Transforming the Experience of People with Advanced Illness at a Health System

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Background

Aging and Advanced Illness

- North Shore – LIJ Health System initiated a Quality Improvement Initiative to address improving the care of individuals with Advanced Illness on August 2013 and rolled out to the teams on November 2013.
- This describes the efforts of the first year of this initiative through December 2014.

Aim

To improve processes of care and outcomes for patients with advanced illness.

- Identify patients who could benefit from advanced care
- Engage patients and their families in discussions about options for advanced care that meet their values, needs and circumstances
- Provide services that allow patients optimal quality of life while reducing unwanted and unneeded care
- Create a viable business models for participating service providers

Definition of Advanced Illness

Adults: Advanced Illness occurs when one or more conditions become serious enough that general health and functioning decline, and treatments begin to lose their impact.

Coalition to Transform Advanced Care

Peds: Advanced Illness occurs when one or more conditions become serious enough that general health and functioning decline, and **curative** treatments begin to lose their impact.

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Year One

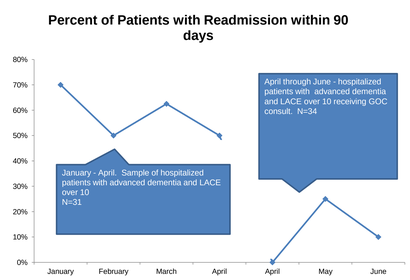
1) Strategic Plan

1. Complete a needs assessment
2. Create teams
3. Define "advanced illness"
4. Develop patient and family centered projects that improve and align care
5. Identify needs for team progress
   - Improvement advisor sessions
   - Team learning sessions
   - Ongoing conference calls
6. Face barriers and challenges
7. Provide resources
8. Collect data

2) Inter-professional Team Example – Dept of Medicine – Improving the Experience with Advanced Dementia

- Sponsor - Sandy Balwan, MD
- Day to day lead - Alex Rimar, MD
- Clinical champion - Salonie Pereira, MD (LIJ), Sumeet Kalra, MD (NSUH)
- Improvement Advisor -Mary Curtis, PhD
- Nursing Lead - Mary Curran, RN
- NP Representative - Lorraine Domaradzki (LIJ), Mary Lou Reidy (LIJ), Peggy McCormack (NSUH)
- Home Care Network - Lynda Cooper, CSW
- Hospice Care - Nan Toelstedt, CSW
- Physician - Liron Sinvani, MD
- Special Guest Advisors - Steve Walerstein, MD

Improving the Experience with Advanced Dementia



3) Metrics

- # Patients identified with Advanced Illness either through Advanced Illness Tool or Screening Tool
- # of patients who participated in GOC conversation within 72 hours of identification/# of patients identified
- # GOC conversation includes diagnosis, prognosis, values and wishes/# of conversations
- # of providers participating in conversation care of patients/# of conversations
- # of patients whose home caregivers were assessed for aftercare needs/# of patients identified
- # of patients whose plan of care includes palliative care/# pt identified
- # of patients whose GOC were communicated to the next level of care/# of patients identified
- # of patients with documented information for 24/7 services upon discharge/# of patients identified and discharged.

Results

- ✓ Eighteen Inter-professional teams were formed
- ✓Definition was created
- ✓Teams developed patient and family centered projects
- ✓One team dropped out
- ✓Teams requested need for training with goals of care conversations
  - ✓ GOC training program developed
- ✓MOLST form utilization was identified as a tool to help communicate outcomes of the conversations
  - ✓ Health system MOLST Task Force was formed
- ✓Data collection has initiated
- ✓Teams have requested information and knowledge on advanced disease states (focus of year two).

References:

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