

Identifying the Gap

The Emergency Department sits at the nexus of hospital-based care and the outpatient world.

Between these two worlds, there is a critical "Gap."

The "Gap" begins when a patient leaves the hospital



The "Gap" ends when the patient gets better or fully engages in meaningful follow-up care

Patients are most vulnerable in the first **7-10 days** after leaving the emergency department.



50% of repeat hospitalizations occur within

7.5 days



50% of repeat ED visits occur within

10 days



50% of costs happen within

8.5 days

During this vulnerable period, patients are not yet improved and must:



Understand
and follow their discharge instructions



Fill
new prescriptions



Take
medications differently



Follow
a new care plan



Obtain
a follow-up appointment

Without care in the Gap:



Patients are unsatisfied



Outcomes worsen



Costs rise

Hospitals and health systems must bridge the Gap through:



Collaborative transitions of care



Tighter connections with discharged patients

It's time to deploy innovative services and improve the impact of existing ones.

We need to do more for our patients, but not more of the same. We must address Care in the Gap.