



Resident/Family Decision Aid to Reduce Avoidable Hospital Readmissions

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Learning Objectives

By the end of this presentation, participants will be able to:

- Describe the purpose and use of the resident/family decision aid, *Go to the Hospital or Stay Here?*
- Discuss resident and family response to the Guide (decision aid) and effect on hospital readmissions
- Discuss steps involved in implementation of this decision aid

Development of the Decision Guide

Go to the Hospital or Stay Here? –A Randomized Clinical Trial



**Preliminary Work Supported by
Patient-Centered Outcomes Institute
(PCORI)**

Background & Significance

- **Avoidable NH Resident readmissions to acute care generate an estimated annual cost of \$4.3 billion**
- **CMS Value-Based Purchasing Program first reduced payments to hospitals with excess readmissions**
- **Then, as of October 2018, NHs too were penalized up to 2% or rewarded the same based on their readmission rates**

Programs to Reduce Avoidable Hospitalizations

- **INTERACT® and the Missouri Quality Initiative addressed clinical factors, particularly early identification and timely response to changes in condition.**
- **Family and resident insistence on transfer was largely overlooked yet 14 – 17% of potentially avoidable readmissions were reported by NH staff to be due to their insistence.**

Development of the Decision Guide

Structured Interviews

96 NH Residents

75 Family Members

100 Providers

In 18 Nursing Homes

Transformation of Results to Decision Aid

- ✓ Team read, re-read interview results
- ✓ Identified many misunderstandings about contemporary long-term care: addressed in narrative and an FAQ section of new Guide
- ✓ Noted concerns about transfers vs remaining in NH and incorporated them in narrative

Field Test of Decision Guide

- **16 Nursing Homes in South Florida**
- **Recruited 128 residents and 64 families, total 192**
- **Randomly assigned to treatment and control groups**

Intervention

Treatment Group

- ✓ **Provided the Decision Guide**
- ✓ **Brief discussion of main points**
- ✓ **Encouraged participants to read the Guide and ask staff questions, discuss with providers**

Comparison Group

- ✓ **Usual Care**

Outcomes

- **Knowledge:** treatment group demonstrated greater improvement in knowledge re rehospitalizations ($p = .006$)
- **Decisional Conflict:** significant decrease found in the treatment group $p < .001$
- **Preference to remain in NH:** treatment group increased from 70% to 81% at posttest, no change in control group

Participant Evaluation of the Guide (N = 73) at Posttest

- **85% found it helpful or very helpful**
- **Only 3 said it was not helpful, 2 were neutral**
- **On rating scale 1 (not helpful) to 5 (very helpful) mean rating was 4.5**
- **25% shared it with others**
- **55% read it thoroughly, 12% said they did not read it further**



“It gives family members a better understanding of what questions to ask regarding nursing home services provided at this facility. It helps them (families) in structured meetings to ask questions about services.” [NHA, Tennessee]

A Family Story

“This decision guide should be offered to all families in nursing homes. It is very helpful to explain to families what treatments can be provided in the nursing home. My mother died this past July in a nursing home. We didn’t have to go to the ER.”

Administrator from Mississippi



FLORIDA ATLANTIC UNIVERSITY

What We Have Learned: Helps with the End of Life Plan of Care Discussion

Helps to set resident/family goals for care and discussion of their expectations and the nursing home expectations such as the quality of care for the resident versus quantity of care.

“The Guide is very colorful and laid out in easy to read facts with resident and family quotes from interviews. It opens that dialogue for residents and families to have discussions around end of life care.

DON, Alabama

Making Waves

Conclusions Part I

- ✓ **The Decision Guide was very well received by Residents and Families**
- ✓ **Fills a Gap in Tools for Reducing Hospital Readmissions**
- ✓ **Potential to Reduce Hospital Readmissions**

Test of Organization-Wide Implementation

In the first year of an 8-state initiative designed to assist nursing homes in reducing unnecessary hospital readmissions, 16 nursing homes were identified and invited by CMS and state agency advisors to participate in the initial study of organization-wide effects of the intervention (use of the Guide).

