

Reducing Hospitalizations With On-Site Technical Assistance

Background

Thirty-two dialysis facilities with high rates of hospitalization and emergency department (ED) usage among their patients were identified in Alaska, Washington, Oregon and Montana.

Methodology

During May 1-Sept. 30, 2023, Comagine Health ESRD Network 16 completed on-site technical visits to 32 dialysis facilities. The visit focused on implementing a Plan-Do-Study-Act (PDSA) cycle to reduce hospitalizations and ED usage.

- ▶ Two hours were spent discussing reducing hospital utilization; looking at facility-specific data and trends; brainstorming around the barriers and root causes with the facility administrator, medical director, clinical staff and social worker/dietician; and establishing initial interventions the facility could use to initiate the Plan stage of the PDSA cycle identified to work on in the next three months. Spending undivided time with facility leaders to understand their barriers and then customizing interventions that best fit their population and addressed their specific challenges contributed to the significant reduction in hospital and ED utilization. These facility-specific interventions were in addition to any network-wide interventions that had been launched in May.
- ▶ Fourteen interventions were offered as best practices for the facility to choose from, including creating awareness of the link between physician rounding and hospitalizations and enabling patient empowerment through facility-patient communication.



Patient empowerment is one example of an intervention to reduce hospitalizations and ED usage.

Results

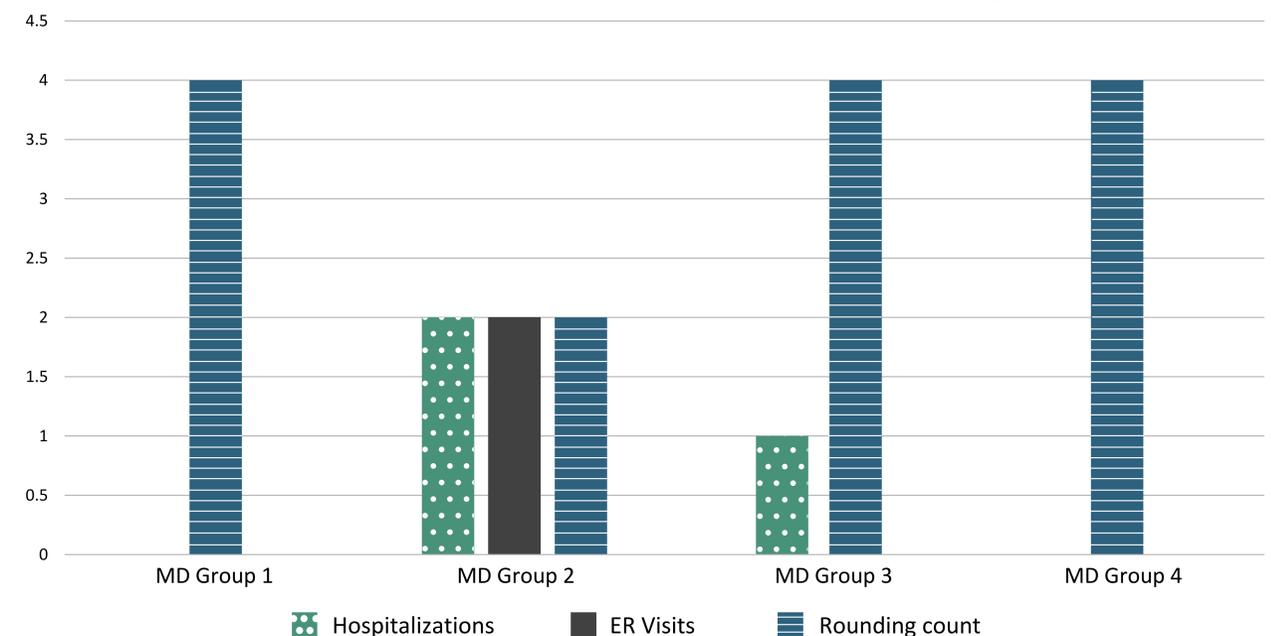
The results of holding two-hour-plus in-person clinical brainstorming and decision-making sessions with key facility personnel about reducing hospital admissions and ED usage include:

- ▶ **30.5%** reduction in the rate of hospital admissions
17% of patients were admitted to the hospital pre-site visit versus 11.9% post-site visit.
- ▶ **34.5%** reduction of in the rate of ED usage
8.4% of patients went to the ED pre-site visit versus 5.5% post-site visit.
- ▶ Increased collaboration by the Network with the QIN-QIO and regional health care systems to improve patient outcomes
- ▶ Increased collaboration between dialysis providers and the Network on targeting specific barriers and root causes



Questions about this project?
Contact Barbara Dommert-Breckler, RN, BSN, CNN, at bbreckler@comagine.org.

Network 16 Project
Hospitalization and ER Usage Reduction
October Hospitalizations/ER visits/MD Rounding



Example of an intervention focus — in this case, physician rounding — clearly showing increased hospitalizations for physician groups whose physicians did fewer roundings.