Care Coordination Learning & Action Environmental Scan Overview

The Great Plains Quality Innovation Network (QIN) partners with communities throughout the region to unite stakeholders, consumers and healthcare providers to improve care coordination and medication safety – resulting in reduced hospital admissions, readmissions and medication harm.

Opportunities to improve care coordination and 30-day hospital readmissions are often associated with communication, care transitions, and consumer and family engagement. Interventions involve the transfer of information between providers and patients at the time of transition, empowering consumers and/or caregivers to self-manage their condition and establishing standard processes to effectively manage the transition between settings.

Environmental Scan Overview

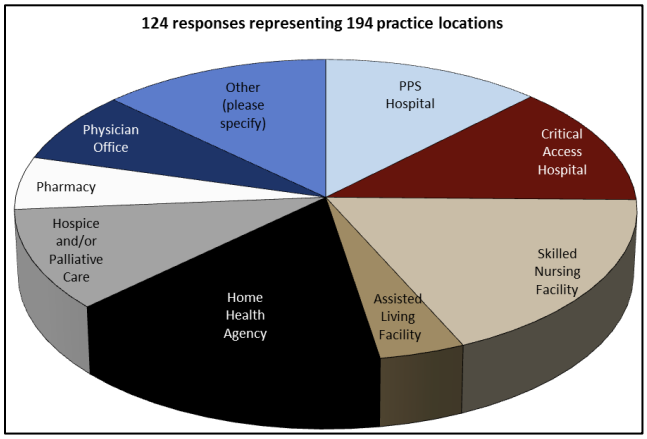
WHAT: A tool to learn more about what is happening across communities within the Great Plains Quality Innovation Network (QIN) regarding care coordination and medication safety

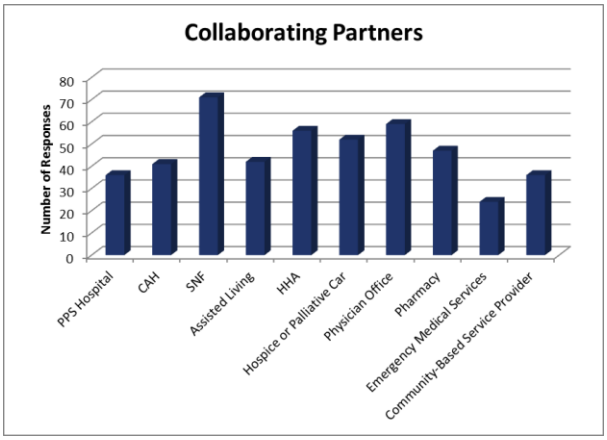
HOW: Link to environmental scan placed on the Great Plains QIN website from February to April 2016

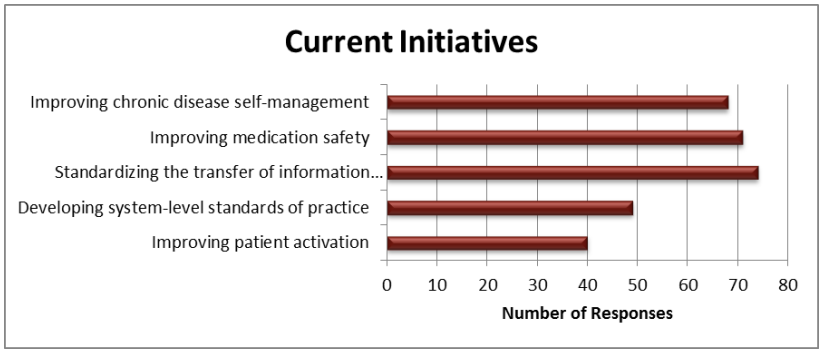
WHO: Distributed to providers and stakeholders within the Great Plains QIN (Kansas, Nebraska, North Dakota and South Dakota)

Key Findings

Broad distribution and diversity in respondents, collaborating partners, and current care coordination related quality improvement efforts.

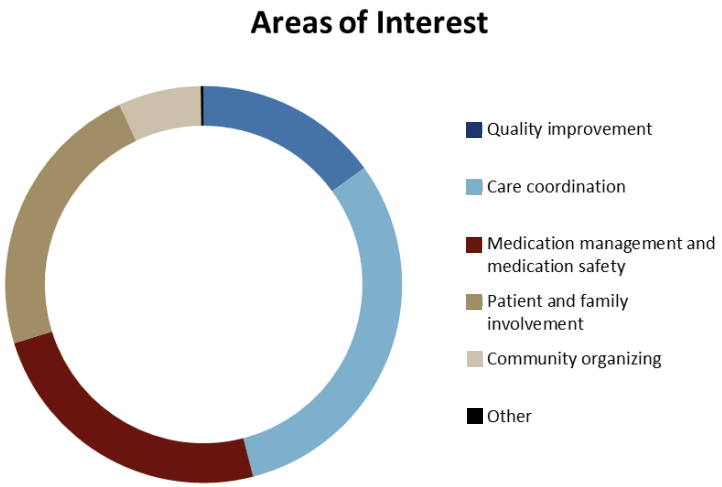






Interest Assessment

Respondents were asked to identify priority areas and topics where assistance would be most beneficial.



