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Hospital to Home (H2H)
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VA CHF QUERI

Call In #: 1-800-767-1750 code 97366

What is H2H?

- H2H is a national quality improvement initiative to reduce unnecessary readmissions for cardiovascular patients
- Goal is to reduce all-cause re-admission rates among patients discharged with heart failure or acute myocardial infarction by 20% by Dec 2012

H2H Hospital to Home

Institute for Healthcare Improvement

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3 Question Framework

- **Medication Management Post-Discharge:** Is the patient familiar and competent with his or her medications and is there access to them?
- **Early Follow-Up:** Does the patient have a follow up **appointment** scheduled within a week of discharge and is he or she able to get there?
- **Symptom Management:** Does the patient fully comprehend the signs and symptoms that require medical attention and whom to contact if they occur?

How is the VA Involved?

- The Undersecretary for Health has signed a letter offering support as a Strategic Partner.
- However, each facility needs to join separately.
- 40+ VA facilities have joined

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Who Can Join?

Hospitals are the focus. Our goal is to have each VA inpatient facility involved.

However, anyone committed to reducing unnecessary readmission is a welcome participant.

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Participant Commitments

- **All Participants**
  - Implementing a quality improvement program
  - Contributing to and learning from the community

- **" Fully- Committed" Participants (Facilities)**

1. Obtaining Administrative Support
2. Assembling an Improvement Team
3. Developing an Improvement Plan
4. Reporting on Progress

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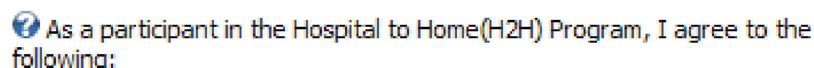
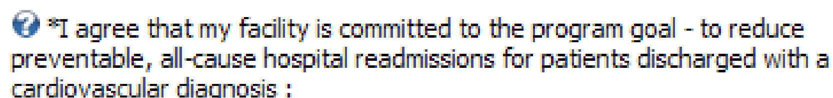
How Does My Hospital Join?

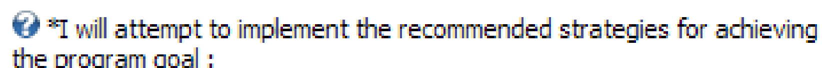
- A representative goes to www.H2Hquality.org and fills out an online form indicating your facilities commitment to reducing readmissions.

Page

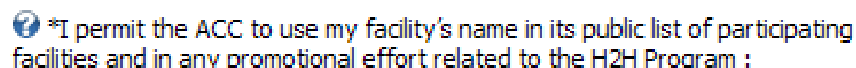

As a participant in the Hospital to Home(H2H) Program, I agree to the following:


*I agree that my facility is committed to the program goal - to reduce preventable, all-cause hospital readmissions for patients discharged with a cardiovascular diagnosis :

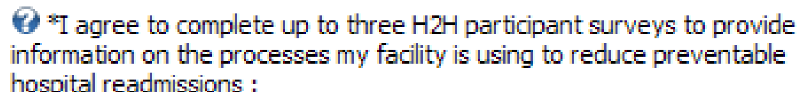
I agree
I disagree


*I will attempt to implement the recommended strategies for achieving the program goal :

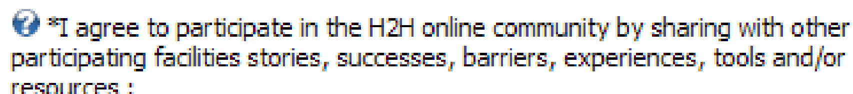
I agree
I disagree


*I permit the ACC to use my facility's name in its public list of participating facilities and in any promotional effort related to the H2H Program :

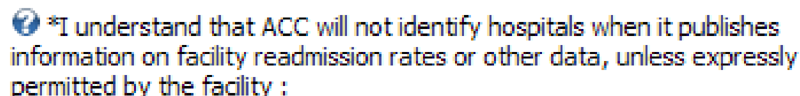
I agree
I disagree


*I agree to complete up to three H2H participant surveys to provide information on the processes my facility is using to reduce preventable hospital readmissions :

I agree
I disagree


*I agree to participate in the H2H online community by sharing with other participating facilities stories, successes, barriers, experiences, tools and/or resources :

I agree
I disagree


*I understand that ACC will not identify hospitals when it publishes information on facility readmission rates or other data, unless expressly permitted by the facility :

I agree
I disagree

Register

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How Much Does it Cost?

- It is free to participate.
- Your facility will need to allocate resources as needed for any intervention aimed at reducing readmission rates.

