Baystate Noble Hospital

HAMPDEN COUNTY

$1.5M
TOTAL PROJECT COST

$1.04M
HPC AWARD

Target Population & Aims

TARGET POPULATION 1
All discharges to skilled nursing facilities (SNF)

TARGET POPULATION 2
All patients with high utilization of the ED and hospital

432
Discharges to SNF per year

1,380
ED visits for 264 unique patients

PRIMARY AIM
Reduce 30-day readmissions by
25%

SECONDARY AIM
Reduce 30-day ED revisits by
15%

Summary of Award

Baystate Noble Hospital aims to reduce 30-day readmissions by 25% by providing ongoing services to target population patients – in the Emergency Department (ED), during an admission, and following discharge. In the ED, and in collaboration with ED staff (including LCSW, nurses, and physicians), the Complex Care Team (CCT) assesses eligible patients, develops individualized care plans (ICP), coordinates medication optimization, and makes referrals to community and behavioral health services, as needed. In the inpatient setting, the CCT participates in multidisciplinary complex care rounds, develops or modifies the ICP, coordinates services, including palliative care, and facilitates warm handoffs to in-hospital services. Following discharge, the CCT provides an in-home follow up within 48 hours, provides a medication review and reconciliation, and engages in care navigation to ensure that all needs are met.

Complex Care Team

Provides care in the ED, in the hospital, and at home. The CCT may accompany patients to primary care visits, AA meetings, and shelters.

"We realized that most of the work that needs to be done comes when the patient returns home"
- Baystate Noble CHART team member

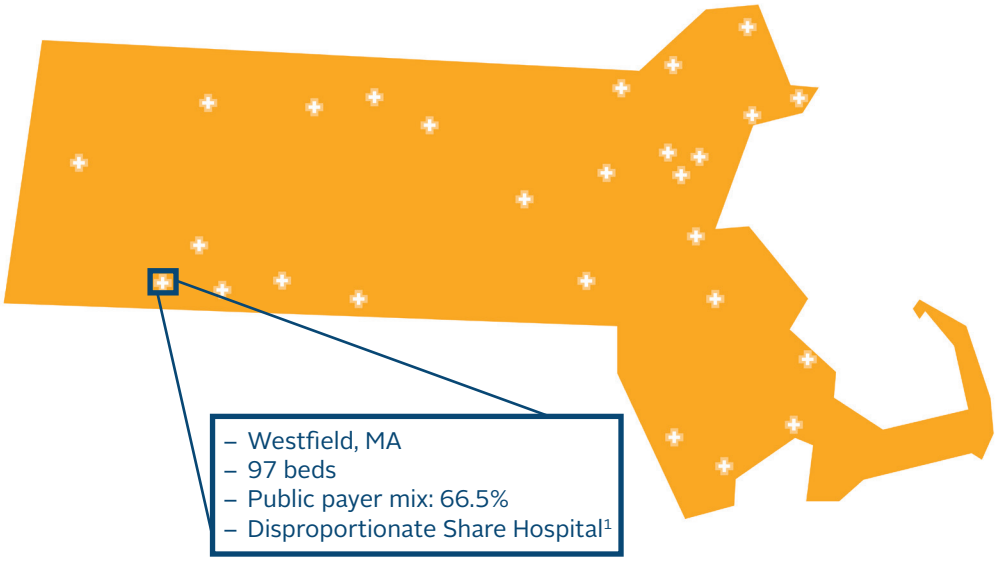

CHART & HPC Background

The Community Hospital Acceleration, Revitalization, and Transformation Investment Program (CHART) makes phased investments for certain Massachusetts community hospitals to enhance their delivery of efficient, effective care. The goal of the program is to promote care coordination, integration, and delivery transformations; advance electronic health records adoption and information exchange among providers; increase alternative payment methods and accountable care organizations; and enhance patient safety, access to behavioral health services, and coordination between hospitals and community-based providers and organizations.

Established through the Commonwealth's landmark cost containment law, Chapter 224 of the Acts of 2012, the HPC is an independent state agency that monitors reform in the health care delivery and payment systems and develops policies to reduce overall cost growth while improving the quality of patient care. To learn more, please visit www.mass.gov/hpc or follow us on Twitter @Mass_HPC.

1. Source: Center for Health Information and Analysis, 2015.

MASSACHUSETTS
HEALTH POLICY COMMISSION
CHART INVESTMENTS