care Officer, NE LHIN [Jennifer.Mackinnon@lhins.on.ca](mailto:Jennifer.Mackinnon@lhins.on.ca)



# NE LHIN Health Care Leads

The NE LHIN benefits from the knowledge, advice and work of Health Care Leads to assist LHIN in decision making required to maintain the region's health care priorities. Each Lead is responsible for a particular facet of health care and supports the NE LHIN in their work. All Leads report directly to the NE LHIN CEO, Louise Paquette.

**Dr. Paul Preston - NE LHIN Primary Care Lead**

*Medical Director and Chief of Primary Care, North Bay Regional Health Centre  
Family physician, Blue Sky Family Health Team*

**Dr. Derek Manchuk - NE LHIN Critical Care Lead**

*Staff Anesthesiologist/Intensivist and Associate Medical Director of the Critical Care Program, Health Sciences North and Assistant Professor, Northern Ontario School of Medicine*

**Dr. Gary Bota - NE LHIN Emergency Department Lead**

*Section Chair of Emergency Medicine, Northern Ontario School of Medicine*

**Dr. Reena Dhatt - NE LHIN Clinical Quality Lead**

*Associate Professor, Family Medicine, Northern Ontario School of Medicine  
Family physician, NEOMO Medical (Northeastern Ontario Medical Offices)*

**Barbara Kiely - NE LHIN Primary Care Lead for Diabetes/Chronic Disease Management**

*Nurse Practitioner, Certified Diabetes Educator*

**Dr. Boji Varghese - NE LHIN Endocrinologist Lead for Diabetes**

*Endocrinologist; Medical Director of Centre for Complex Diabetes Care and Bariatric Program, Health Sciences North*

**Dr. David Fera - NE LHIN Primary Care Co-Lead for the Algoma Sub-Region**

*Chair/CEO, Algoma District Medical Group and Medical Director of the Algoma Diabetes Education Care Centre*

**Dr. Jodie Stewart - Primary Care Co-Lead for the Algoma Sub-Region**

*Family Physician with Algoma District Medical Group and VP of Medical Affairs, Group Health Centre*

**Dr. Yves Raymond - Primary Care Lead for Cochrane Sub-Region**

*Family Physician and Lead Physician, Timmins Family Health Team*

**Currently Recruiting – Primary Care Lead for Sudbury/Manitoulin/Parry Sound Sub-Region**