What Are the Incentives for My Director?

- Hospital specific heart failure (and MI) readmission rates will be reported (performance measure)
- Reduced readmission rates should reduce costs.
- Undersecretary for Health has signed the VA up as a strategic partner
- Patient Care Services is recommending Enrollment

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What Are the Incentives for the Heart Failure Provider?

- Opportunity to have your Director increase funds for heart failure care.
- Involvement with a large community dedicated to improving heart failure care.
- Webcasts and online tools.

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What is Expected of Participants

I Obtain Administrative Support

II Assemble an Improvement Team

III Develop and Improvement Plan

IV Report on Progress through periodic responses to brief surveys

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What Can I Do to Encourage My Facility to Enroll?

- CHF QUERI will provide data on your current readmission rates.
- Go to your administration with a list of talking points, ideas for improving care.
  - CHF QUERI will provide a draft talking point list, will be available for consultation
- Agree to lead/contribute to the effort for your facility.

Strategic Questions for Achieving - System Level Results

- Is reducing the hospital's readmission rate a strategic priority for the executive leaders at your hospital? Why?
- Do you know your hospital's readmission rate for patients with HF and AMI?
- What is your understanding of the problem?
- Have you declared your improvement goals?
- What will help drive success in your quality improvement initiatives?
- What projects, when combined, will help you achieve your goals?
- Do you have the capability to make improvements?
- How will you provide oversight for the improvement projects, learn from the work and spread successes?

Set-up for Hospitals Participating in H2H

- Have the Director designate an **Executive Leader** to sponsor the hospital's participation in H2H
- Convene an **Improvement Team** of stakeholders within the
- hospital and from across the continuum of care for the initial
- pilot unit work and to develop spread/dissemination plan
- Identify opportunities for improvement and establish aims that are consistent with the goals of H2H
- Select one or two medical or surgical units for the front-line improvement work
- Identify a **Day-to-Day Leader** to drive the work on the pilot unit(s)

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Potential Team Members

- Patients and Family Members
- Hospital Staff
- Nurse Manager, Staff Nurses and Nurse Educators
- Pharmacist
- Cardiologists and Hospitalists
- Case Managers and Social Workers
- Quality Improvement Leaders
- Nursing and Physician Leaders from skilled nursing facilities
- Primary Care Physicians, Cardiologists, Nurses and Nurse Practitioners from office practices and clinics
- Case Managers and Home Care Nurses

Sample Aim Statement

- *To reduce unplanned 30-day readmissions among patients discharged with HF from 18% to 12% or less by December 31, 2011 and to improve these patients' experience of care at discharge as measured by satisfied or highly satisfied from 68% to 90% or more.*

Team Activities

- Start by focusing on one of the key changes/questions
- Identify the opportunities/failures/successes in the current processes and select a process to work on
- Conduct iterative PDSA cycles (tests of change)
- Understand common failures to redesign the process to eliminate those failures
- Specify the who, what, when, where and how for the process (standard work)
- Use process measures to assess your progress over time

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What Have Other VA Facilities Done?

Examples of VA Facility Programs Created in Response to H2H

- RN-led HF clinic
- CPRS templates
- Root cause analysis of all HF readmissions
- HF committee for the facility to review care and patient education
- Diuretic titration guide for patients/caregivers
- Standardized follow-up visit scheduling to be < 14 days
- Education program for nurses and care coordinators regarding symptom management

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Identifying Opportunities for Improvement

Review the last five patients that were readmitted within 30 days after discharge

- Reviews the charts of the last five readmissions
  - Chart Review Template Available
- Conduct interviews with these patients and/or family caregivers
- Conduct interviews with clinicians who also know these patient (physicians, nurses in the skilled nursing facility, home care nurse, etc.) to identify problem areas from their perspective.

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Key Process Changes	Current Status	Ideas for Testing & Designing Reliable Processes	Who will lead? Timeline?
Medication Management Post-Discharge: .Is the patient familiar and competent with his or her medications and how to access to them?			
Early Follow-Up. Does the patient have a follow-up appointment within a week of discharge?			
Symptom Management: Does the patient comprehend the signs and symptoms that require medical attention and whom to contact if they occur?			

Next Steps

- CHF QUERI will send readmission rates, talking point draft
  - Recent data are available on www.vssc.med.va.gov
- You should decide how you would like to improve care.
- You should meet with your administration to get their support/sign up on the website.

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For More Information

- visit www.H2HQuality.org
- email hospital2home@acc.org
- Or email CHF QUERI at anju.sahay@va.gov or paul.heidenreich@va.gov