



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

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

- MDDs (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 Texas

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

“ ...a lady with classic IPF on her CT scan was scheduled to have a biopsy the next week. They brought it to our [MDD] and we said this is classic. She had no serologic markers at all that were positive as classic UIP, verified amongst the whole group. And so the provider canceled the surgery. ”
– CP in North Carolina

“ 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

“ We have firsthand knowledge of what is available for our advanced patients and more confidence in determining if these patients need to be further referred to the ILD-C. ”
– CP in Texas



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 update regularly
- Share a cell phone number or direct line for consults
- Offer access to MDDs
- 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

Sustainable Improvements

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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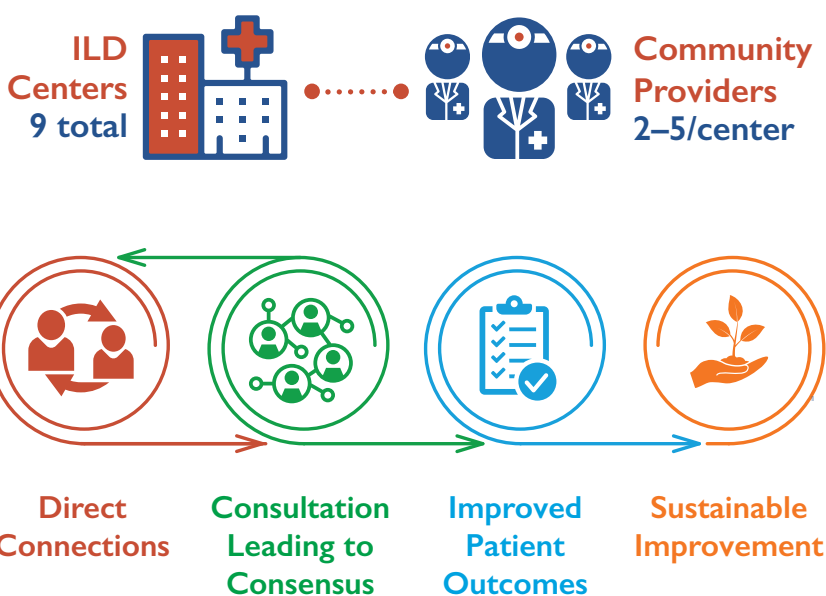


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Direct Connections

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