Updated Guide for Reducing Disparities in Readmissions Provides Resources to Support Actions

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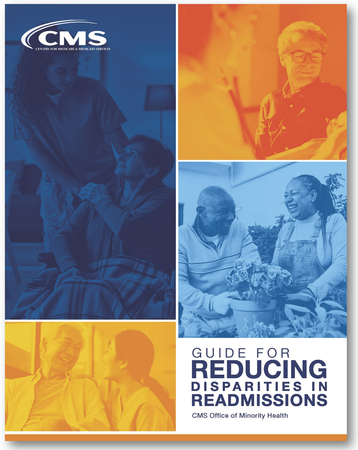
Readmission Guide Overview



This Guide is a resource for health care practitioners, leaders, and community partners focused on quality, safety, and care design in health systems to drive change and deploy interventions that advance equity and reduce disparities in readmissions and associated health outcomes.

GOALS OF THIS GUIDE

1. **Highlight the importance of social determinants of health (SDOH)**
2. **Recommend strategies to establish a multidisciplinary team**
3. **Promote resources organization can leverage to enact solutions and collect data to measure**

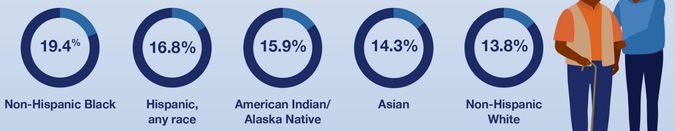
Readmissions have an outsized impact on patients, families, caregivers, and the entire health care system.[1,2,3]

MEDICARE READMISSIONS: QUICK FACTS

IN 2018, THERE WERE **2.3 MILLION READMISSIONS** WITHIN 30 DAYS OF DISCHARGE COSTING ROUGHLY **$35.7 BILLION**

AN ESTIMATED **10%** OF THESE READMISSIONS COULD HAVE BEEN PREVENTED

OF ALL RACIAL AND ETHNICITY GROUPS, PATIENTS WHO ARE NON-HISPANIC BLACK EXPERIENCED THE HIGHEST RATE OF UNPLANNED 30-DAY READMISSIONS IN 2016.[4]



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Social Determinants of Health as Drivers of Readmissions

Insurance status, lower education attainment, lower income, lack of access to transportation, lack of access to stable housing and food, and lack of social support have all been linked to increased readmission rates.[5-8]

Route to Reducing Disparities in Readmissions

Health care leaders can use this guide to construct a strategy for reducing readmissions across diverse populations based on the present state and needs of their organization. The Guide outlines three critical steps:

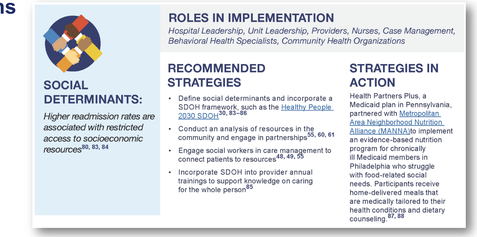
1. **Develop an SDOH Data Infrastructure**
   - Collect Critical Data
   - Identify Root Causes
2. **Build Teams & Partnerships to Support SDOH**
   - Activate a Multidisciplinary Team
   - Foster External Partnerships and Linkages to Promote Continuity of Care
   - Secure Leadership Buy-In & Promote Organizational Change
3. **Implement Patient-Centered Systems and Processes**
   - Start from the Beginning
   - Respond Systematically to Social Determinants
   - Focus on Providing Culturally Competent Care

Read and Download the Guide

https://www.cms.gov/about-cms/agency-information/omh/downloads/omh_readmissions_guide.pdf

Strategies & Key Areas for Reducing Readmissions

- **Discharge & Care Instructions**
- **Usual Source of Care/ Linkage to Primary Care**
- **Language Barriers and Access Interpreter Services**
- **Health Literary**
- **Culturally Competent Patient Education**
- **Social Determinants**
- **Mental Health**
- **Comorbidities**



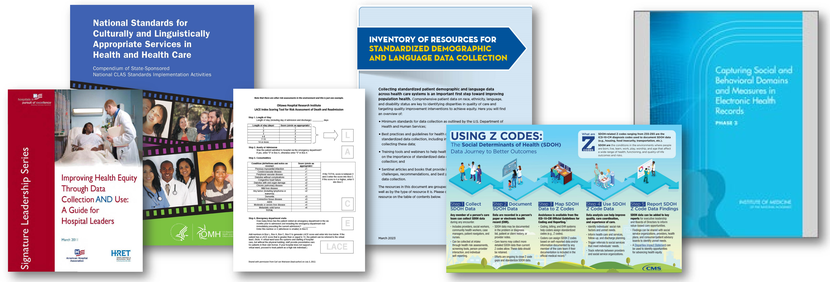
The Guide highlights eight key issues that lead to readmissions and recommends strategies and the team members who play a role in implementing interventions. An example is shown above.

Remember

Implementation is a dynamic and continual process that is contextual to your organization. Ongoing evaluation of process, outcomes, and goals is required.

Links to Resources

The Guide includes links to **over 40 resources** to support organizations in reducing readmissions, including:



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