



## Delaware County Office of Services for the Aging

Crozer-Chester Medical Center, Delaware County Memorial Hospital,  
Riddle Memorial Hospital, Taylor Hospital, and Springfield Hospital



### OUR COLLABORATION

The Delaware County Office of Services for the Aging (COSA) is the CBO. Five of the six Delaware County acute-care hospitals agreed to participate: Crozer-Chester Medical Center, Delaware County Memorial, Riddle Memorial, Taylor, and Springfield. Two of these hospitals are listed among HHS's top 15 hospitals in Pennsylvania for high 30-day rehospitalization rates.

### OUR PREVIOUS EXPERIENCE

COSA is an experienced transitional care provider and is currently the recipient of an ADRC Evidence-Based Care Transition two-year Federal grant (#90CT0162/01). Through the ADRC grant, COSA has partnered with Crozer-Keystone Health System, and has a demonstration program at Taylor Hospital (Ridley Township, Pennsylvania) using a modified version of the TCM. To date, this demonstration program has been very successful with 92% of the patients remaining safely in the home or other non-hospital setting.

### OUR COMMUNITY

Delaware County is a densely populated (558,979 residents based on the 2010 census) suburban county in southeastern Pennsylvania, immediately southwest of Philadelphia.



### OUR TARGET POPULATION

Patients who reside in the County and have been diagnosed with AMI, HF, PNEU, or COPD and who fit one or more of the criteria:

- Patients age 65 or older,
- Patients with a change in medication or poly-pharmacy,
- Patients who are poor historians,
- Patients living alone,
- Lack of patient post-discharge follow-up with PCP from a prior admission,
- Patients with hospital admissions within previous 180-days.

### OUR IMPLEMENTATION STRATEGY

Using a modified TCM approach (TCM-fm), the COSA program focuses on providing services based on the patient's needs, removing barriers, using a patient personal health record, having a primary point of contact/formal coach, and providing a continuum of care for up to 30 days. To prevent functional decline and to build compliance, a RN and a Social Worker follow the patient and communicate with the patient, family, Primary Care Physician (PCP), the pharmacy, and other hospital-based clinicians throughout the duration of the program. The TCM-fm approach includes:

- Using patient friendly transfer/discharge forms.
- Social Worker conducting phone interview within 48 hours of discharge.
- Patients taught to use AHRQ's *Taking Care of Myself* and to reconcile medications.
- The RN and Social Worker teaching patients to identify early health-risk warning signs.
- The Social Worker verifying patient kept post-discharge appointment with PCP.
- Using a multi-disciplinary approach, the Social Worker will ensure that all available support services are utilized and, when appropriate, will make referrals to local agencies providing culturally-competent services.