

Patient Community Services



Helping Patients Navigate Post-Discharge Services and Support

The Scripps Mercy Well Being Center provides follow-up care and support to help patients and their families manage their recovery after discharge. We work to reduce readmissions by connecting patients to needed services, addressing barriers to care, and offering community resources and referrals.

These services are especially beneficial for the following groups of patients:

- Patients who have experienced a hemorrhagic stroke, ischemic stroke, or transient ischemic attack.
- Patients diagnosed with acute myocardial infarction, congestive heart failure, chronic obstructive pulmonary disease, coronary artery bypass grafting or pneumonia.
- Patients at risk for two or more social determinants of health, such as food insecurity, transportation needs, social connections, housing stability, utility assistance, personal safety, medical cost burden and/or low health literacy.

Complex Hospital Patient Referrals

The Scripps Mercy Well Being Center team supports patients referred by hospital staff through outreach, follow-up calls and home visits. The team conducts comprehensive assessments to identify needs, address barriers to care, and provide social and emotional support. Patients are also connected to community resources, including housing, food assistance and public benefits.

Stroke Transitional Care Program

Supporting stroke patients on their recovery journey by helping them access resources, services and navigate neurological follow-up care.

Chronic Disease Readmission Prevention/Transitional Care Program

This program focuses on reducing preventable readmissions for patients with AMI, CHF, COPD, CABG, and pneumonia by managing chronic conditions and coordinating post-discharge care.

Complex Hospital Patient Referrals

Supporting patients with multiple comorbidities or complex medical and psychosocial conditions by connecting them to specialized care providers, community resources and supportive services.

Helping Patients with SDOH to Heal

Connecting patients to community resources and supportive services, including housing navigation, food pantries, transportation and health education to support healing and recovery.

For more information:

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