

A practical guide to

Reducing Readmission Rates

Identifying and preventing unplanned/emergency readmission

WEDNESDAY 20 OCTOBER 2010 76 PORTLAND PLACE, LONDON



Topics include:

- ▶ Introduction: reducing readmission rates: **new Government focus**
- ▶ Tackling the common causes of unplanned readmission
- ▶ Reducing the unplanned readmission rate: where to start
- ▶ Tools and techniques to analyse and reduce unplanned readmissions
- ▶ Unplanned readmission as a quality indicator
- ▶ Admission avoidance and addressing the decision to admit
- ▶ Reducing unplanned readmissions: identifying those at risk: a medical/community perspective and case study
- ▶ Reducing unplanned readmissions: a surgical perspective and case study
- ▶ Reducing unplanned readmissions: what is avoidable? a critical care perspective
- ▶ Understanding the impact of reduced length of stay and early discharge on readmission rates
- ▶ Working across boundaries to avoid unnecessary readmission

Chair and keynote speakers:

- ▶ **Dr Nick Bishop**
Senior Medical Advisor
The Care Quality Commission
- ▶ **Dr David Colin-Thome OBE**
National Director for Primary Care
Department of Health
- ▶ **Dr Nawar Bakerly**
Consultant Respiratory Physician and
Clinical Lead for Reducing Readmissions
Salford Royal NHS Foundation Trust

An IHM recognised conference



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by the Royal College of
Physicians, London

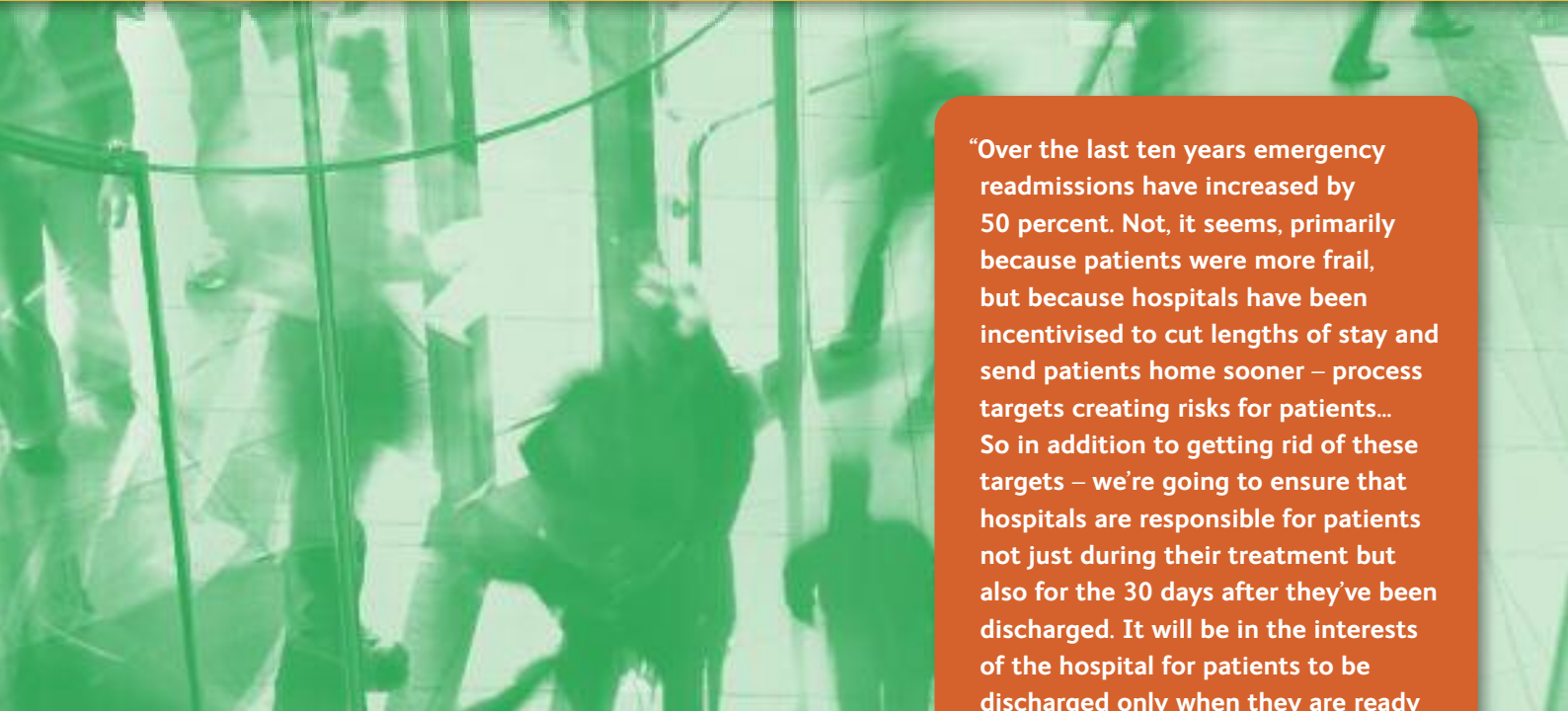
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“Over the last ten years emergency readmissions have increased by 50 percent. Not, it seems, primarily because patients were more frail, but because hospitals have been incentivised to cut lengths of stay and send patients home sooner – process targets creating risks for patients... So in addition to getting rid of these targets – we’re going to ensure that hospitals are responsible for patients not just during their treatment but also for the 30 days after they’ve been discharged. It will be in the interests of the hospital for patients to be discharged only when they are ready and safe.” ANDREW LANSLEY, JUNE 2010

Following the recent announcement of the Government plans to introduce penalties to curb the soaring rate of readmissions, this one day conference provides a unique learning opportunity and important updates following Andrew Lansley’s comments about Readmission Rates.

