

Hospital Organizational Commitment Agreement

No Place Like Home
C A M P A I G N
... reducing hospital readmissions because
there really is no place like home.



Please complete this form online at www.hsag.com/noplacelikehomeaz

Your pledge commits your organization to the following actions:

1. Aim to reduce your overall readmissions by 10 percent over the next four years (January 1, 2015–December 31, 2018).²
2. Designate two staff members: (1) a team leader and (2) a pharmacy or physician champion for your facility.
3. Conduct a medication management assessment (MMA).
4. Develop an action plan that addresses the items identified in the MMA.
5. Collect and analyze data to monitor the effectiveness of the action plan through monthly process measure and quarterly admission/readmission data.
6. Participate in scheduled collaborative sessions such as in-person education or webinars/teleconferences, and opportunities to share experiences, strategies, and lessons learned.
7. Create a storyboard of your organization's use of the Plan-Do-Study-Act (PSDA) approach in the medication management process that will be shared at the 2017 mid-campaign conference and updated for the final campaign conference.
8. Agree to publicly disclose Campaign participation (organization name displayed in documents and on the Campaign website).

Majority of medication errors occur during care transitions.¹

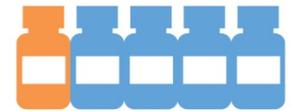


Poor communication at transitions causes:



Approximately $\frac{1}{2}$ of hospital-related medication errors

20% of adverse drug events



This often results in readmission and/or emergency department visit.



I pledge to engage in the actions listed above and commit my organization to participate in the **No Place Like Home, Phase 2 Campaign.**

CEO (or designee) Name: _____ Organization: _____

CEO (or designee) Signature or Validation: _____ Date: _____

Please provide contact information for the persons who will be responsible for the Campaign at your organization:

Team Leader Name: _____ Title: _____

Email: _____ Direct Telephone: _____

Pharmacy or Physician Champion Name: _____ Title: _____

Email: _____ Direct Telephone: _____

Fax back to: 602.801.6051, Attention Cheryl Angotti

For more information, contact: Barb Averyt at baveryt@hsag.com or Ettie Lande at elande@hsag.com

¹Understanding and Improving Medication Reconciliation Between Hospitals and Nursing Homes—Patient Safety Risk and Cost in Care Transitions—Stratis Health
<http://www.stratishealth.org/documents/Stratis-Health-medication-reconciliation-white-paper-2014.pdf>.

²Baseline results from 2013 Medicare Part A Fee-For-Service claims data will be used to derive relative improvement rates throughout the campaign



The Campaign Pledge for Hospitals

The <i>No Place Like Home</i> Campaign Will:	Participating Organizations Will:
<ol style="list-style-type: none"> Develop and facilitate opportunities for participating organizations to come together for collaborative learning, planning, and networking, and provide resources via the <i>No Place Like Home</i> website. Provide offerings that feature local and national organizations and profile best practices being used, innovative experiences, and experts in the field to reduce readmissions. Provide technical assistance to each organization as it conducts its medication management assessment (MMA) and develops an action plan based on the root-cause analysis (RCA) results. Designate a <i>No Place Like Home</i> resource consultant to serve as the lead contact person for each participating organization and provide ready access to program resources. Maintain a strong commitment to leverage opportunities to advance the project through partner and stakeholder support and promote the accomplishments, lessons learned, and successes of participant communities. Conduct assessments with each organization's team at the beginning of the project, review results of measures, and provide an evaluation at the end of the project, upon request. Develop an online library of resources and toolkit materials to assist organizations with readmission RCA, as well as provide evidence-based/best practice interventional materials, measurement tools, and communication materials for internal and public promotions, just to name a few. Provide ongoing updates to participating communities as new resources and tools become available. 	<ol style="list-style-type: none"> Obtain commitment from the CEO to endorse participation and allocate resources for Campaign involvement to reduce overall readmissions by 10 percent over the next four years (January 1, 2015–December 31, 2018).* Designate two staff members: (1) a team leader, and (2) a pharmacy or physician champion for your facility. Conduct a medication management assessment (MMA). Develop an action plan that addresses the items identified in the MMA. Collect and analyze data to monitor intervention effectiveness through: <ol style="list-style-type: none"> Monthly process measures. Quarterly admission/readmission data. Participate in Campaign activities, including: <ol style="list-style-type: none"> In-person education. Recorded or live webinar/teleconferences. Opportunities to share experiences and strategies with other community teams throughout the duration of the Campaign. Create a storyboard of your organization's use of Plan-Do-Study-Act (PSDA) approach in the medication management process that will be shared at the 2017 mid-campaign conference and updated for the final campaign conference. Agree to publicly disclose Campaign participation (organization name displayed in documents and on the Campaign website). <p style="text-align: center;">Visit www.hsag.com/noplacelikehomeaz for more information.</p>

* As analyzed by Health Services Advisory Group (HSAG). Baseline results from 2013 Medicare Part A Fee-For-Service claims data will be used to derive relative improvement rates throughout the campaign.

