



30/30/13

Reducing 30 & 90 Day Readmissions

By 30%

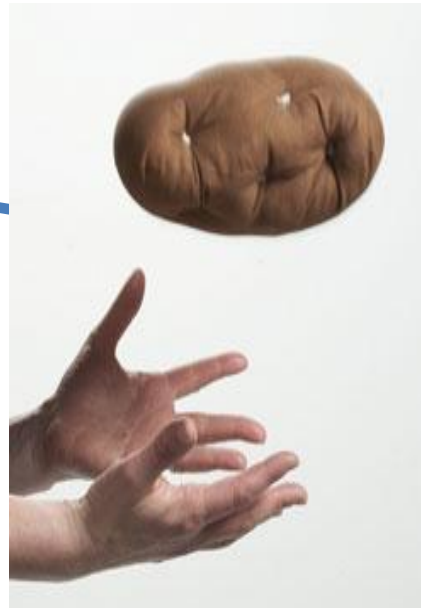
By 2013



Hospitals –
We can't
control MDs
or patient
compliance



Patients –
I'm not
sure what
to do or
who to call



Everyone –
Who is going
to pay for
the cost of
care
coordination
?



Physicians –
Hospitals just
want to
shorten LOS

A New Path





Readmission Reduction Strategies Guide 2011

Select a Team



Who is on your team?

- Executive Sponsor (links to strategic goals of the organization, provides oversight)
- Day-to-day leader (coordinates the project, serves as the ARC key contact for the organization, leads the PI team)
- Physician champion
- Patient/family representatives
- Representatives from areas impacted by initiative e.g. (nursing, pharmacy, education)
- Stakeholders for across the continuum (based on your data review you will know which organizations are involved – think about SNFs, HH, Care providers outside of the hospital etc., your data will inform your decision)
- PI expert

