**QPD - Post-discharge Follow-up Phone Call Script**

This form reinforces the information provided to the patient at discharge. The patient’s discharge information should be available to the interviewer at the time of this call.

### A. Health Status Diagnosis

**CALLER:** Before you left the hospital, [name] spoke to you about your problems / injuries during your hospital stay. Using your own words, can you explain to me what your main problems / injuries were?

**CALLER:** What did the medical team at the hospital tell you to watch out for to make sure you’re o.k.?

*Review specific symptoms to watch out for/things to do for this diagnosis (e.g., monitor wounds, injury specific).*

*Measure patient’s understanding of disease-related symptoms or symptoms of complications (e.g., review diagnosis pages from AHCP).*

**CALLER:** Do you have any questions for me about your main injuries? Is there anything I can better explain for you?

**CALLER:** Since you left the hospital, do *you* feel your main problem, has improved, worsened, or not changed?What does your family or caregiver think?

**CALLER:** Have any new medical problems come up since you left the hospital?

**CALLER:** Have you spoken to anyone about this problem? Prompt if necessary: Has anyone:

* Contacted or seen GP?
* Gone to the Emergency department / OOH GP services or walk-in centre?
* Gone to another hospital/provider?
* Spoken with visiting nurse or community rehabilitation services?
* Other?
* Following the conversation about the current state of the patient’s medical condition, consider recommendations to make to the caregiver, such as calling GP, going to emergency department, etc. Record any actions and recommendations on documentation sheet.

### B. Medicines

**CALLER:** I’m going to ask you a few questions about each one of your medicines to see if there is anything I can help you with. We will go through your medicines one by one.

First of all, I want to make sure that the medicines you were given were the right ones. Then we’ll discuss how often you’ve been able to take them and any problems or questions you might have about any of them.

*Go through each medication systematically using the pharmacy ‘yellow card’*

**If patient has been prescribed medicines that the patient hasn’t mentioned,** ask whether he or she is taking that medicine.

* ***If yes,*** *go through the list of medicine questions.*
* ***If not,*** *probe as to why not.* ***If patient is unaware of the medicine,*** *make a note to check with discharge physician as to whether patient is supposed to be taking it, whether a prescription was issued, etc.*

**CALLER:** Have you been using the medicine chart (in your care plan) that was given to you when you left the hospital?

***If yes,*** *provide positive reinforcement of this tool.*

***If no,*** *suggest using this tool to help remember to take the medicines as directed.* ***If patient has lost care plan,*** *offer to send a new copy of AHCP by mail or email*.

**CALLER:** Do you or your carer/family have any questions today regarding your medicines?

*\*\*Please note on the documentation sheet any recommendation you made to the patient and follow-up actions you took.\*\**

### C. Clarification of Appointments

**CALLER:** Now, I’d like to talk about any appointments and tests that you have coming up. Can you please tell me:

What is the next appointment you have scheduled?

Who is your appointment with?

What is your appointment for?

When is this appointment?

Is there anything that might get in the way of your getting to this appointment?

* ***If yes,*** *Let’s talk about how we can work around these difficulties.*
* ***If patient plans to keep appointment, ask,*** *Do you have the phone number to call if something unexpectedly comes up and you can’t make the appointment?*
* ***If patient can’t keep appointment,*** *get the patient to reschedule: As soon as we hang up, can you call to reschedule your appointment?* ***If patient is unable or unwilling to make the call to reschedule,*** *offer to make the call*

Do you have any other appointments scheduled? ***If yes,*** *repeat the set of questions.* ***If no,*** *but other appointments are expected, explore this*

### D. Coordination of Post-discharge Home Services (if applicable):

**CALLER:** Have you been visited by any community services or do you have an appointment with anyone since you came home?

***If no, but were expected,******CALLER:*** *I will call to make sure they are coming soon/ offer contact number*

**CALLER:** Have you received all of the equipment that was supposed to be delivered?

**If no,** **CALLER:** I will call to make sure it is coming soon **OR** offer a contact number.

**CALLER:** I understand that [name of caregiver] was going to help you out at home. Has [name of caregiver] been able to provide the help you need?

***If no,*** *explore this..*

### E. What To Do If a Problem Arises

**CALLER:** Before we hang up, I want to make sure that if a medical problem arises, you know what to do. If you’re having an emergency, what would you do?

*Give appropriate response*

**CALLER:** And what about if you[give example of urgent but not emergent problem] in the evening? What would you do then?Check if patient knows how to reach the doctor after hours. **Major Trauma practitioner is available every day between 08:00 – 16:30,** check that the patient knows that and can find the number on the AHCP. Confirm understanding.

**CALLER:** And what about if you are having a medical problem that is not an emergency, such as [give disease-specific examples] and want to be seen by your doctor before your next scheduled appointment, what would you do?

*Make sure that they have GP’s number/knowledge of 111*

**CALLER:** Do your caregivers/family have these numbers also?

**If no, ask:** Would you like me to email or mail a copy of your care plan to them?

**If yes,** confirm address or email.

**CALLER:** That’s all I needed to talk to you about. We’ve covered a lot of information. What questions can I answer for you?