

Beth Israel Deaconess Hospital-Needham

NEEDHAM, MA

\$ 295,720

AWARD EXPENDED

Case management has been shown to decrease emergency department overutilization by enabling more efficient, coordinated care for patients with complex diagnoses. BID-Needham placed case managers in its emergency department and made them available to all patients screened by a physician. This created an opportunity for early identification of patients who could be better served by referral to primary care, home care, or admission to a skilled nursing facility, preventing unnecessary hospital admissions and observation stays. Expanded case management services also allowed for timely consideration and review of potential transfers to other acute care facilities for specialty services, and the ability to ensure all transfers were appropriate and necessary. Further, this pilot project supported the development of patient education protocols and materials on important topics like observation status. With its award, BID-Needham also developed a system to log and track patients covered under risk contracts and implemented a system for tracking adverse events.

RAPID-CYCLE PILOT

Prior to CHART Phase 1 implementation, BID-Needham employed case management only at the point of admission to an inpatient unit. BID-Needham's case management pilot increased and improved coordination for patients beginning in the emergency department. Case managers worked directly with emergency department patients to help manage, plan, and coordinate care in tandem with inpatient case managers from the initial point of service, throughout the hospital stay, and post-discharge. In addition to providing direct patient services, the case managers' work in conjunction with hospital care teams, quality representatives, administrators, external patient care management organizations, and other health care facilities to develop and improve programs and policies focused on care coordination.

720

PATIENTS SERVED.

1,470

PATIENT HOURS OF CASE MANAGEMENT.

Pamphlet created to explain observation status



CAPABILITY AND CAPACITY BUILDING

As part of BID-Needham's participation in the Beth Israel Deaconess Care Organization (BIDCO), the hospital implemented a tagging system that allows for identification of patients participating in risk contracts early in their hospital visit in order to leverage resources available to these patients through their primary care providers and the Accountable Care Organization (ACO). BID-Needham also adopted an electronic tool for reporting, investigating, and monitoring quality and safety events throughout the hospital. This electronic tool increases convenience of reporting and efficiency of follow up, and allows for better data tracking and trending to recognize areas for quality improvement.

Although coordination with outside vendors resulted in delayed implementation of training and deployment of these programs, both the ACO tagging and improved event reporting systems are currently in use and staff training is ongoing as needed.

The upgraded quality reporting software includes specific forms for reporting various types of quality and safety events