Establish team
rules and roles



Diagnose



- Readmission Rates
- To – From
- Diagnoses
- Risk Groups

Review
your data

- Do 5 structured interviews

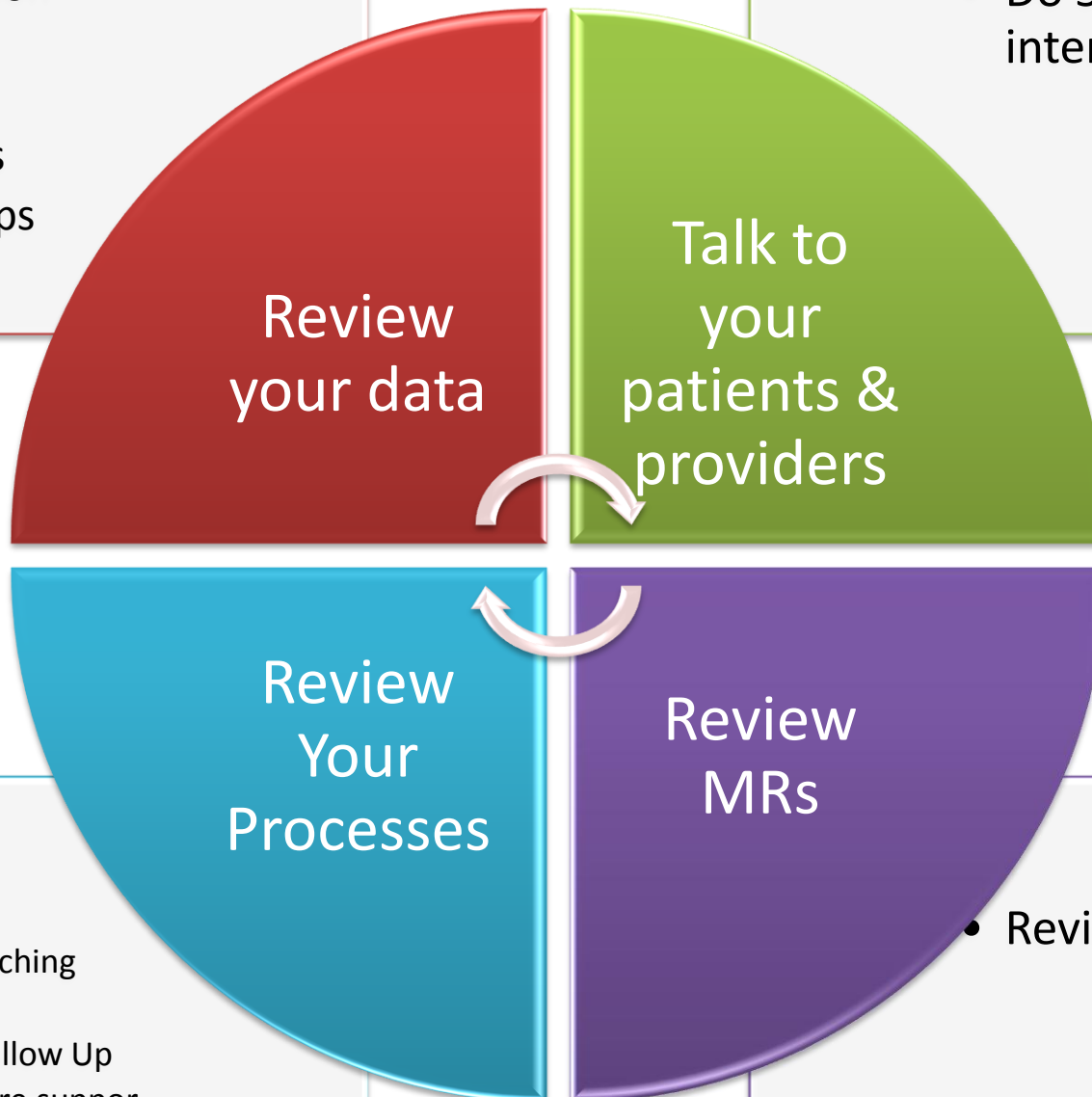
Talk to
your
patients &
providers

Review
Your
Processes

- Admission
- Teaching/Coaching
- Hand Over
- Acute Care Follow Up
- Post-Acute care support

Review
MRs

- Review 5 charts



Use Your Tools

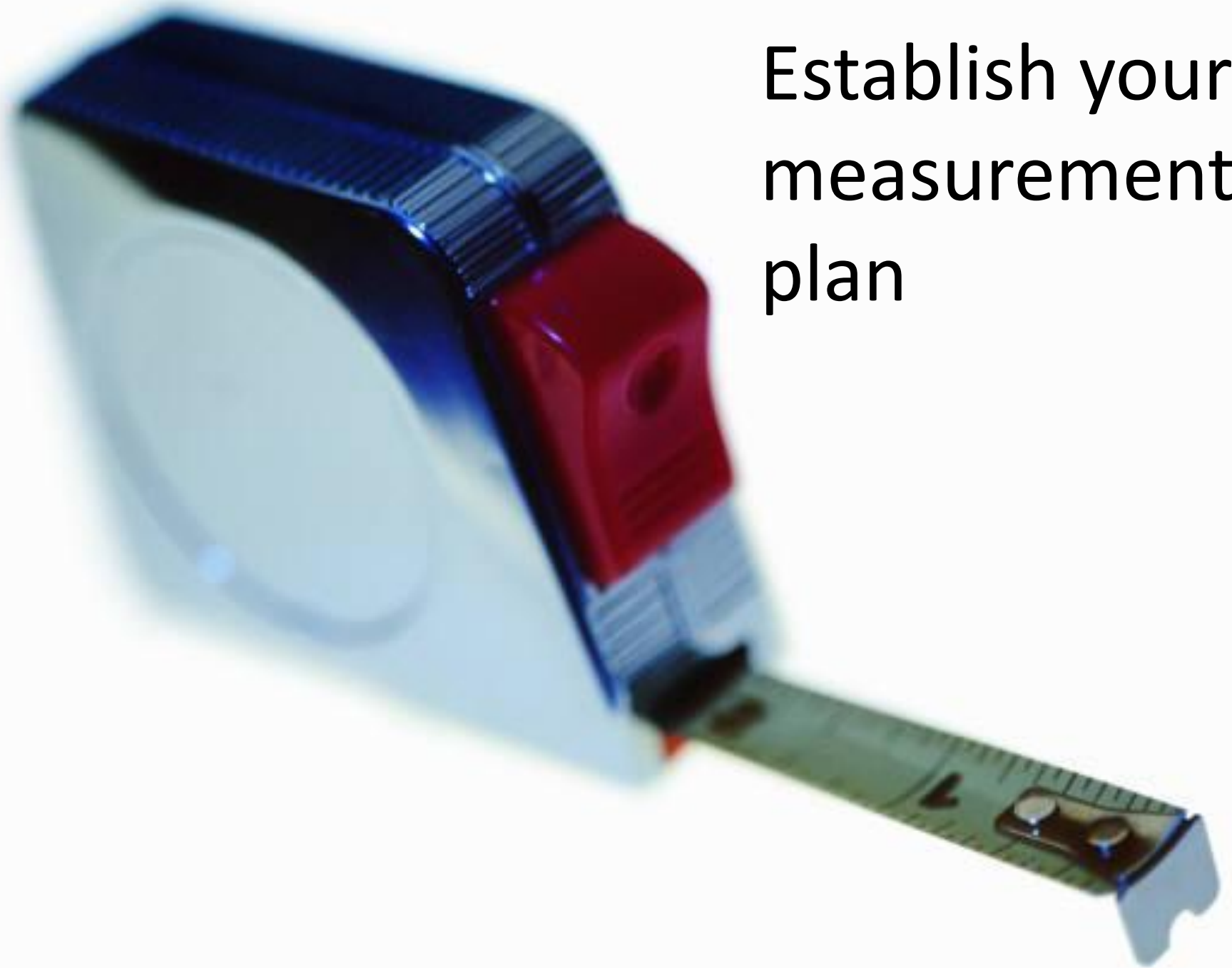
- Patient/Caregiver Assessment Tool
- Provider Assessment Tool
- MR Review Tool
- Process Assessment Tool
 - Review you P&P & forms – Any ?s
 - Review training materials – Any ?s
 - Observe: charts, staff, patients & the unit
 - Monitoring: what, when, who where?
- Measurement Plan



