Enrollment

1. Educate all staff about COMPASS (ICU, ED, Case Management etc.).
2. Include the case manager as an important team member for case ascertainment.
3. Attend morning rounds, if possible, to determine who will be discharged for the day.
4. Have a plan to follow up on weekend discharges when you return to work Monday morning.
5. If there is a slight chance that stroke patients admitted on the weekday will be discharged on the weekend, go ahead and enroll them on Friday. This will prevent retrospective enrollment, missed cases, and will allow for a smooth Monday morning when you return to work.
6. Come up with a plan to receive a list of TIA and Stroke patients to ensure you are capturing the complete COMPASS-eligible patients. Most reports will only consist of stroke patients only.
7. Discuss the importance of the clinic visit when enrolling the patient.
8. Ensure the patient knows that the COMPASS model is now the hospital’s model of care vs. a ‘research study’ focus.

Two-Day Follow-Up Call

1. Ensure that you have a working phone number when you enroll the patient. By doing this, it will make it easier to reach the patient.
2. If you are not able to visit the patient before discharge, communicate with the case manager to obtain the patient’s updated contact information.
3. Ensure the patient has transportation to attend the clinic visit. If not, assist the patient with securing transportation.
4. Call caregiver, if needed, to make sure the patient can drive or has transportation to attend the clinic visit.

Clinic Visit

1. Call the patient 1-2 days before the clinic visit to remind them of the appointment. Verify the date and time as well as confirm transportation is available during this phone call.
2. Consider dedicating certain days of the week for COMPASS patients only.
3. Consider opening up more time slots for additional appointments.
4. Explain to the patient the importance of the clinic visit. It is not to replace the PCP but to provide support to and work with the PCP.

Potential Barriers to Overcome

1. Finding time to complete the follow-up calls. It may help to set aside 2 hours each day or 3x a week to conduct the calls.
2. PAC/APP Back-up. You may have ‘piecemeal’ back-ups. For example, one nurse completes enrollments, and another nurse completes the clinic visit.
3. Identifying resources to enroll on weekends. You may have a floor nurse enroll the patients on hard-copy to prevent taking time out of your day to train the nurse on the web application.
4. Patients reluctant to travel a long length of time to the clinic visit. Surprisingly, patients are more willing to travel the distance if you build a solid relationship with them.
5. Clinic space and scheduling. You may find it helpful to stagger the appointments for those who work with two APPs as well as ensure that one room is for COMPASS patients only.