One Coalition's Experience Using Data and Community Partnerships to Reduce Readmissions

Welcome!

- All lines are muted, so please ask your questions in Q&A
- For technical issues, chat to the 'Technical Support' Panelist
- Please actively participate in polling questions that will pop up on the lower righthand side of your screen

We will get started shortly!

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Carolyn Kazdan, MHSA, NHA

AIM LEAD, CARE COORDINATION

Ms. Kazdan currently holds the position of Director, Health Care Quality Improvement for IPRO, the Medicare Quality Improvement Organization for New York State. Ms. Kazdan leads IPRO's work with Project ECHO® and serves as the Care Transitions Lead for Alliant Quality. Ms. Kazdan previously led the IPRO's work with the NYS Partnership for Patients and the Centers for Medicare & Medicaid Services (CMS) Special Innovation Project on Transforming End of Life Care in the Nassau and Suffolk County region of New York State. Prior to joining IPRO, Ms. Kazdan served as a Licensed Nursing Home Administrator and Interim Regional Director of Operations in skilled nursing facilities and Continuing Care Retirement Communities in New York, Pennsylvania, Ohio and Maryland. Ms. Kazdan has served as a senior examiner for the American Healthcare Association's National Quality Award Program, and currently serves on the MOLST Statewide Implementation team and Executive Committee. Ms. Kazdan was awarded a Master's Degree in Health Services Administration by The George Washington University.

Carolyn enjoys visiting her grandchildren, photography, crocheting, needlepoint, reading and being at the beach!

"I don't have to chase extraordinary moments to find happiness - it's right in front of me if I'm paying attention and practicing gratitude"

–Brene Brown

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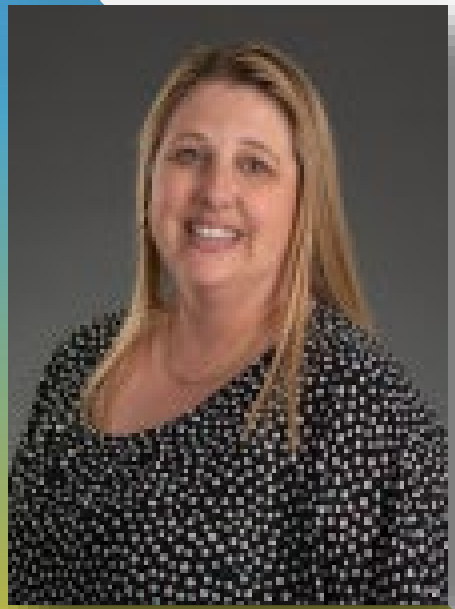
Hillary Kaylor, CIRS-A/D



REGIONAL OMBUDSMAN

Hillary Kaylor is the Long Term Care Regional Ombudsman for Mecklenburg County Nursing homes. She has been with the Area Agency on Aging for the past 19 years and worked in several counties within their nine county region. She is actively involved in many Coalitions locally and for the state including the NC Culture Change Coalition, and the Charlotte Mecklenburg Aging Coalition. She is currently the co-chair for the NC Ombudsman Association. She also serves on the Leadership Board for Consumer Voice in Washington, DC . Previously, she had worked mainly as a Social Worker in Long Term Care facilities throughout the spectrum of Independent living, Assisted Living and Nursing Homes. Hillary is a mother of two teenage girls and has been married for 19 years.

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Regional Ombudsman for Mecklenburg County
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Renee Dutcher, MSW LCSW

PROGRAM MANAGER

Currently serves as a Program Manager in Services for Adults at the Mecklenburg County Dept of Social Services in Charlotte, NC.

Programs with in her area target Seniors and adults with disabilities who need assistance to remain in their home and live independently. These programs include in-home aide, Adult Day Care, home delivered meals, payee services, Consumer Directed Services, and Care Transitions. Her area also supports caregivers who are caring for a loved one with Alzheimer's and other dementias, as well as physical impairment, by offered Respite services and supplies. Renee lives with her 2 children, who are all getting on each other's nerves these days, but all grateful to have been COVID-free.

