

# AFTER DISCHARGE ASSESSMENT OF PATIENT TRANSITIONING (ADAPT) TOOL

EARLY DIGITAL ENGAGEMENT AFTER DISCHARGE SOLVES TWO BLIND SPOTS IN ED CARE: ENSURING SAFE TRANSITIONS & DELIVERING REAL-TIME CLINICIAN FEEDBACK ON PATIENT EXPERIENCE

## THE CHALLENGE:

Because emergency department (ED) care is episodic, there is often no connection with patients after discharge. This is a blind spot in ED care—we don't know whether patients are recovering, if their prescriptions were filled, or if recommended follow-up was completed. This can lead to gaps in patient safety (e.g., an unexpected change in their condition or inability to obtain a prescribed medication) with potentially harmful outcomes. Additionally, while patients are sometimes asked about their ED experience on comprehensive surveys with meager response rates, this feedback is not always given directly or expediently to ED clinicians. This is another blind spot: ED clinicians may not hear timely, positive feedback about their excellent care (missing an opportunity for increased clinician engagement and wellbeing), or constructive feedback on areas their practice could improve to optimize patient experience.



## THE SOLUTION:

US Acute Care Solutions (USACS) is the national leader in ED innovation. USACS has developed a tool called After Discharge Assessment of Patient Transitioning (ADAPT) that solves both blind spots at scale. With ADAPT, every discharged patient is sent a short series of questions by email or text 24 hours after USACS receives patient data from the hospital (within 7 days of the ED visit).

Survey questions include:

- 1) "Are you feeling better since your visit?"
- 2) "Were you able to fill your prescriptions?"
- 3) "Were you able to arrange follow up care?" If any answer is "No," patients are asked if they would like a follow-up call, and if "Yes," USACS attempts to contact the patient to remediate the issue.

Finally, patients are asked:

- 4) "Would you recommend your USACS emergency room physician, nurse practitioner or physician assistant to your friends?"
- 5) Patients can also enter free text feedback. Answers to these questions are rapidly delivered to ED clinicians and their Medical Director in a user-friendly dashboard that enables clinician engagement and training on optimal patient experience.

## THE RESULT:

As of January 2023, the ADAPT program is active at 39 USACS sites and has received more than 60,000 responses. The response rate for ADAPT is 9.8% overall, substantially higher than the response rate of 1-4% for commercial patient experience surveys. Among ADAPT respondents, 19% report not feeling better since their visit, 16% were not able to arrange follow-up care, and 7% were not able to fill their prescriptions. Among those with a reported issue, 15% wanted to be contacted about their ED care, all of whom were contacted by USACS or hospital staff. ADAPT addresses frequent and substantial post-discharge blind spots to measurably improve patient safety. Importantly, 62% of respondents provide free text comments about their care, which are delivered directly to the treating clinicians. Feedback is mostly positive, but it also comes with suggestions for improvement. ED clinicians appreciate this feedback, which can be used to reinforce good behaviors and correct suboptimal ones. ADAPT thus tangibly connects patients to ED clinicians to improve care transitions and preserve patient safety.

