Review of Hospital Follow Up Clinic in its First Year Emma Renwick, B.S., David Naylor, M.D. University of Kansas Medical Center, Kansas City, KS, Department of Internal Medicine

Received Aug. 21, 2024; Accepted for publication Aug. 26, 2024; Published online Aug. 27, 2024 https://doi.org/10.17161/kjm.vol17.22703

Introduction. Hospital readmissions continue to pose a challenge for both patients and hospitals nationwide, and strategies to reduce readmissions remain a major area of focus within quality improvement research. The purpose of this study was to investigate the effectiveness of Pre-Visit Planning (PVP) by the KU Internal Medicine follow-up clinic in reducing hospital readmission within 30 days. Pre-Visit Planning was implemented in December of 2022 and consists of a thorough and stepwise chart review of patient electronic medical records prior to patient encounters at the clinic.

Methods. Retrospective chart reviews that analyzed the implementation of PVP were performed for all patients seen in the clinic for hospital follow-up from December 1, 2022, through May 31, 2023. A readmission rate was then calculated for this group using the dependent variable of hospital readmission in 30 days, and it was compared to the 30-day readmission rate for all Internal Medicine inpatient teams.

Results. Between December 1, 2022, and May 31, 2023, within the hospital follow-up patient population, 11.2% (10 out of 89 total patients) were readmitted within 30 days of hospital discharge. The readmission rate calculated for all Internal Medicine inpatient teams within the same time frame was 11.6%. This demonstrated a 0.4% difference.

Conclusions. The hospital follow-up clinic, through its use of PVP, improved hospital readmission rates in Internal Medicine by 0.4% between December 2022 and May 2023. Although this is a small reduction, it is a positive outcome worthy of additional research and analysis.