CMS Region IV

1. Alabama
2. Florida
3. Georgia
4. Kentucky
5. Mississippi
6. North Carolina
7. South Carolina
8. Tennessee

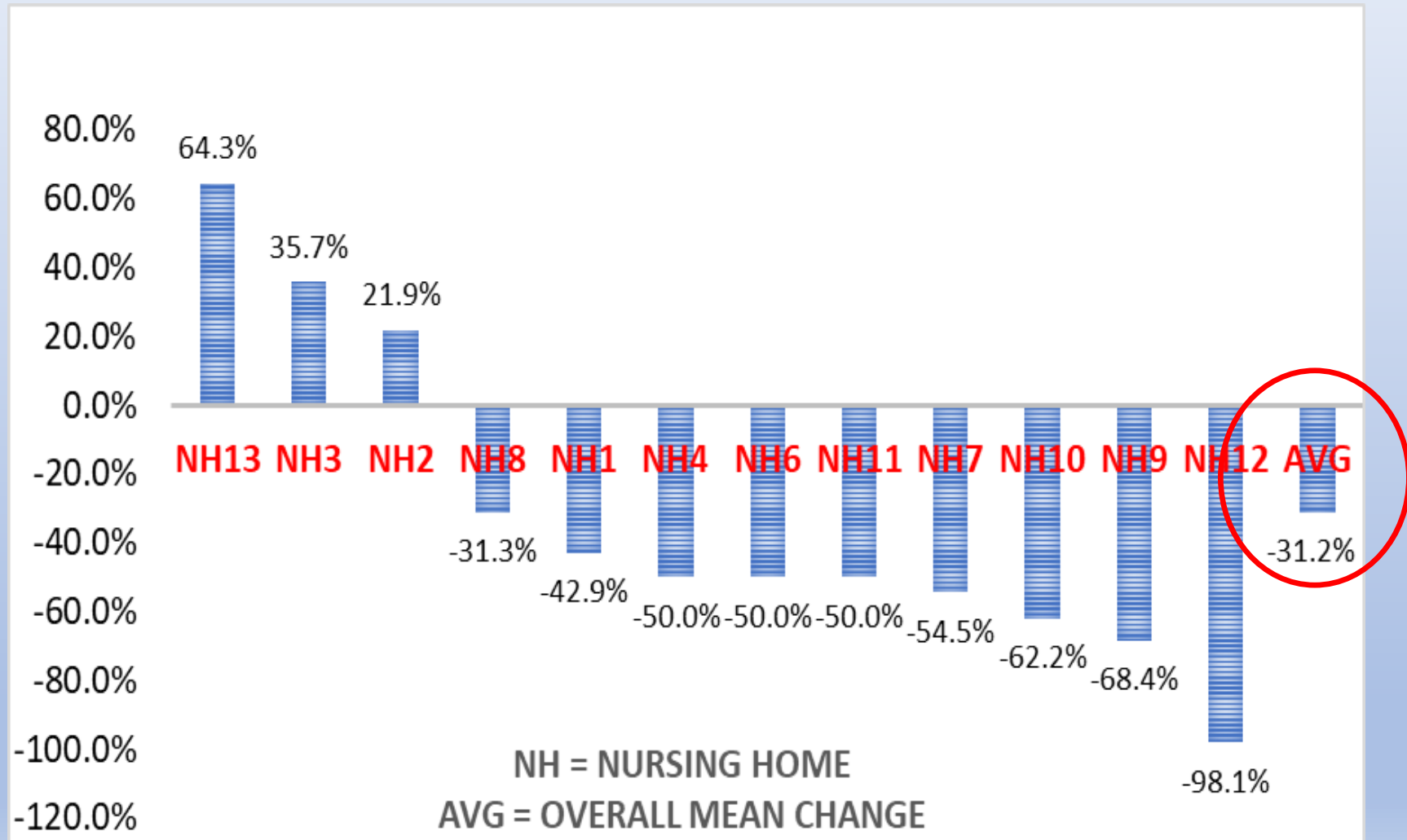


- 16 facilities in Region IV received an online orientation to the project and onsite visit from project team leadership prior to launch.
- Pre and post implementation data were uploaded to a secure section of the project website (www.decisionguide.org) by the facilities.
- Three facilities withdrew due to change in top management and a fourth facility provided incomplete data resulting in data for analysis from 12 pilot facilities.

