

Winchester Hospital

MIDDLESEX COUNTY



\$3.09M

TOTAL PROJECT COST

\$1M

HPC AWARD

Target Population & Aims

TARGET POPULATION

- All patients with high utilization
- All discharges to post-acute care

3,832

Discharges per year

PRIMARY AIM 1

Reduce 30-day readmissions for patients with high utilization by

20%

PRIMARY AIM 2

Reduce 30-day readmissions for patients discharged to post-acute care by

20%

SECONDARY AIM

Reduce 30-day ED returns by

10%

Summary of Award

Winchester Hospital aims to reduce 30-day readmissions by deploying a cross-setting complex care team (CCT) to respond in real-time to target population patients in the Emergency Department (ED) and in the inpatient setting. The two different target populations of patients, those with high utilization and those discharged to post-acute care, receive similar services when they are admitted to the hospital. The CCT engages with patients and key supports (e.g., family) to develop individual care plans, provide warm handoffs to care in the community and post-acute care, and follow-up services within 48 hours of discharge. As warranted based on patient need, the Winchester Hospital CHART team may also visit the patient within three to five days post-discharge. Additionally, Winchester Hospital collaborates with Care Dimensions, a home care and assisted living service provider and nursing facility, to facilitate referrals to palliative and hospice services.

5 Whys

With its CHART program, Winchester Hospital implemented root cause analyses in to its regular case discussions. Including all relevant clinical and non-clinical role types in these meetings, staff aim to understand the challenges their patients face by using the 5 Whys framework, allowing for discussion about both clinical and social factors that may act as barriers to achieving stability and health.

“Engaging clinicians in root cause analyses is tremendously challenging and incredibly valuable.”

- Winchester Hospital employee

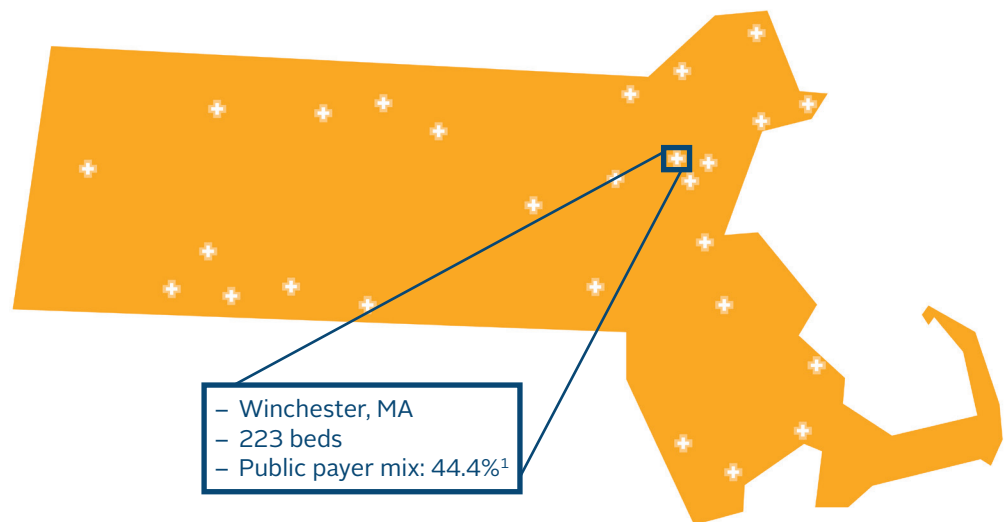


CHART & HPC Background

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.