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Program Manager, Mecklenburg County Government (DDS)
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Objectives

- Learn Today:
  - Create community partnerships to reduce 30-day readmissions for high-risk patients
  - Explain eligibility, community program development and the importance of hospital champions

- Use Tomorrow:
  - Identify strategies for using data to build referral confidence and support funding requests

Care Transitions Program Mecklenburg County

Presented By:

Hillary Kaylor – Centralina AAA

Renee Dutcher, LCSW,MSW DSS

History of Care Transitions

- Mecklenburg County has been involved with Care Transition efforts since 2010. Mecklenburg County Department of Social Services- Services for Adults Division (SFA) and Centralina Area Agency on Aging, along with the two major hospitals Atrium Health and Novant Health have collaborated in an effort to reduce 30-day hospital readmissions.

Partnerships

- We have met for years every other month at a local hospital community room, now it is a Zoom call!
- Partners include: Home health agencies, DSS, Hospitals, AAA, Alliant, Disability Rights, PACE and other local agencies who are interested in this program, the meetings are open.

Purpose

- Our program focuses on re-admissions for those individuals who are high risk with multiple hospitalizations

- Initially we had a grant to cover costs, now we have worked with our local county government who have supported us yearly to do our program, based on our data and outcomes.

Eligibility Criteria

- Age: 18+, but with a focus on senior adults
- Cannot serve if homeless
- At risk of readmission due to medical and social factors; and/or a history of frequent ED visits due to medical and social factors
- We do not replace skilled home health, but can supplement

Hospital Referral

- Each hospital has a main contact or “champion”
- They make contact with DSS- Just One Call program
- How does the process work?

Core Services

- In-home aide, Home delivered meals, transportation and supplies (i.e. incontinence supplies, Ensure)
- Linkage to community resources (i.e. food pantry, utility assistance, home repair)
- Assistance with applications for Medicaid, Food Stamps, VA benefits, etc.)
- Duration of service – max of 60 days

Costs?

- Budget of $2000/per client. Actual cost average cost of IHA: $850 per client.

- Max of 105 IHA hours allocated. Average of 55 hours over six-week period.

Readmission rates:

- Results for FY20: 285 referrals and
  13% readmission rate*
- Results for FY19 344 referrals and
  6% readmission rate
- Results for FY18 328 referrals and
  10% readmission rate
- Results for FY17 115 referrals and
  12% readmission rate

The readmission rate in NC and Mecklenburg County is 17%

Clients not served

- We find over half of the referrals either refuse our services or we are unable to find.

- Of those clients who were referred and refused CT services, 17% readmitted within 30 days and 40% readmitted within 60 days

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Aim Lead, Care Coordination

Objectives Check In!

- Learn Today:
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  - Explain eligibility, community program development and the importance of hospital champions

- Use Tomorrow:
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How will this change what you do? Please tell us in the poll…

Closing Survey

Help Us Help You!

- Please turn your attention to the poll that has popped up in your lower right-hand side of your screen
- Completion of this survey will help us steer our topics to better cater to your needs

CMS 12th SOW Goals

Behavioral Health Outcomes & Opioid Misuse

- ✓ Promote opioid best practices
- ✓ Decrease high dose opioid prescribing and opioid adverse events in all settings
- ✓ Increase access to behavioral health services

Patient Safety

- ✓ Reduce risky medication combinations
- ✓ Reduce adverse drug events
- ✓ Reduce C. diff in all settings

