

CJR Lessons Learned – *Hackensack Meridian Health*

April 30, 2018 – NJHA Conference

Jorge Corzo
Pam Eluri
Garner Smythe
Randy Thomas

Approach

- Introduction
- Key Success Factor
- Preoperative
- Postoperative
- Summary

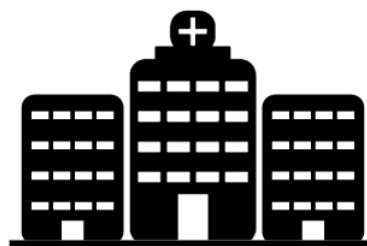


Who We Are – Then and now

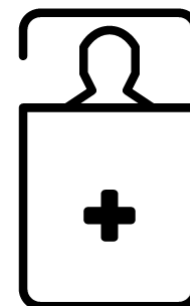
April, 2016



Hackensack
Meridian *Health*



**12 Acute
Hospitals**



**4.5K
Beds**



**160
Locations**

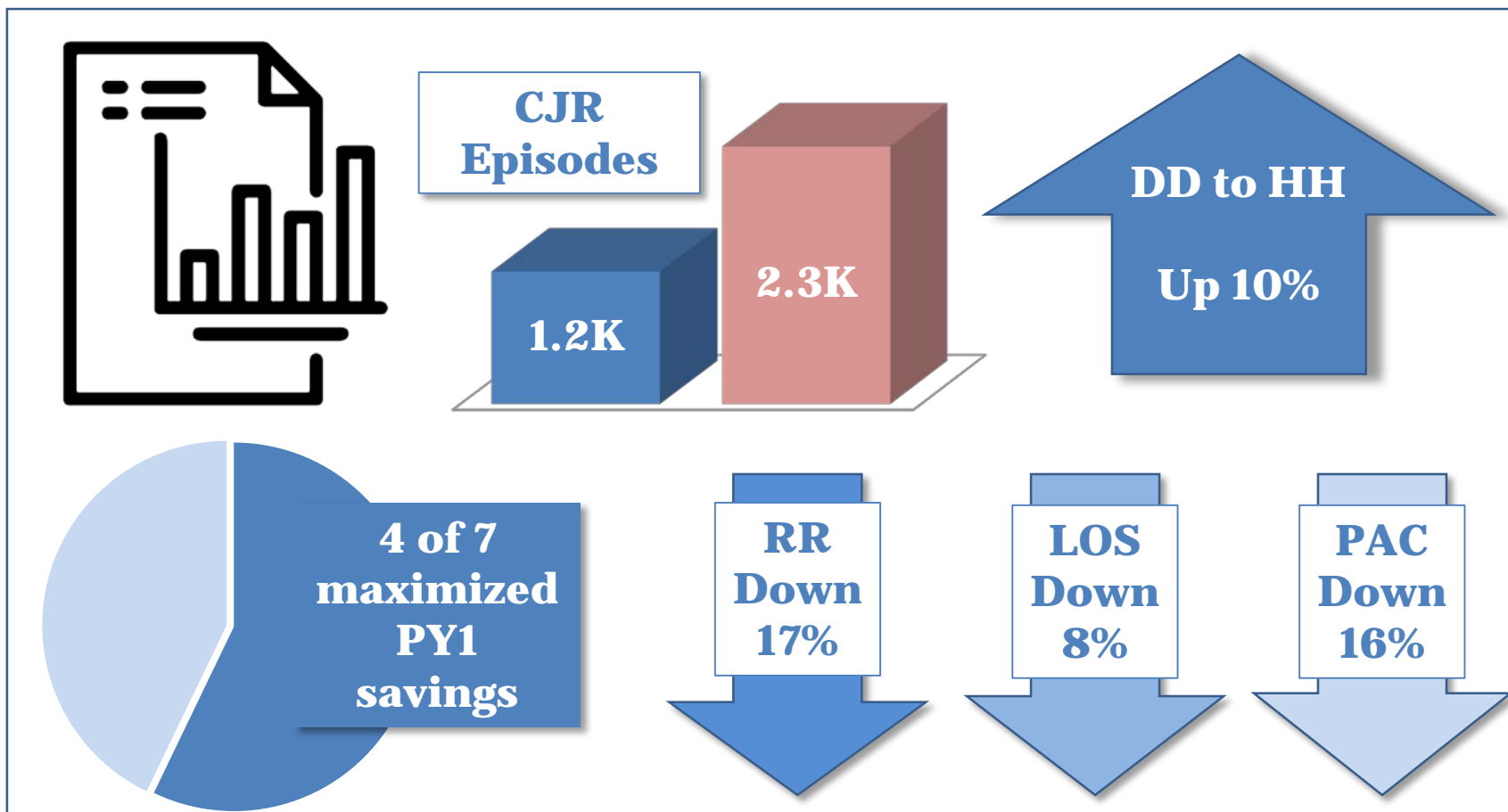


33K Employees



6.5K Physicians

HMH – CJR Update



Considerations and Key to Success

