

Readmissions NEWS

Creating Connections to Improve Population Health

by Jamo Rubin, MD, Founder and CEO of TAVHealth

A recent [Commonwealth Fund article](#) finds health systems that build meaningful connections with their community create higher-quality population health than those that don't. A good example is CHI Memorial Hospital in Chattanooga, TN. They collaborate with a network of community organizations to connect patients with the resources needed post-discharge. These resources ensure patients have transportation to doctor appointments they would have missed; the opportunity to obtain medications they couldn't afford; and relationships with new peers that help avoid depression and social isolation. As a result of this collaboration with the community, CHI Memorial's heart failure program received national CMS recognition for reducing readmission rates below 10 percent.

When clinically oriented programs are connected to social and financial community resources, everyone benefits: hospitals experience lower readmissions, providers achieve better outcomes, and patients and families have a better experience. This collaboration also provides measurable analytics that by tracking patient outcomes lead to improved performance over time.

This is not to say that evidence-based medicine and coordinated care models are not important. However, their success often depends on factors beyond the provider's control. This can include a patient's employment status or social support network. Physicians can do their best to help a patient through diagnosing a condition and writing a prescription. But what if that prescription is never filled because the patient doesn't have the funds needed to afford it? Or they can't return for follow-up appointments because they don't have transportation? It is often these kinds of external barriers that stand in the way of a person's health. This would be similar to someone trying to prepare a hot meal without a kitchen to cook in or money to buy food. Without the resources to adhere to treatment, people aren't able to see long-term improvement, and readmissions continue to rise.

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Fostering connections benefits providers and patients

Most healthcare systems are aware that if they don't help patients gain access to the resources needed after a discharge, then readmission rates and patient experience will be negatively impacted. Yet, this has not been supported by the fee-for-service care model.

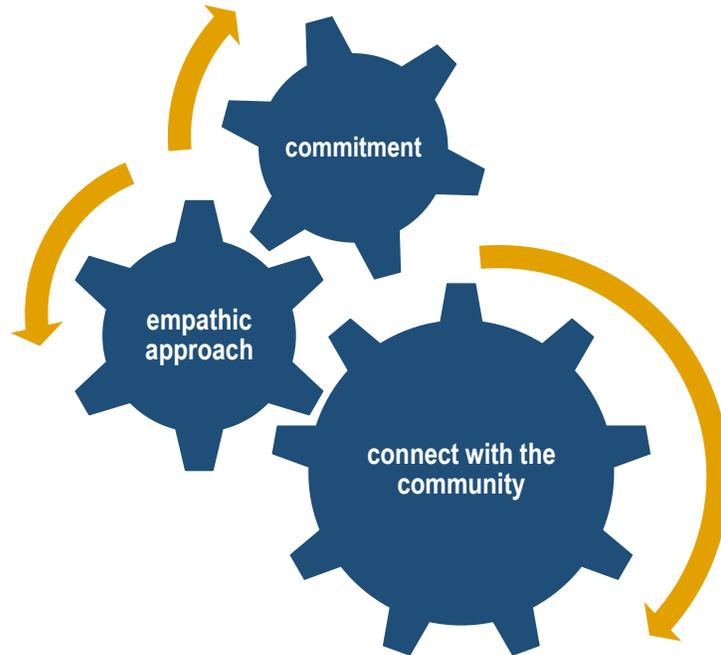
Now that healthcare is evolving from a fee-for-service to a fee-for-value model, providers must take an active role in connecting patients to financial and social resources only available outside of the hospital walls. By focusing on each person's unique circumstances and approaching care from the patient's perspective, healthcare leaders can begin to uncover and address each patient's social and financial barriers. Hospitals, in turn, will enjoy the rewards of improved patient experience, lower costs and better outcomes.

Creating Meaningful Connections

There are three major keys to building meaningful connections that help patients reach their health goals and deliver quality care.

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First, it takes commitment. This means creating a plan, adhering to a defined process, and forming a strategy for increasing access to resources outside of the hospital. Commit to understanding each patient's personal story. Stay accountable for bringing patients closer to the resources they need.

Second, connect with your community. You need a clearly defined way for people to collaborate. Identify the right partners to support meaningful connections within the community. Then give them a platform for collaboration.

Third, use an empathic approach to help people talk about personal challenges and obstacles standing in the way of their health. People often don't realize that there are solutions to problems they've given up on solving. Initiate a compassionate conversation, and you will uncover clues to what's really going on with your patient.

Conclusion

Community involvement in healthcare is improving. But it remains uncommon, and is rarely done in a systematic and replicable way. Health systems have an obligation to engage with additional resources outside of the hospital walls. Healthcare has the [fastest employment growth](#) of any industry. Regarded as leaders, large scale employers, supporters of cultural and religious groups, and providers of care, health systems are the natural place to drive bigger solutions to population health issues.

From a financial perspective, Medicare has declared that within the next two years, [90 percent](#) of its dollars will be meted out based on outcomes and other quality metrics. If the difficult task of moving from a fee-for-service to a fee-for-value model is not undertaken soon, hospitals will get [less money](#) and find it difficult to attract the best providers.

Healthcare leaders must strive to improve patient care beyond discharge. This will reduce cost of care and readmissions, and improve patient experience. By collaborating within communities to create connections, we have the opportunity to help patients understand what they need to achieve long-term health and change how care is delivered.

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