Chronic Disease Self-Management

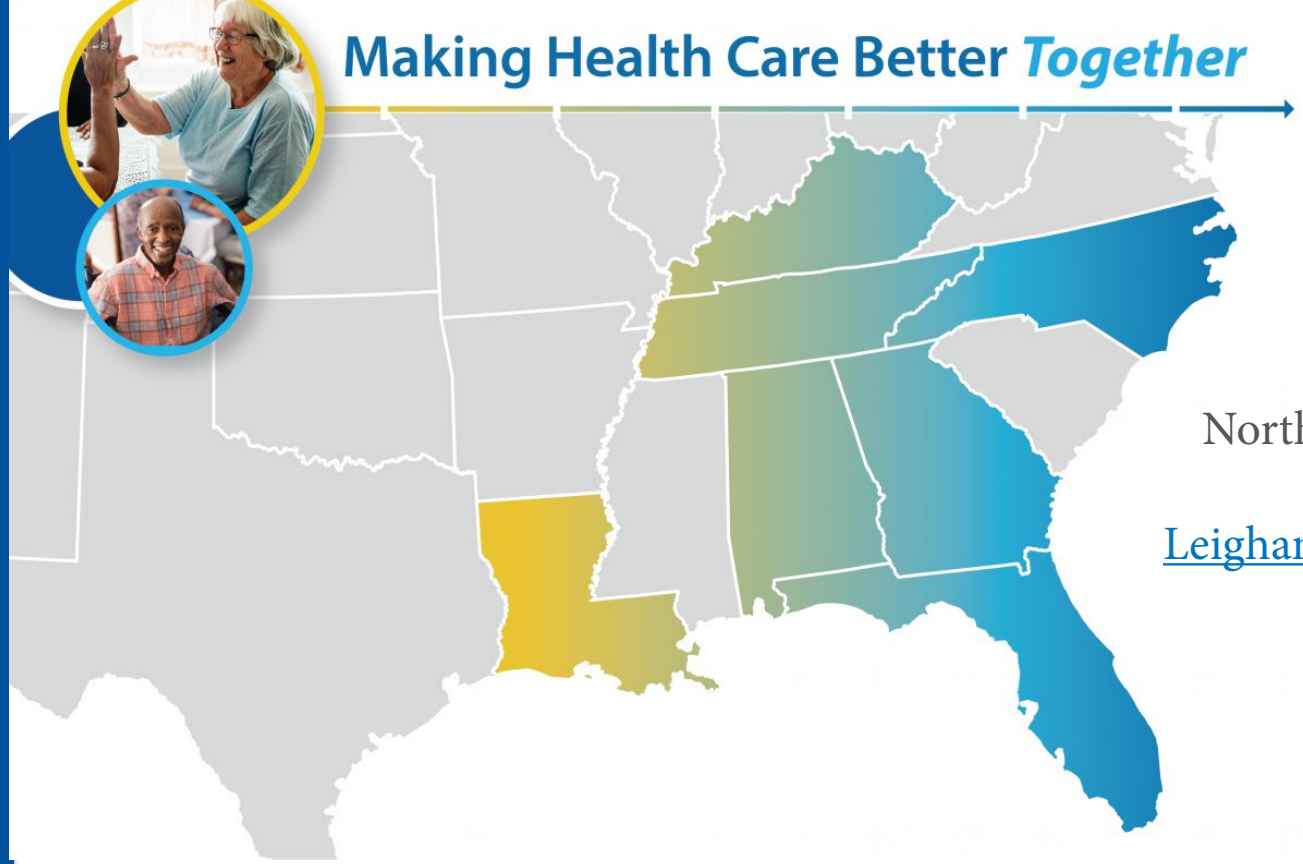
- ✓ Increase performance on ABCS clinical quality measures (i.e., aspirin use, blood pressure control, cholesterol management, cardiac rehab)
- ✓ Identify patients at high-risk for developing kidney disease & improve outcomes
- ✓ Identify patients at high risk for diabetes-related complications & improve outcomes

Quality of Care Transitions

- ✓ Convene community coalitions
- ✓ Identify and promote optical care for super utilizers
- ✓ Reduce community-based adverse drug events

Nursing Home Quality

- ✓ Improve the mean total quality score
- ✓ Develop national baselines for healthcare related infections in nursing homes
- ✓ Reduce emergency department visits and readmissions of short stay residents



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Upcoming Events

Learning and Action Webinars

Nursing Homes Tuesdays, 2pm ET/1pm CT	Community Coalitions Thursdays, 12:30 pm ET/11:30am CT
April 20, 2021: A deeper dive into Opioid and Antipsychotic Medication Adverse Drug Events	April 22, 2021: University of Alabama (UAB) Ticket to Ride: COVID Discharge Workflow and Communication Across Care Continuum
May 18, 2021: A deeper dive into Diabetic Agent and Anticoagulation Medication Adverse Drug Events	May 25, 2021: TBD

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