Consideration 1

Externally Mandated



Consideration 2

Diverse Set of Stakeholders



Key to Success

Relationships



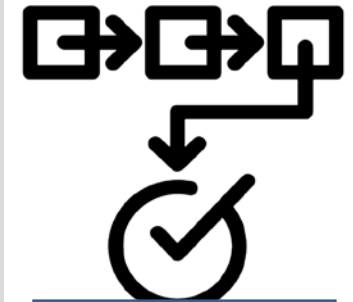
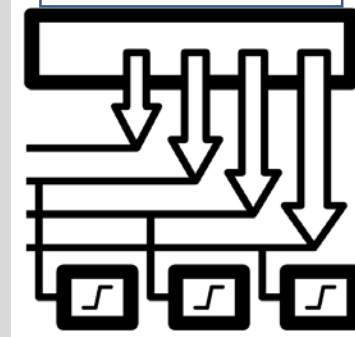
Physician Relationships

The Process



Evaluate

Develop



Implement



Patient Relationships





Care Continuum

Perioperative Timeframe

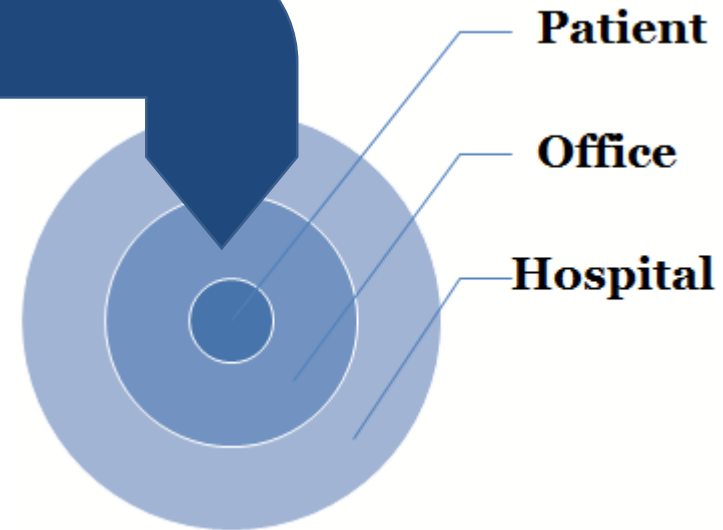


Hackensack
Meridian *Health*

Culture Change

The WELL Patient

- Identify existing culture
- Embrace the change
- Educate



Positive Messaging




Leadsuccess is where preparation and opportunity meet.