Expectations of the Participant NH's

- 1. Complete a baseline survey of facility characteristics and report all hospital transfers that had occurred in the 3 months prior to introducing the Guide/Trifold in their facility.**
- 2. Prepare facility management and staff to deploy the Guide/Trifold.**
- 3. Rollout Guide/Trifold use in the facility.**
- 4. Complete a report of hospital transfers that occurred in the first three months of Guide and/or Trifold use and report their experience implementing the Guide.**

Understanding the Results:
Percentage Change in Readmissions:
3-Month Project Period Compared to 3 months Prior



Summary

Results: Three of the NHs lost their upper management team soon after study initiation and were unable to continue. A fourth NH did not complete the required online data input. Complete data was reported for 12 facilities. The 3-month mean number of readmissions dropped from 27 preintervention to 18.58 for three months of implementation, a 31.2% decrease. Participating facilities reported the Guide was very well received by residents and their families.

Conclusions and Implications: Residents and family members appreciated receiving the decision guide and participating NHs experienced a significant decrease in readmissions. Reports from the participating NHs suggest most residents and family members were unaware of the scope of services provided by contemporary NHs, an information gap can be filled by the Guide.

Conclusions Part II

Demonstrated the acceptability and potential usefulness of the Guide in reducing hospital readmissions of nursing home residents

Reports from the participating nursing homes indicated that the resident and family members were appreciative of receiving the Guide and many had been unaware of the services that could be provided in the nursing home.

Use of the Guide was easily integrated into day to day function

Using the Guide

Guide Website

Decision Guide

Home

About Us

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CMS Project ▾

Education and Resources

Contact Us

GO TO THE HOSPITAL OR STAY HERE?

A Decision Guide for Residents, Their
Families, Friends and Caregivers



"The Decision Guide tools and resources have really helped us think differently on how we can prepare our Residents and Families for changes in condition and to let them know, WE take care of them in our Nursing Facility." NC SNF



Trifold Version

LOOK INSIDE

Education & Resources

Use this section to access Training & Educational Videos, Case Studies and Webinar Presentations

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Residents & Families

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Information for
Professionals

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Sample
page



"It depends on what is going on, the severity of the illness. Give me a run down on what the hospital can do for me and what they can do for me here."
(Patient)

"I don't want to push the panic button and send her to a hospital if it can be kept under control here."
(Son)

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Page 3 of the Guide

REASONS TO PREFER BEING TREATED HERE

Many tests and treatments can be provided in the nursing home:

- Medications
- X-rays
- Blood tests
- Oxygen
- Wound care
- Checking on you and reporting to your doctor or other medical provider
- Comfort care (pain relief, fluids, bed rest)
- IV (intravenous) fluids in some facilities
- Physical or Occupational Therapy
- Speech Therapy

You can ask your nurse, doctor or other medical provider what else can be done for you here.

REASONS TO PREFER BEING TREATED IN THE HOSPITAL

Hospitals can provide more complex tests and treatments including:

- Heart monitoring
- Body scans
- Intensive care
- Blood transfusion
- Surgery

THERE ARE ALSO RISKS TO GOING TO THE HOSPITAL

Being transported to the hospital can be stressful. You are likely to have to explain your concerns to nurses and doctors you do not know. You are also at greater risk for skin breakdown,

Available in 6 Languages

選擇去醫院或是留 在這裡?

專為住民及家屬、朋友及照顧者準備的決策指引



GO TO THE HOSPITAL OR STAY HERE?

A Decision Guide for
Residents, Families, Friends
and Caregivers



PUMUNTA SA OSPITAL O MAMALAGI SA BAHAY PAGAMUTAN?

Isang Gabay sa Pagpasiya para sa
Mga Pasyente at Mga Pamilya



Website Address: <http://www.decisionguide.org/>

Training Videos

Videos



The Usefulness of the Guide

Dr Adrienne Mims shares her perspective as a gerontologist and the family member of a nursing home resident



An Introduction from the Project Director

Dr Ruth Tappen describes the development of the Decision Guide



A Testimonial from a Nursing Home Resident

Paul, a rehab center resident talks about how the Guide and better information could have helped avoid an unnecessary hospital transfer.



Introduction for a new Resident and Family Member

A new resident and a family member are introduced to the Guide



Teaming with Resident to Prevent Hospitalization

A resident's change in condition that can be managed in the nursing home. (Pneumonia)



Engaging the Resident and Family in the Plan of Care

Resident and family learn how following the recommended diet can prevent another hospitalization. (Salty Fish)



Managing an upset resident

How not to do it and how to get it right. (Including a resident calling 911.)



