



REDUCING UNNECESSARY READMISSIONS AND SO MUCH MORE

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Society of Hospital Medicine

Hospitalists. Transforming Healthcare.
Revolutionizing Patient Care.

PROJECT BOOST: REDUCING UNNECESSARY READMISSIONS AND SO MUCH MORE

SSM St. Mary's Medical Center:

This 582-bed community teaching hospital in St. Louis is affiliated with Saint Louis University School of Medicine, and is a member of SSM Health Care, sponsored by the Franciscan Sisters of Mary.

The Problem

Hospital discharge is a highly variable process at most hospitals, highlighted by poor communication and quality. Older adults are highly likely to be readmitted after hospital discharge and it is believed many of these repeat hospitalizations are avoidable. While approximately 20% of Medicare patients are readmitted within 30 days of discharge, research has shown that readmissions can be prevented. Still, many hospitals have not taken evidence-based steps to reduce readmissions.

BOX: A Proven Solution: Project BOOST

Project BOOST (Better Outcomes for Older adults through Safe Transitions) is a quality improvement toolkit, backed by evidence-based research, to enhance the care of patients transitioning from the hospital to home. Project BOOST helps hospitals better manage patient discharge—a chaotic process at most facilities— leading to better patient care by reducing readmission rates, improving patient and family preparation for discharge, enhancing patient satisfaction, and much more.

Project BOOST has four key elements, including a broad assessment of admitted patients, risk-specific patient/caregiver discharge preparation using the teach-back method, and follow-up calls to patients within 72 hours of discharge on how to care for themselves. The readymade toolkit includes a comprehensive implementation guide with easy instructions for multi-disciplinary teams to plan, implement and evaluate Project BOOST. Hospitals also get ongoing technical assistance through the BOOST Mentoring Program, and much more. Visit www.hospitalmedicine.org/BOOST.

Experience to Date

In July 2009, SSM St. Mary's implemented Project BOOST on a 30-bed hospitalist unit for patients with certain diagnosis, taking multiple medications, or certain high-risk medicines. Within three months, the unit:

- Decreased 30-day readmissions from 12% to 7%
- Increased patient satisfaction from 52% to 68%

SSM St. Mary's Experience with Project BOOST

The concept of team-based care is largely an oxymoron in today's fragmented health care system. That's changing at places like SSM St. Mary's Medical Center, however. Project BOOST provides hospitals with a tool to give structure to the non-standardized patient discharge process, and an intervention that encourages individual hospital caregivers to work as a team for patients' benefit. Many hospitals implementing Project BOOST find the toolkit a valuable introduction to team-based care. Other hospitals that have explored multi-disciplinary approaches to patient care find that Project BOOST is the perfect tool to take team-based care to the next level.

"There is no better way to teach team-based practice than with Project BOOST," says Philip Vaidyan, M.D., director of hospital medicine at St. Mary's, who introduced team-based care to on a 30-bed medical surgical hospitalist unit one year before implementing Project BOOST. In June 2008, Vaidyan helped create a multidisciplinary patient management team.

The hospitalists promoted collaboration and improved communication on the unit between doctors and nurses, and brought different providers to patient bedsides. Pharmacists were put on the unit, for example. Vaidyan instituted daily, 9 a.m. hand-off meetings between doctors, nurse practitioners, the team leader of nursing, unit care manager and social worker. Twice weekly meetings on Tuesdays and Thursdays brought the entire team together, including pharmacists, social workers, medical residents and other team members, to discuss unit patients. “The team meetings help to build chemistry,” Vaidyan says.

There were some successes with the approach, but it wasn’t until Project BOOST was introduced in July 2009 that the team-based approach brought big dividends.

“We’ve been able to have a huge impact,” says Vaidyan, who helped bring Project BOOST to St. Mary’s. Readmissions are down, Press Ganey scores show patient satisfaction is up, and length of stay on the unit dropped from 4.6 days to 4.1. The intervention, which focuses on eight essential elements for improving the discharge process and transition from hospital to home, was rolled out on the hospitalist unit.

“That morning meeting is key,” says Vaidyan, and the point at which patients are identified for BOOST. Those with a history of readmissions, or who lack patient support or have poor health literacy, as well as those on multiple medications (six or more) or taking blood thinners, insulin, and certain other high-risk medicines are among those flagged for BOOST.

When a patient is BOOSTed, the patient’s chart is flagged and the patient’s name gets added on a white board on the unit so all team members can track that patient’s care. “We try to get them more involved with their health,” says Tracy Kment, a unit clinical support nurse. With the team approach, nurses now have more bedside time with patients and work closer with patients and family members throughout the stay on how caring for themselves after discharge.

Doctors, nurses and other team members are better able to support and educate patients throughout the stay, helping patients and family members better understand diagnoses, medication safety and the importance of following up with their doctors post discharge, for example. A pharmacist is available to come to the bedside to talk to BOOST patients about their medicines and answer questions, for example, while a social worker assesses a patient’s home environment, and sets up supports to help ensure patients safely transition from hospital to home.

Prior to discharge, a physician and RN make patient rounds, alerting patients to the upcoming discharge and perform so-called “teach back,” or getting patients to describe important steps they need to take in order to ensure a smooth transition from hospital to home, such as taking and managing their medicines.

Unit caregivers even customized the BOOST toolkit to enhance the teach-back method. “We created a teach-back video using an I-Phone,” Vaidyan says. Another hospitalist and staff made different versions of the teach-back—proper and wrong ways—then uploaded on YouTube for other staff members to watch.

“I had never done a discharge with a doctor” until Project BOOST, says Kment. “It has changed the whole process. It has had a positive impact on all patients on the unit. At discharge, patients have better health literacy.”

At discharge, all the important points are captured onto a patient-friendly, one-page “Patient PASS,” which contains all the vital information a patient needs to successfully transition from hospital to home, from the tests they’ve had, diagnosis, doctor contact information, warning signs and follow-up doctor appointments. A second page contains their medication regimen. Within 72 hours of discharge, the team nurse leader calls BOOST patients to see how they are doing, answers questions, makes sure medicines are being taken properly, and ensures follow-up doctor appointments are made. “It’s been very helpful because it involves the patients,” Kment says. “It has helped to keep the patients in their home and reduce the number of readmissions.”

The hospital plans to expand BOOST by creating a congestive heart failure unit in early 2010, and the SSM system is considering introducing BOOST to other facilities.

About the Society of Hospital Medicine

SHM is the largest organization in the nation representing more than 10,000 hospitalists and the practice of hospital medicine. The Society’s mission is to promote the highest quality care for hospitalized patients, and provide opportunities and support to hospitalists. It is committed to enhancing the practice of hospital medicine by promoting education, research and advocacy, and does so in part by offering a host of evidence-based tools at www.hospitalmedicine.org/BOOST.

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