



Submitted by Kathryn Santos, PT, MPA, NYS Gold STAMP Coach and Continuing Care Leadership Coalition (CCLC) Director of Quality Improvement Initiatives
December 21, 2015

The ABCs of a New York State Veterans' Home Collaborative Experience

In 2014, the Gold STAMP Program targeted outreach to two New York State Veterans' Homes with a high prevalence of pressure ulcers. This outreach was intended to improve the performance of these Homes in the area of pressure ulcer prevention and treatment. Two new cross-setting Collaboratives were established, including the New York State Veterans' Home at Montrose. As of March 2014, the Centers for Medicare and Medicaid Services' (CMS) Quality Measure for the percentage of long-stay high-risk residents with pressure ulcers at the New York State Veterans' Homes at Montrose was 9.0 percent. The Collaborative effort began in September 2014, with assignment of a designated Gold STAMP coach. The Collaborative includes the New York State Veterans' Home at Montrose, the New York Presbyterian/Hudson Valley Hospital Center and the Dominican Sisters Family Health Service. As of June 2015, the CMS Quality Measure was 7.0 percent, which is .5 percentage points below the New York State average.

What are key attributes of their experience?

Appointing Self-Motivated Co-Champions with Strong Support from Senior Leadership and an Interdisciplinary Core Team

Champions/Co-Champions from each organization have been convening face-to-face Collaborative meetings regularly since the formation of this Collaborative in late 2014. Facilitated by a Gold STAMP Coach, these small group meetings have been efficient and effective for many reasons. The Co-Champions are committed, caring, responsible, respected, and optimistic individuals who prepare well prior to each Collaborative meeting by engaging at the organizational level a dynamic interdisciplinary core team, and are highly supported by senior leadership. Carefully thought out Collaborative and organizational action plans guide local activities and accountabilities. The Collaborative Co-Champions represent different disciplines such as nursing, infection control, nutrition, discharge liaison, and performance improvement. Collectively, they offer complementary strengths in clinical knowledge, data management (e.g., establishing and reviewing trend reports), template/tool development (e.g., for audit purposes), and staff education that have assisted greatly in improving process measures.

Building and Strengthening Provider Relationships Within the Care Continuum

From the introduction of this Collaborative work, each organization has been steadfast and resilient. With onboarding of hospital and nursing home clinical and administrative leaders who play important roles in driving pressure ulcer improvement, the Collaborative has quickly planned to orchestrate a meet-and-greet among key individuals. Similarly, the home care liaison and Gold STAMP Champion have established a consistent presence at the nursing home. Furthermore, the Collaborative has leveraged new competing priorities – including organizational mergers, novel provider designation, electronic medical record system rollout, and national quality-related mandate (e.g., ICD-10 implementation) – as an opportunity to identify and achieve shared goals.

Communicating Across Disciplines and Care Settings

The Collaborative has standardized a pressure ulcer communication tool to assist in transferring vital information about patients with pressure ulcers or at high risk of developing one during care transitions. This tool has adopted as framework an evidence-based pressure ulcer communication tool that the Collaborative customized with complementary elements to accommodate their needs. In addition, Co-Champions have been working with their information technology teams to improve efficiencies in electronic medical record systems, as available, in documenting and communicating pressure ulcer related information, and automating regular data and trend reports. Since early 2015, the Collaborative has been using weekly electronic data reports from the hospital designed to track patient transfers between care settings, and from which other settings – one of whom still employed paper-based documentation until late 2015 – reconcile their information and monitor provider compliance with use of the communication tool.

Ongoing education at the organizational level also has been a crucial activity, and has included different topics. Co-Champions have been working hard to increase staff awareness about the Gold STAMP program, knowledge of pressure ulcer improvement best practices, and use of the pressure ulcer communication tool. They also have been incorporating related discussions in routine and ad hoc meetings with senior leadership, managerial, and frontline staff. The hospital and the nursing home have been employing performance dashboards across units in their organizations. In parallel, their organizations have been investing in improving related clinical competencies of certain staff through a certification program.

As their Gold STAMP Coach, I would like to thank this Collaborative for their hard work. I am fortunate to be working with such dedicated Team.