Decision Guide for Resident in Palliative Care

Offering Options: Speaking to a resident on palliative care about the Guide



Decision Guide for Resident in Hospice Care

A Social Worker and Hospice Nurse explain issue of hospitalization when the resident is in hospice care

Project Website – Case Studies

Educational Materials for Staff

Best Practices

[click here](#)

Powerpoint Presentation

[click here](#)

Case Studies

1. Anxious Resident – Possible C. Difficile

An 89-year-old post acute patient feels they should go back to the hospital.

[click here](#)

2. Abdominal Tenderness

A resident with CHF, hypertension and anxiety suffers abdominal tenderness.

[click here](#)

3. Pneumonia

Resident admitted after hip surgery – family feels she would be better in hospital.

[click here](#)

4. Advance Directives

Resident with pancreatic cancer has change in condition.

[click here](#)

5. Advanced Dementia

Resident's son insists his 99-year-old mother go to the hospital

[click here](#)

Impact on Staff

Educational tool for staff nurses (and for retraining staff) and strengthens their confidence in decisions and the follow-up measures necessary when a change in a resident's condition occurs. (NHA, Mississippi)

Educating Staff In 30 Minutes

- Highlight how your facility is working to prevent avoidable transfers and readmissions to the hospital
- Review the Guide and plan when it will be introduced to the Resident and Family
- Review some recent transfers that could have been prevented-use a training video to emphasize learning
- Use a case study to engage staff in the discussion



Distribution of the Guide: Workflow

Preadmission

Interview with
prospective
resident/family
(The Pamphlet)

Admission

During
discussions about
the care you will
be providing (The
Guide Book)

Send with bill
(The Pamphlet)

Family Care Plan Meeting

Setting
goals (The Guide
Book)

Planning and Change in Level of Care

Considering
palliative/hospice
care (The Guide
Book)

Distributing the Guide

Have the guide available in the resident's room. ("We have the brochure in a binder at each resident's bedside. We find quite frequently that the copies of the brochure are removed-so people are reading them.")
[Executive, Nursing Home, Alabama])

Helping Families to Use the Guide

“Great educational tool for residents and families and a useful guide for resident-family decision making and the treatments (their options) that can be performed in the nursing home.” (Georgia)

“In a crisis, family members panic, staff panic. Just stop and think what we can do here. The guide is a great educational tool for staff.” (Alabama)

Getting Started

First Steps:

- **Meet with your leadership team**
- **Make sure Medical Director and medical providers are on board with initiative**
- **Provide facility-wide staff preparation**
- **Monitor and reinforce at unit and team level**
- **Embed in orientation**

Hardwiring the Workflow Process

Staff

Introduce at staff meeting

Embed into orientation

QI

Use the information in The Guide to assess where you may need to improve on resident/family demand for transfer

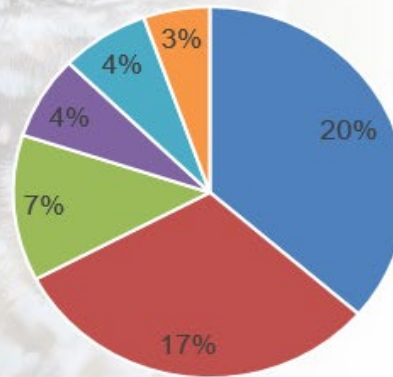
Evaluate improvement in family demanding transfer

Others

Share with referring hospitals

Share with Medical Director and all covering providers

Successful Implementation Strategies



- Use in conversation with families/residents
- Include in admission packet
- Staff education on readmissions
- During care planning meetings
- During resident council meetings
- Sharing with hospital staff

Making Waves

Moving the Guide into the Community

In rural communities, consider introducing the guide in the local churches to individuals-makes a difference in these communities, particularly related to end of life care issues.



Working With Your Hospital

- ✓ Distribute the guide to case managers at local hospitals.
- ✓ Provide more workshops to reinforce information-also provide networking between nursing home personnel and hospital personnel)
- ✓ Create your own slogan with the decision guide for your facility.

Questions?

Comments?



Thank you!

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<http://www.decisionguide.org/>