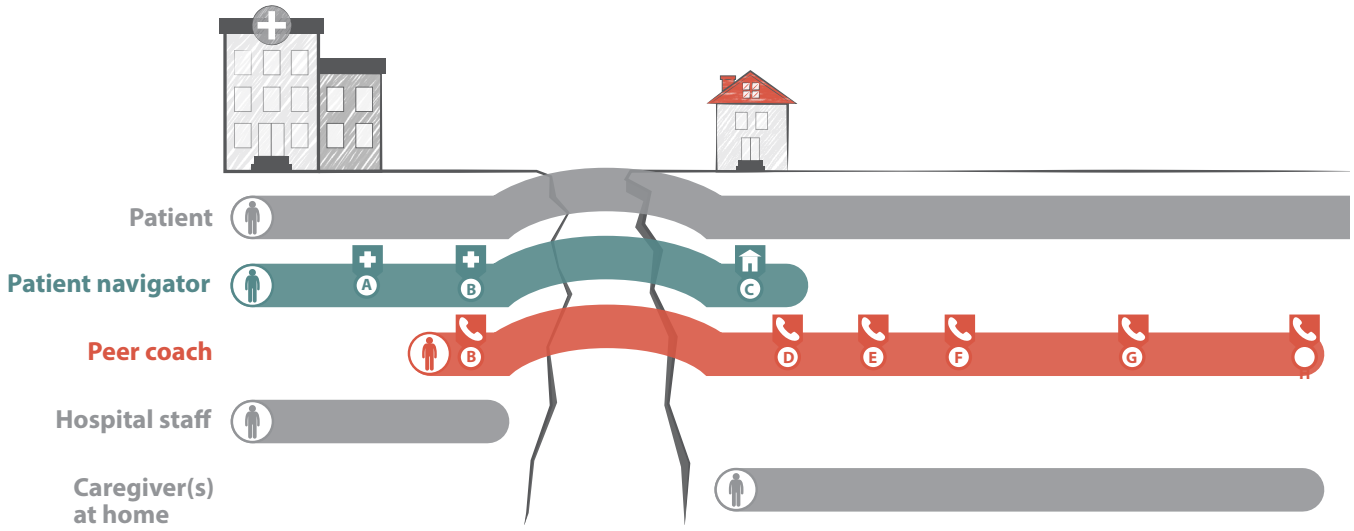
The PArTNER model guide

PATient Navigator to rEduce Readmissions (PArTNER)

PArTNER is a transitional care model for Minority-Serving Institutions (MSIs) that aims to increase support to patients and caregivers at the hospital through their transition home.

Typically, transitional care strategies are designed for and delivered by clinicians. Patients and caregivers collaborated on the design of PArTNER to address the overall patient experience.

PArTNER strengthens the bridge between hospital and home by adding two supports—a community health worker acting as a **patient navigator** and a **peer coach** via a telephone support line.



PArTNER points of care

Patient navigator visit #1
in person in hospital | ~45 mins
while hospitalized

Patients receive at least one visit from a patient navigator while hospitalized.

During an inpatient visit, patient navigators:

- assess for *health-related social needs* such as housing, transportation, food or utilities.
- identify possible solutions to each health-related social need identified.
- create a patient-centered plan to achieve solutions to each health-related social need.

Patient navigator visit #2 + peer coach introduction
in person in hospital | ~45 mins
at hospital discharge

During the hospital discharge visit, patient navigators:

- complete and review a PArTNER Discharge Patient Education Tool.
- schedule the post-hospitalization home visit.
- introduce the peer coach over the phone.

Patient navigator visit #3
in person in home | ~60 mins
1-3 days after hospital discharge

During the post-hospitalization home visit, patient navigators:

- review the Discharge Patient Education Tool.
- review previous pending health-related social need solutions.
- assess for new barriers.
- reminds participant of the peer coach's role.
- shares the barrier solution plan with the participant's physician (if they consented).

Peer coach calls
by phone | ~15 mins per call
1, 2, 3, 5 + 7 weeks post-discharge
During peer coach calls, the peer coach:

- greets the participant and reminds them of their participation in the PArTNER model.
- reviews the Discharge Patient Education Tool.
- reviews previous pending health-related social need solutions.
- assesses for new health-related social needs.
- schedules the next peer coaching call.

For more information, contact:

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