IT'S TIME TO IMPROVE CARE TRANSITIONS

Ten care coordination tips for hospitals and nursing homes that can help improve care transitions

Care transitions can be hard on patients, especially elderly patients. To ease patient fears, improve care experiences, ensure safe transitions, avoid unnecessary hospitalizations and meet reimbursement requirements, hospitals and nursing homes need to work together to make transitions as successful as possible. Here are ten care coordination tips to help hospitals and nursing homes improve care transitions:

1. IMPROVE TRANSFER FORMS. Hospitals and nursing homes should work collaboratively to design better transfer forms. This way both sides can offer input on what information they need when receiving a patient. Meet with the hospitals or nursing homes in your area and ask for input to determine what information is most essential. Ask for feedback on how you can improve your transfer form to make it more useful. Keep your form to a maximum of two pages in length – although one page is ideal. The more information you share, the harder it is to determine what is important, so succinct forms that include only the most pertinent information at the time of transfer are best. More detailed patient information should be shared separately.

2. COMMUNICATE 3 MUST-KNOW PATIENT DETAILS IMMEDIATELY. Rather than having key pieces of information buried in pages and pages of patient data, lab results, and health history information, make it a habit to reach out to the receiving facility and proactively communicate the top three things they need to know about a patient. This not only saves time, but it ensures the receiving facility is prepared and able to accept the patient. For example, a nursing home needs to know upfront that a patient needs a Medicaid bed and has a condition that requires isolation. In this scenario it makes the most sense for the hospital to pick up the phone and communicate these critical pieces of information, rather than faxing an entire checklist worth of patient data and expecting the nursing home to sort through it to find these requirements. In the age of electronic health records and data sharing, the most basic information is often lost. Make sharing the must-know details first part of your routine.

3. USE EHRS TO INCREASE ACCESS TO DATA. There are many benefits to using electronic health records. If you are not currently using EHRs you need to push toward implementing this technology. EHRs are here to stay, the industry is not going back to paper. Instead, work is being done to build even smarter systems that can communicate more easily with each other. If you haven't done so already, get on board with EHRs now.

IT'S ALL ABOUT TIME

With consumerism trending in the healthcare industry, it is more important than ever for providers to deliver positive experiences and exceed patient expectations. To achieve patient experience objectives, Primaris uses TIME, our own healthcare improvement model. This methodology ensures we are able to help healthcare organizations deliver experiences that turn patients into loyal ambassadors.

1. Thresholds for Success: The first step in our healthcare improvement model is to identify the success thresholds – or the minimum acceptable performance standards you must achieve – in order to receive your monetary incentives for improving and coordinating healthcare. We also gather baseline performance data to evaluate how you align with the often pre-determined success thresholds. How much improvement is required to meet and exceed the success thresholds?

2. Improvement Strategies: Once we've determined where you stand, we focus on developing improvement strategies that will enable you to close the gaps in the quality and efficiency of care across your healthcare organization. We use this knowledge to devise a strategy tailored to address your specific challenges, drive quality improvements and cost reductions. Our goal is to help you achieve all of the thresholds for success in today's performance-driven healthcare system.

3. Measures for Goal Attainment: Most healthcare organizations have a lot of work to do, and success doesn't happen overnight. We focus on multi-year goal setting that enables healthcare organizations to drive incremental improvement over time to achieve all success thresholds. Our measures for goal attainment help you increase achievement and close gaps so you can cross the success threshold, avoid penalties and increase monetary incentive revenues.

4. Execution and Evaluation: From processes and procedures, to workflows, to training, to documentation, to office design, to technology or any other improvement strategy, we combine implementation with ongoing evaluation to drive measurable healthcare improvements and cost reductions.

Primaris
Healthcare Business Solutions
200 N . Keene St., Ste. 101, Columbia, Mo.
www.primaris.org | online@primaris.org
(800) 735-6776 | (573) 817-8300

4. VISIT THE OTHER SIDE. Hospitals representatives need to physically show up to nursing homes and participate in resident care team meetings. And nursing homes should make an effort to get to hospitals whenever possible and eyeball patients and patient charts. This is not the easiest tip to implement, especially for nursing homes with limited resources and staff. But it has been proven effective by top performing hospitals and long-term care facilities. More crossover participation in care planning can make a big difference when trying to create better transitions.

5. USE A QUALITY IMPROVEMENT TOOL. Long-term care facilities can improve processes that lead to smoother transitions with the help of programs like INTERACT. Nursing homes can use INTERACT, and other similar programs, to put more systematic processes in place, reduce unnecessary transfers, be better prepared when patients need acute care, and so on. Nursing homes can explore these different program options: INTERACT, Boost, the Bridge Model, Project Red, Care Transition Program, Transitional Care Model, POLST and more.

6. WORK WITH A QUALITY IMPROVEMENT PARTNER. Primaris, and other companies, provide education and resources to help both hospitals and nursing homes make quality improvements that lead to better patient care and transitions. Primaris, in particular, can help hospitals and nursing homes evaluate their care transition data and then customize strategies to improve how facilities use patient data or communicate with other community providers, for example.

7.MEASURE TRANSITION DATA. Every healthcare organization should measure its care coordination efforts. For nursing homes and hospitals this means tracking things like patient and family satisfaction, the number of discharges to lower or higher levels of care, readmissions, and the rate of exacerbation of chronic illness. Measuring care coordination efforts allows you to find out where you are currently, and where you need to go.

8. INVOLVE PATIENTS AND FAMILY MEMBERS. Give patients (and their families) the information to educate them and prepare them for being discharged to lower levels of care. When a patient is going from a hospital to a nursing home, or a nursing home to a home health environment, there are generally self-care behaviors that can make the transition more successful. Give patients instructions, literature or other tools to empower them to manage their own health outcomes.

9. PROMOTE NURSE EDUCATION. Some nursing schools have introduced long-term care rotations to help train students on how to care for geriatric patients. This is incredibly helpful because it means nursing students that work in hospitals will have been taught about the needs of nursing home residents, and what it takes to care for patients as they transition back and forth from long-term care. This perspective can mean better care for patients and better cooperation between hospitals and nursing homes.

10. UNDERSTAND THAT YOU ARE "IN IT TOGETHER." A final tip is just to realize that, regardless of how things were done in the past, hospitals and nursing homes must work together to be successful in the future. New bundle-payment incentives and regulations will undoubtedly require cooperation and teamwork between the two sides. Plus, patients expect and deserve to receive quality treatment at all stages of the care continuum. So, it makes sense for hospitals and nursing homes to come together and work cooperatively.

By focusing on care coordination and taking steps like those listed above, your organization can develop stronger relationships with other providers in your community, and more importantly, provide better care to patients.