

Decreasing Potentially Preventable Hospitalizations

ESRD Network 15

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Project Description

- ▶ NW15 began a care transition coalition in the prior contract period
- ▶ In September 2011, CMS extended a request for proposal for a small, short-term project to examine potentially preventable hospitalizations in a subset of facilities in Northwest Denver
- ▶ NW15 responded to the RFP and the Special Project began in October 2011
- ▶ In February 2012, NW15 received a stop work at the convenience of the government



Project Description (cont.)

- ▶ NW15 and the participating facilities/community members felt that this work should continue and could be rolled into the NW coalition work
- ▶ With the approval of the NW15 COR, in March 2012, the project was reviewed, revised and transitioned to the coalition
- ▶ Work on this important topic continues with a steering committee and two workgroups

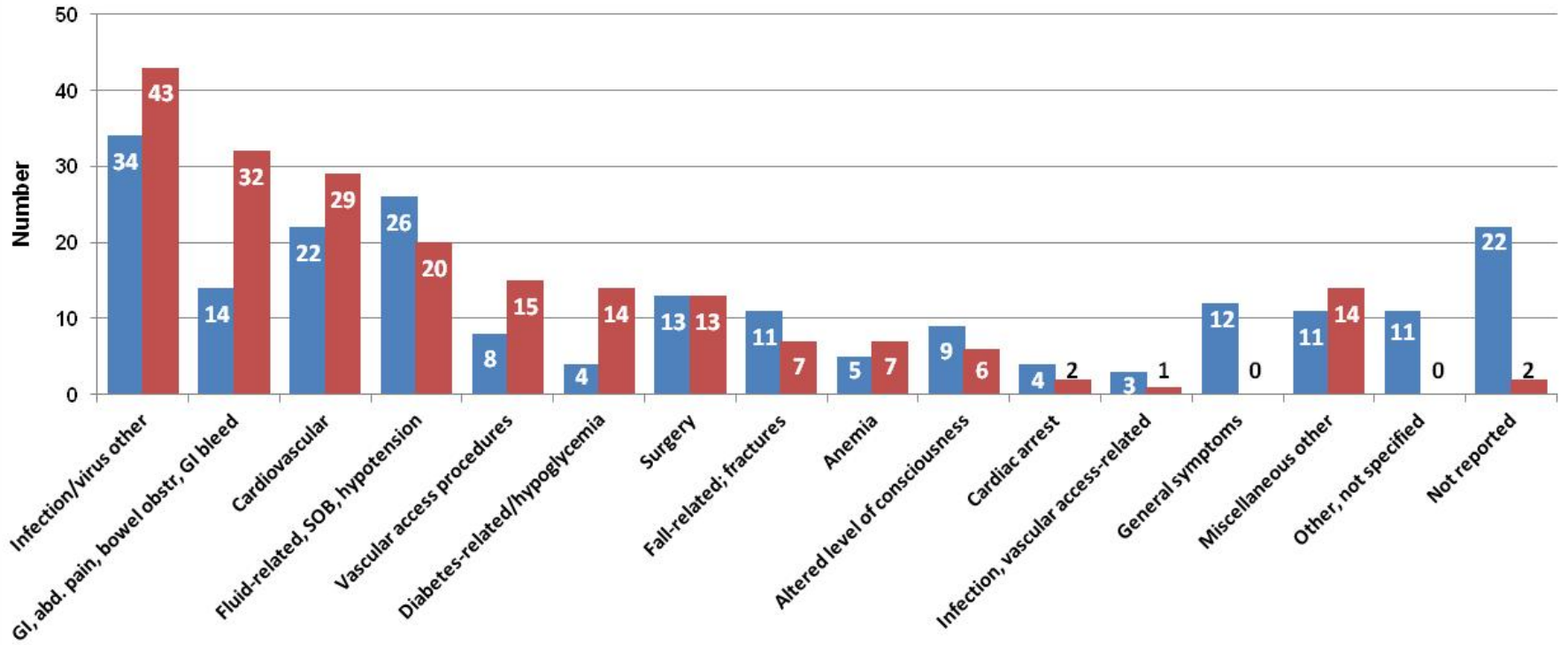
Data Collection and Analysis

- ▶ Hospitalization data collected from participating facilities (n=7) using their individual facility hospitalization logs
- ▶ Challenges with the available data included:
 - Incomplete logs/missing admission and discharge information
 - Inconsistent hospitalization categorization
 - Classification of “other”

Admitting Diagnosis

January - April: **2011 Baseline** and **2012 Follow-Up**

(n=209 admissions in 2011; 205 admissions in 2012)



Data Collection and Analysis (cont.)

- ▶ Total number of Hospitalizations (Jan–Apr)
 - 2011–209
 - 2012–205
- ▶ Number of Days Hospitalized

	2011	2012
Range	1–130 days	1–234 days
Mean	7.5 days	10.1 days
Median	4 days	4 days

- ▶ Number of Hospitals Involved–3 hospitals account for approximately 75% of admissions

Data Collection and Analysis (cont.)

- ▶ December 2011–NW15 MRB reviewed preliminary data and proposed the following as the top four reasons for hospital admissions:
 - Infections (all types)
 - Fluid–Related Hospitalizations
 - Altered Mental Status
 - Falls/Accidents

Progress

- ▶ Full coalition face-to-face meeting was held in June
- ▶ Coalition members selected to topic areas to address
 - Fluid-related admissions
 - Infection (all cause)-related admissions
- ▶ Formed two workgroups
- ▶ Currently examining interventions

Potential Interventions

- ▶ Fluid-related workgroup
 - Collaboration with MEI on a patient education “mini-movie” related to fluid balance (near completion)
 - Collect “best-practice” examples and share with participants
 - Communication tool (NW4)
 - Focus on staff education
 - Physicians–dialysis prescription and sodium loading
 - Staff–sodium loading and fluid volume
 - Patients–education on fluid-related topics

Potential Interventions

- ▶ Infections–related workgroup
 - Vascular access related infections–education
 - Communication tool–NW4
 - Diabetic foot infections
 - Resource list for PCPs and Nephrologists
 - Patient education materials
 - Staff education materials