

IMPROVING COMMUNITY RESOURCE REFERRALS FOR PEOPLE WITH EPILEPSY

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ABSTRACT

Purpose of Study: Social support and mental wellbeing are strong drivers for quality of life in people with epilepsy. Beyond the clinical environment, advocacy groups are able to provide useful resources to help support patients and families. This quality improvement project aimed to increase the baseline referral rate of patients from UCHealth outpatient epilepsy clinics to the local Epilepsy Foundation from an average of 1 referral per month to at least 5 referrals per month and sustain the increase for at least 6 months.

Methods Used: Baseline data was collected monthly from October to December 2022. The original referral process involved including the Epilepsy Foundation contact information in visit summaries so patients could contact them if desired. Between January 2022 and February 2024, multiple plan-do-study-act (PDSA) cycles were implemented including a newly created patient referral consent form to facilitate improved utilization of community resources. The sequence of PDSAs included: implementing the consent form in one test clinic, adding the consent form to the fellows' clinics, sending referral reminders to the providers, educating and involving the rest of the epilepsy providers (total of 9) in the new referral process, creating clinic folders for the forms, and involving one clinic nurse in the process. Referral data were collected monthly from the local Epilepsy Foundation.

Summary of Results: Baseline data collection involving the original referral process revealed an average of 1 successful referral per month out of over 500 patient epilepsy visits per month at UCHealth outpatient epilepsy clinics. After implementing the new consent form and the subsequent interventions, successful patient referral increased and was sustained above 5 for 13 months, reaching its highest number of 22 successful referrals in January 2024.

Conclusions: This study demonstrated successful improvement of community resource referrals in epilepsy clinics through the use of quality improvement methodology. This shows that simple and practical interventions in the outpatient clinics may help support patient social and emotional health outside of the hospital environment.

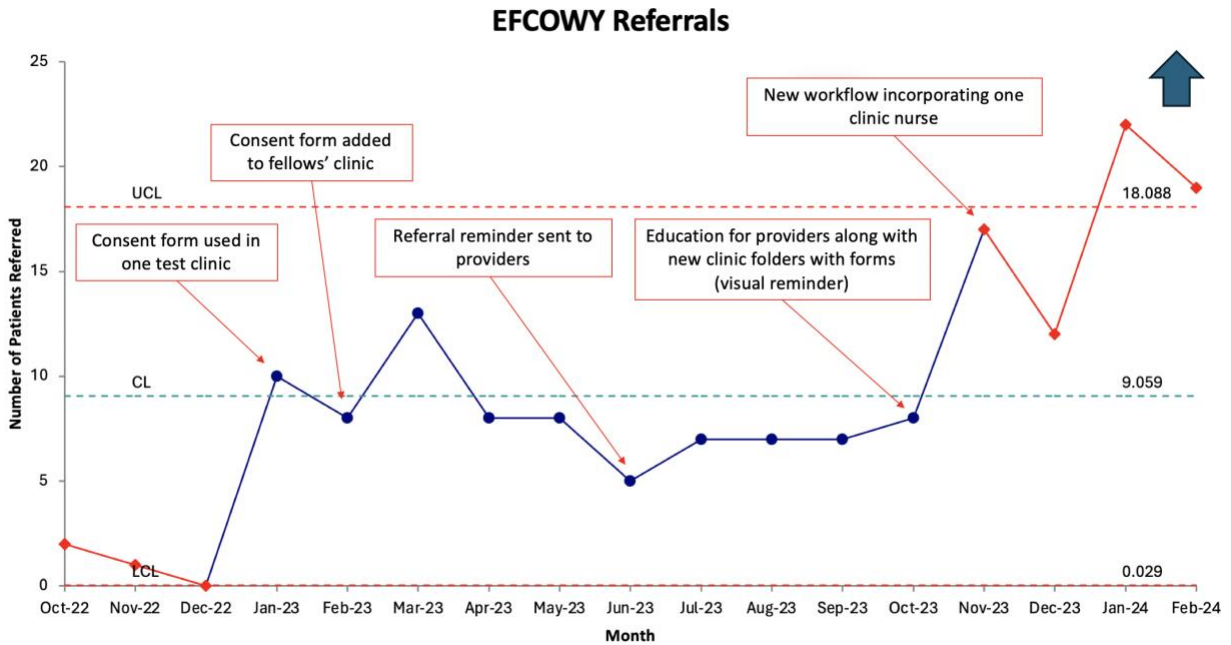


Image 1. C-chart tracking successful patient referrals to the Epilepsy Foundation over time. Red dotted lines representing upper and lower confidence limits surround the average of the monthly referral rates, represented by the teal dotted line. Annotations describe the months in which interventions occurred. Blue lines connecting months indicate stability, red lines connecting months indicate significant change. Blue arrow in the upper right-hand corner represents the direction of desired change.