

Signature Healthcare Brockton Hospital

PLYMOUTH COUNTY



\$3.76M

TOTAL PROJECT COST

3.5M

HPC AWARD

Target Population & Aims

TARGET POPULATION 1

All admissions

TARGET POPULATION 2

Lower-acuity ED visits between 3:00-11:00pm

7,582

discharges per year

13,751

ED visits per year

PRIMARY AIM 1

Reduce 30-day readmissions by

20%

PRIMARY AIM 2

Reduce the length of stay in the ED's 3:00-11:00pm Express Care shift by

15%

SECONDARY AIM

Reduce patient harm for all admissions and ED visits by

15%

Summary of Award

With primary goals of reducing 30-day readmissions by 20% and Emergency Department (ED) length of stay between 3:00-11:00pm by 15%, Signature Healthcare Brockton Hospital identifies patients at high-risk for readmission, prospectively and in real-time, to receive services from the Complex Care Team (CCT). The multi-disciplinary CCT provides cross-setting care (across the ED, hospital, skilled nursing facilities, and at home) that includes care planning, case management, rescue planning, palliative care, and medication reconciliation. An interdisciplinary team maps patient flow and identifies variation to reduce waste (e.g., staff time, resources). As part of this process, the team expects to redesign triage protocols, develop lab and radiology treatment protocols, and implement bedside registration, among other changes. Signature is additionally increasing early rescue and rapid response activation and engaging in activities aiming to improve the culture of safety, including leadership and frontline staff education.

Patient Story

A homeless patient with substance use disorder and medical comorbidity frequently visited the ED. Shortly after he left, the patient was found having overdosed in a nearby hotel. He was administered Narcan by first responders and stabilized in the ED. The CHART team worked with ED staff to discharge him with a prescription for Narcan. Although the patient initially resisted, he ultimately accepted the prescription. Upon a subsequent ED visit, he was found carrying Narcan, demonstrating that the CHART team successfully coached him to carry the drug in case of overdose - a successful step in the direction of changing his behavior and perhaps saving his life.

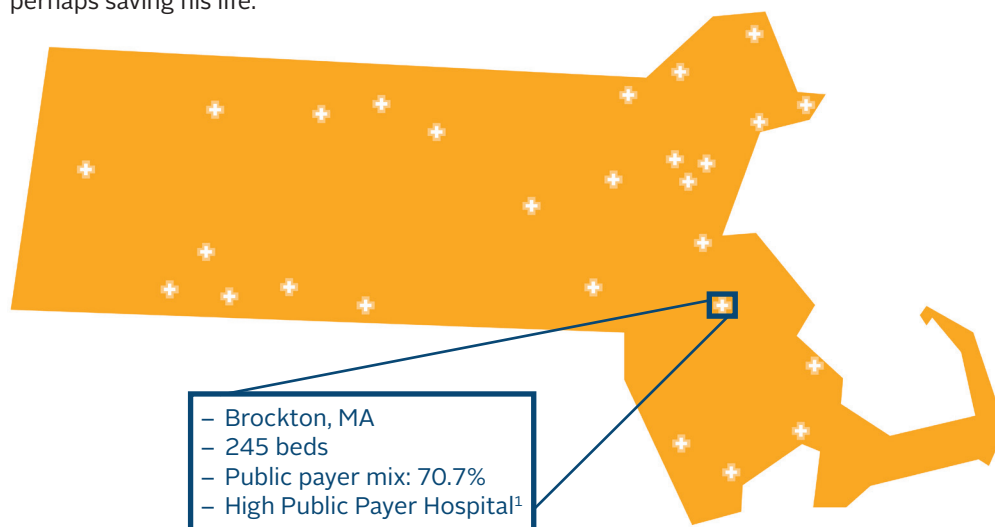


CHART & HPC Background

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, 2017.