- Set expectations / be the resource
- Meet office manager & surgical scheduler
- Offer materials for program / minimize burden
- Be accessible and open to feedback

Office Involvement

Program starts here:

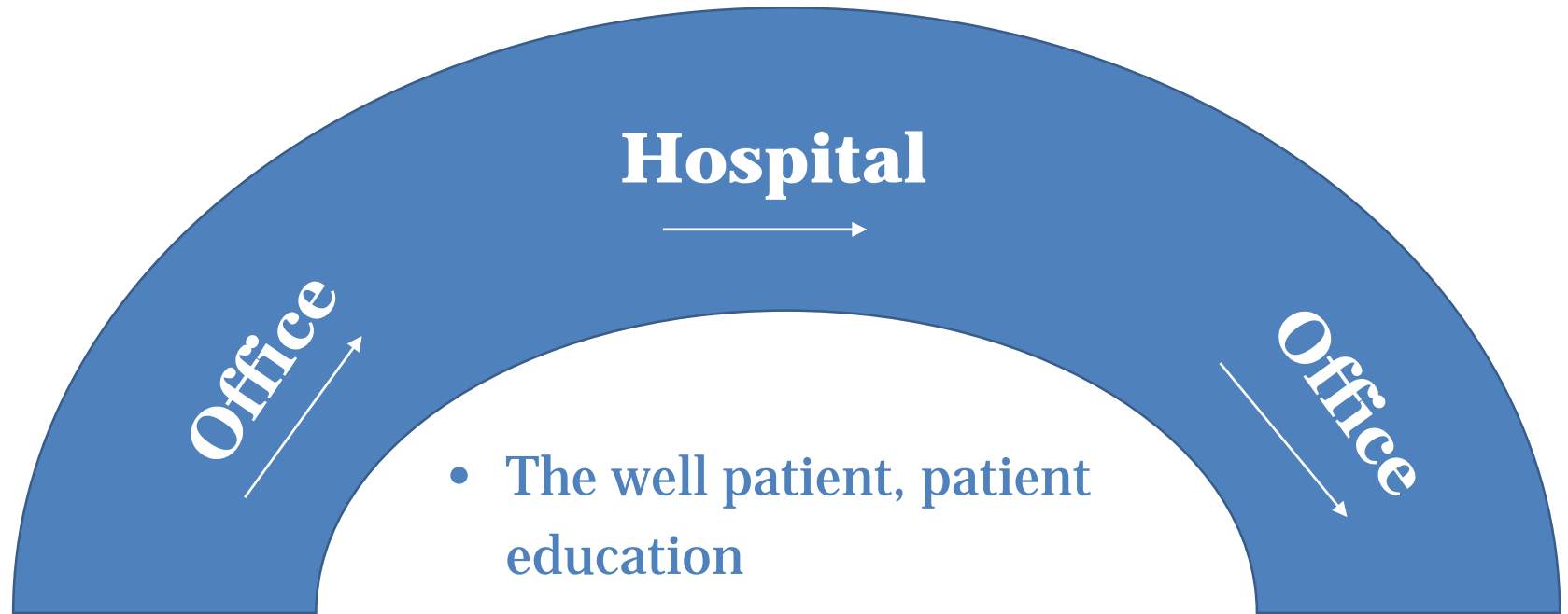
- Guidebook distribution
- Patient Packet 
- Education emphasis
- Office staff representative on hospital committee

Patient Packet

- Earlier introduction to hospital team
- Clear education information
- Discharge planning information
- Educational information on: smoking cessation, sleep apnea, nutrition



Full Arc of Care



- The well patient, patient education
- Standardization
- Shared decision making





Care Continuum

Postoperative Timeframe



Hackensack
Meridian *Health*

Physician and Office Staff



GOAL: *Linkage between anchor facility and the physician/office staff*



SUCCESS:

Developed working relationships through integration and collaboration



CHALLENGE:

Ongoing education and sustained commitment



Patient and Family



GOAL: *Engagement and active participation in the program*



SUCCESS:

Increased awareness of the program with improved outcomes



CHALLENGE:

Developing an understanding of optimal discharge disposition



Care Transition Teams



GOAL: *Foster communication amongst staff involved in care transitions*



SUCCESS:

Standardization of
protocols and
communications



CHALLENGE:

Collective
consciousness
regarding discharge
disposition



Post Acute Care Providers



GOAL: *Strengthen the relationship to facilitate continuum of care*



SUCCESS:

Improved coordination, transparency and open communication



CHALLENGE:

Variability across different providers; need for constant reinforcement



Summary

**Before
CJR**

CJR

...

