Forging Relationships Through Communication and Collaboration Between ILD Centers and Community Pulmonologists Improves Patient Care

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Baseline Survey  Action Plans  Implementation  Follow-up  Sustainability Survey

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Consultation Leading to Consensus

ILD-C acted as a resource for CPs; barriers were identified and removed to allow for consultation on patients and ease of information exchange.

Methods of Sharing Information
- MDOs (remote access and in person)
- Regular updates with new information/clinical trial opportunities
- Recommendations on improving CP processes
- Consultation on challenging patients
- Support in patient management

[Communicating with my ILD contact by email and phone] was really helpful to get an idea from an expert that you are doing the right thing on a challenging patient. – CP in Virginia

Improved Patient Outcomes

Better communication and support from the ILD-C benefited patients.
- Fewer unnecessary biopsies
- Faster referral to ILD-C
- More clinical options for advanced patients
- Direct communication from confident clinicians

…I called [my ILD center contact] on his cell phone and if I was not able to transfer [my patient] right away, I can tell you that she would not have made it! – CP in Virginia

Next Steps: Forging Relationships at Your Center

What kind of model can you be?
- Mentor (supporting other hospitals to provide better service to their community)
- Consultant/Referral center (providing advice on individual patients as needed)

Who do you connect with?
- If you are a CP, find your local ILD center.
- If you are with an ILD-C, make a phone call to ask what barriers your CPs face.
- Connect with former fellows or colleagues
- Contact physicians who refer patients to you

How do you connect?
- Monthly updates
- Online resources–share and use it
- Share a cell phone number or direct line for consults
- Offer access to MDOs
- Visit ILD-C or CPs in person
- Review methods of referral, if needed

What to consider
- Ensure you have adequate staffing to maintain changes
- Anticipate technology hurdles and seek IT support

Physicians at both the ILD-C and CP level benefited from the relationships.
- Increased confidence in CPs
- Technology improvements
- ILD Satellite clinics established that can reach a new patient population

One ILD-C established a pulmonary clinic located half-way to a CP so they could reduce the distance that potential referrals would have to travel for consultation.

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Direct Connections

ILD centers (ILD-Cs) and community providers (CPs) connected through various methods:
- Exchange of direct phone numbers
- Addition to email distribution lists
- Travel to visit in person

Who did ILD-Cs connect with?
- Former colleagues/fellows
- Referring centers
- Satellite clinics of their hospital system
- Hospitals further away that could serve as a hub for referrals to ILD-C

Once the CPs are on the mailing list, we break those walls down and it becomes a lot easier for people to just reach out with a brief phone call. – ILD-C physician in Virginia

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ILI Center 20 total

Community Providers 2–5/center

Direct Connections  Consultation Leading to Consensus  Improved Patient Outcomes  Sustainable Improvement

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