When asked to rank the top three priority areas for education and assistance, the top areas identified, in order of priority, were: care coordination, medication management and medication safety, and consumer & family involvement.

Additional input was collected on specific topics within the areas of interest. Respondents were able to select as many topics as desired. Below is a top ten list of topics of interest across all areas. Most of the topics are from the top three areas of interest (care coordination, medication management, and patient & family involvement.) Learning best practices for other communities had a high number of responses in multiple areas of interest.

Topic	Area	# responses
Reducing avoidable readmissions and emergency department visits	Care Coordination	72
Improving medication reconciliation across organizations and/or community	Medication Management	72
Learning best practices and lessons from other communities	Quality Improvement	64
Identifying patients/residents at risk for readmission	Care Coordination	63
Improving chronic disease management across organizations and/or community	Patient Family Involvement	63
Improving medication safety practices across organizations and/or community	Medication Management	57
Creating mutual commitment to work together	Community Organizing	57
Facilitating advance care planning and palliative care across organizations and/or community	Patient Family Involvement	56
Care management and follow-up	Care Coordination	51
Improving patient/family/caregiver access to community-based services	Patient Family Involvement	51

Successes, Challenges, and Lessons Learned

Open-ended questions allowed respondents to comment on their successes, challenges, and lessons learned related to improving care coordination and/or medication safety across their organization and/or community. Communication, collaboration, health information technology, and medication reconciliation were shared by various respondents as successes, challenges, and lessons learned. A sampling of those responses is included in the table below.

Successes	Provided by
We have implemented a program where paramedics will follow a patient after discharge to assist with medication management and observation of the patient who is at a high risk for re-admission.	CAH in Nebraska
We have implemented a "Do Not Use" strategy where we place meds that are not current in a bag if patient does not want to dispose of them. We monitor charting for medication teaching/discussion; expectation is for some sort of documentation for each visit.	HHA in Nebraska

Successes	Provided by
More patients are utilizing OP services to assist in their education of available community resources.	Rural health system in North Dakota
Participating in the LTC-Hospital Med Rec meetings has improved our understanding of the issues and helped us network with SNF leaders to increase our understanding of top priority issues.	PPS hospital in North Dakota
Providing care coordination for patients in reservation communities to get dental care.	Mobile dental care in South Dakota
Care Coordinators within the clinic work with pharmacy staff to discuss med concerns	Physician's office in South Dakota

Challenges	Provided by
Community support in rural settings	PPS Hospital in South Dakota
Staff turnover and training	FQHS in South Dakota
Keeping physicians in the loop; hospitalist may change treatment and primary physician is unaware	PPS Hospital in Nebraska
Sustained utilization of developed tools	SNF in Nebraska
Follow through on education provided	Hospice provider in North Dakota
The main challenges are related to (a) communication and (b) technology. We are learning ways to improve our communication, but continue to struggle with our HIT challenges.	PPS Hospital in North Dakota

Lessons Learned	Provided by
You have to be constantly involved in quality improvement to see a change.	SNF in North Dakota
Communication is key—need to work with the hospitals and discharge planning to make sure correct medication list is given and that the client can fill scripts (too expensive) and can take them.	Public Health Department in North Dakota
Importance of active communication to keep everyone involved updated and in the loop improves care coordination.	IHS and Tribal Clinic in South Dakota
Identify key stakeholders and engage them in planning and developing strategies.	PPS Hospital in South Dakota
Great lessons were learned in developing an ED transfer form—less information was most successful.	SNF in Nebraska
It takes a village! There are a lot more people and agencies involved than you might think. The coordination takes a lot of time and effort	PPS Hospital in Nebraska

Summary

The Care Coordination learning and action environmental scan has allowed a better understanding of current efforts and needs within the Great Plains QIN to improve care coordination and medication safety. There is strong interest in sharing between communities and partners. There are common topics and areas of interest from our partners that the Great Plains QIN will work to address through future education and assistance.

Contacts

If you have questions or need additional information, please contact a member of our care coordination and medication safety staff.

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