Assessing local Primary Care Referrals at a student-run transitional care clinic

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Background

Arbor Free Clinic (AFC) is a transitional care clinic in Redwood City run by Stanford University students. AFC aims to transition patients who face systemic barriers to affordable long-term healthcare options, specifically by connecting patients to local Bay Area primary care providers such as NEMS, Gardner, Ravenswood, Samaritan House, and San Mateo Medical Center, which is necessary for management of chronic conditions such as hypertension and diabetes.

Problem Statement

It has not been evaluated how many patients who are referred to local low-cost primary care providers by Arbor Free Clinic are able to successfully establish long-term primary care at these sites.

Methods

We included all patients seen at AFC from June 2021-December 2022 who had a primary care provider (PCP) referral placed during their clinic visit (n=245). We summarized data from follow-up calls to patients 2-3 weeks after their initial appointment, including status of their PCP referral and any barriers faced. Data was recorded by referrals volunteers during calls made in clinic 2-3 weeks post-patient visit. Responses involving PCP enrollment were collated and further evaluated to yield these results.
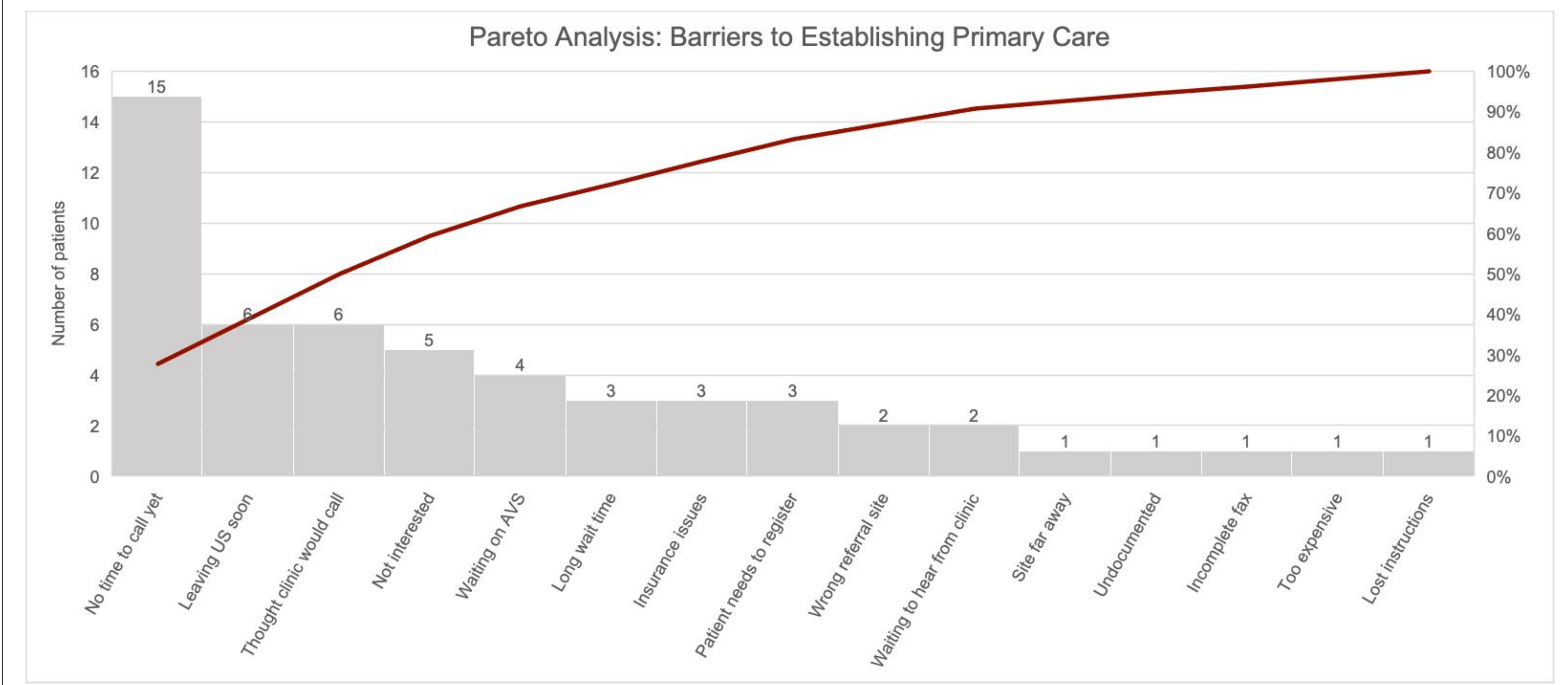
Results

PCP REFERRAL STATUS FROM FOLLOW-UP CALLS

Unknown	39.2%
PCP not contacted but interested	13.5%
PCP not contacted - not interested	8.6%
Attempted to contact PCP but barriers faced	13.5%
Registered/in process of registering	9.8%
Appointment scheduled	15.5%

N = 245 patients over 18 months

Pareto Analysis

We conducted a pareto analysis from a subset of follow-up calls conducted in the last 9 months (April-December 2022) for which more detailed referral status information was available. Per Pareto analysis, the most common reason reported by patients for inability to establish primary care was lack of time to call the PCP (n=15), followed by thinking the referral clinic would call them (n=6). Less prevalent reasons included plans to leave the U.S. soon, waiting on the after-visit summary from AFC which included referral details, long wait time before first available appointment at PCP site, insurance eligibility issues, and no longer interested in being connected with a PCP.

Pareto Analysis: Barriers to Establishing Primary Care

Conclusions & Future Directions

Most patients (58%, n=87/149 reached by follow-up) are unable to successfully connect with a PCP within three weeks of their AFC appointment. These findings elucidate a need for targeted interventions to reduce barriers for patients attempting to establish care and to motivate interested patients to contact their PCP. This report also demonstrates the value of placing follow-up calls to assess and improve the efficacy of transitional care provided by a student-run free clinic. We plan to expand follow-up data collected to inform future areas of improvement.

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