Select an AIM



Establish your
measurement
plan



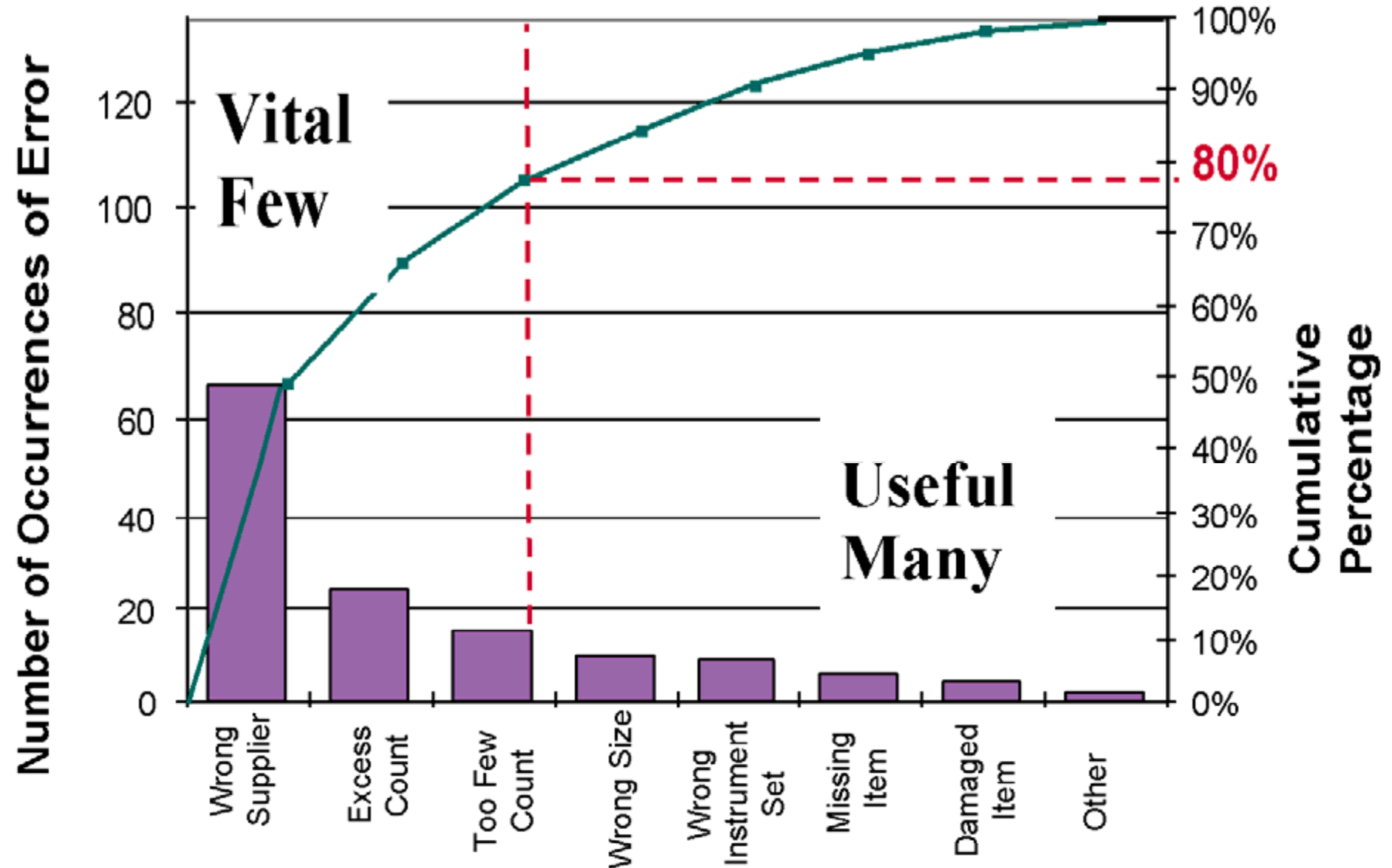


What were the
bright spots?

What was broken
or unreliable?



Focus on your vital few



re-search (rē-sûrch', rē-sûrch'
re-search (rē-sûrch', rē-sûrch')

Find the evidence

Improve

