Enchancing Patient Portal Enrollment for Improved Quality of Post-Discharege Care at an Academic Medical Center

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The time immediately following discharge from a hospital admission is a vulnerable period for patients where preventable adverse events commonly occur due to discontinuity of care. Portals allow patients the opportunity to conveniently use one platform to view their health record, communicate with their care team, participate in telemedicine, and view a list of their current medications in an effort to improve the continuity of care. Their use has been shown to promote patient engagement, improve patient satisfaction, and ensure smooth continuity of care. The purpose of this study was to develop a standardized process to improve inpatient enrollment in the UCHeatlh electronic patient portal, My Health Connection. Researchers implemented various interventions throughout the 679-bed hospital including inpatient rooms and the discharge lounge. Interventions were designed to address barriers to adoption discovered during patient interviews. Interventions in the hospitals discharge lounge yielded the highest success rate. Researchers acting as volunteers in the discharge lounge over a trial period successfully enrolled 67% (n=9) of targeted patients using a scripted intervention designed to employ empathetic engagement. Implementing a standard process for patient portal registration at an appropriate stage during a hospital admission is an effective strategy for increasing portal adoption and mitigating risk during the post-discharge period. Utilization of volunteers for the intervention requires establishing a method of communication between the appropriate staff and volunteers to optimize volunteer time and balance their other responsibilities. Capitalization on the benefits of patient portals can help ensure the delivery of high value care for the postdischarge patient, improving outcomes and overall satisfaction for providers and patients.