



MI STAAR

State Action on Avoidable Rehospitalizations

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Michigan Hospitals Identified for National Pilot Project to Reduce “Rehospitalizations”

LANSING, Mich. — Ten independent Michigan hospitals and select hospitals at five Michigan hospital systems have been chosen to participate in a three-state health care collaborative to reduce hospital readmissions.

The project targets unplanned, related “rehospitalizations,” which are readmissions that are not expected/scheduled, but whose reason is clinically related to the initial admission. The pilot project, named **ST**ate Action on **A**voidable **R**ehospitalizations (STAAR), seeks to reduce 30-day rehospitalization rates (patients being hospitalized again within 30 days of discharge) by 30 percent, while increasing patient and family satisfaction with transitions and coordination of care.

Hospitals in Michigan, Washington and Massachusetts are participating in the STAAR project and Michigan’s efforts are being coordinated by MPRO (Michigan’s Quality Improvement Organization) and the Michigan Health & Hospital Association (MHA) Keystone Center for Patient Safety & Quality. Technical assistance is being provided by the Institute for Healthcare Improvement (IHI), whose efforts are supported by a grant from The Commonwealth Fund.

Ten independent Michigan hospitals and select hospitals within five Michigan hospital systems have been chosen for the pilot. Hospital systems include:

Health System Hospitals

Detroit Medical Center

Sinai-Grace Hospital
Detroit Receiving Hospital & University Health
Center
Harper/Hutzel Hospital, Detroit

MidMichigan Health

MidMichigan Medical Center-Midland
MidMichigan Medical Center-Gladwin
MidMichigan Medical Center-Clare
Gratiot Medical Center, Alma

Spectrum Health System

Spectrum Health Blodgett Hospital, Grand Rapids

Spectrum Health Butterworth Hospital, Grand Rapids
Helen DeVos Children’s Hospital, Grand Rapids
Spectrum Health Reed City Hospital
Spectrum Health United Hospital, Greenville

St. John Health System

St. John Hospital & Medical Center, Detroit
St. John Macomb-Oakland Hospital, Warren
Providence Hospital Medical Center, Southfield
Providence Park Hospital, Novi
St. John River District Hospital, East China

**University of Michigan Hospitals & Health Centers,
Ann Arbor**

— MORE —

Individual Hospitals

Allegiance Health, Jackson
Battle Creek Health System
Botsford Hospital, Farmington Hills
Charlevoix Area Hospital
Crittenton Hospital Medical Center, Rochester

Gerber Memorial Health Services, Fremont
Henry Ford Hospital, Detroit
Mecosta County Medical Center, Big Rapids
Pennock Health Services, Hastings
Portage Health, Hancock

Specifically, the project aims to reduce avoidable rehospitalizations by improving patient care transitions (the process of moving a patient from the hospital setting to home care or another health care setting) through enhanced patient communication and timely follow-ups after hospital discharge.

“The collaboration is unique in its community-wide approach to find solutions to improve patient care and safety across all health settings,” said MPRO President & Chief Executive Officer, Robert Yellan. “This project is about removing silos of care so that different types of facilities and practitioners communicate effectively and work together with patients and their families to ensure treatment, follow-up visits, and appropriate management of care.”

“Michigan hospitals realize that the recovery process has only just begun when patients leave our facilities and return to their lives,” said MHA President Spencer Johnson. “How patients transition from hospital care to their home or long-term-care facilities is key to the effectiveness of their treatment. By identifying and working to reduce avoidable rehospitalizations, Michigan hospitals will benefit not only our patients and communities, but other states will be able to learn from this initiative.”

The criteria used to select the participating hospitals was based on regional representation; representation by rural/urban, teaching/nonteaching; critical access hospitals; ethnic diversity in hospital service area; representation by independent and system hospitals; willingness to recruit post-acute care partners (long-term care, home health, etc.); and willingness and capacity to collect data.

The pilot project hospitals have pledged to commit significant staff time, resources and leadership at all levels of their organization to reduce avoidable rehospitalizations. Each hospital will focus on achieving:

- enhanced assessment of post-discharge needs
- enhanced teaching and learning for patients by the acute-care team
- enhanced communication at discharge between the hospital and the provider assuming care for the patient
- timely follow-up after hospital discharge

In addition, hospitals will form transition teams who will develop processes to reduce hospital readmissions. Transition teams will be comprised of participating hospitals and representatives from other health care settings, as well as community groups, patients and caregivers. As the multi-year project moves forward, other hospitals and other health care systems will be invited to participate.

The MHA Keystone Center for Patient Safety & Quality, based in Lansing, Michigan, brings patient safety experts and hospitals together to work in collaborative programs to improve patient safety and health care quality and to reduce medical errors. For more information, visit www.MHAKeystoneCenter.org. **MPRO**, based in Farmington Hills, Michigan, is a recognized independent leader in health care quality improvement, patient safety initiatives, clinical assessment and medical review. MPRO’s mission is improving quality, safety and efficiency of health care across the continuum. For more information, visit www.mpro.org.