Dr Nick Bishop Senior Medical Advisor Care Quality Commission opens the conference by discussing why the Care Quality Commission view readmission as important. You will hear from a variety of speakers on topics including tackling the common causes of unplanned readmission, reducing the unplanned readmission rate: where to start, Tool and techniques to analyse and reduce unplanned readmissions, unplanned readmission as a quality indicator: understanding and investigating trends in readmission rates, reducing avoidance and addressing the decision to admit, reducing unplanned readmissions: identifying those at risk, reducing unplanned readmissions: a surgical perspective and case study, reducing unplanned readmissions: what is avoidable, understanding the impact of reduced length of stay and early discharge on readmission rates, working across boundaries to avoid unnecessary readmission.

“A significant proportion of patients (3% – 11%) return to hospital within 28 days because complications have arisen as a consequence of their health at the time of admission, their operation, they have acquired an infection during their hospital stay, they have dislocated their joint, the joint has become infected, or rehabilitation has not progressed as planned. There is evidence that patients that are readmitted have a longer length of stay than for first admissions and that providers with lower than average lengths of stay for first admission have higher readmission rates. Reducing readmission rates can reduce average length of stay, whereas reducing average length of stay without tackling readmission rates may have the medium term impact of increasing length of stay.” NHS INSTITUTE FOR INNOVATION AND IMPROVEMENT, REDUCE READMISSIONS.

With an increased pressure to discharge patients early to reduce their length of stay, trusts need to be aware of the impact this has on readmissions and the penalties being imposed by the Government. The conference concludes with a presentation on working across boundaries to avoid unnecessary readmission.

10.00 Chairman's welcome and introduction: reducing readmission rates

Dr Nick Bishop

Senior Medical Advisor
The Care Quality Commission

Health Secretary Andrew Lansley has recently announced financial penalties for readmissions

- ▶ why the Care Quality Commission view readmission as important
- ▶ unplanned readmission as a quality and performance indicator
- ▶ identifying and analysing unplanned readmission
- ▶ the cost of unplanned readmissions to the NHS
- ▶ financial penalties for readmission: how this will work in practice
- ▶ comparative rates and benchmarking across organisations

10.40 Tackling the common causes of unplanned readmission

Dr David Colin-Thome OBE

National Director for Primary Care
Department of Health

- ▶ what are the common causes of unplanned readmission
- ▶ addressing common causes: where to prioritise
- ▶ how funding changes will effect the care pathway
- ▶ case studies and examples in practice

11.05 Reducing the unplanned readmission rate: where to start

Dr Nawar Bakerly

Consultant Respiratory Physician and Clinical Lead for Chronic Respiratory Disease Management
Salford Royal NHS Foundation Trust and NHS Salford

Salford Royal NHS Foundation Trust have set a target of a 30% reduction in readmissions by 2011

- ▶ monitoring and reducing readmissions: where to start
- ▶ understanding what will drive change
- ▶ reducing readmission as part of chronic disease management

11.30 Questions and answers, followed by coffee and exhibition at 11.40

11.50 Understanding the impact of reduced length of stay and early discharge on readmission rates

Dr William Fitzpatrick

Physician Consultant, Elderly Care
Darent Valley Hospital, Dartford and Gravesham NHS Trust

- ▶ understanding the impact of reducing length of stay on unplanned readmissions
- ▶ managing the discharge of patients with complex needs to avoid unplanned readmission
- ▶ clinical systems and decision making: our experience

12.20 Unplanned Readmission as a quality indicator: understanding and investigating trends in readmission rates

Dr Mike Browne

Medical Director
Walsall Hospitals NHS Trust

- ▶ using unplanned readmissions as a quality indicator
- ▶ understanding changes and trends in readmission rates
- ▶ investigating the causes of changes to readmission rates

12.50 Questions and answers, followed by lunch and exhibition at 13.05

FOCUS: REDUCING UNPLANNED READMISSIONS: CASE STUDIES IN PRACTICE

14.00 Tools and techniques to analyse and reduce unplanned readmissions

Catherine Riley

Associate
NHS Institute for Innovation and Improvement

- ▶ using service improvement tools effectively ensure any improvement quality and productivity does not adversely affect unplanned readmission rates
- ▶ the range of service improvement tools available
- ▶ how the NHS Institute Better Care Better Value Indicators can help
- ▶ tools for analysis of unplanned readmission rates

FOCUS: REDUCING UNPLANNED READMISSIONS: CASE STUDIES IN PRACTICE

14.30 Reducing unplanned readmissions: identifying those at risk

A medical/community perspective and case study

Hilary Kemp

Advanced Nurse Practitioner/Professional Lead
NHS South Birmingham PCT

- ▶ reducing readmission: a community approach
- ▶ supporting faster discharge without increasing readmission rates
- ▶ redesigning clinical roles and care closer to home pathways to prevent readmission

15.00 Reducing unplanned readmissions: a surgical perspective

Speaker to be announced

- ▶ identifying patterns and causes of unplanned surgical readmission rates
- ▶ is it possible to predict those at risk of readmission in a surgical setting?
- ▶ our experience in The Whittington

15.30 Questions and answers, followed by tea and exhibition at 15.40

16.00 Reducing unplanned readmissions: what is avoidable? A critical care perspective

Ann McGinley

Consultant Nurse, Critical Care Outreach Team
Barts and The London NHS Trust

- ▶ identifying those readmissions that were potentially avoidable
- ▶ understanding the predisposing factors that led to readmission and identifying where change is possible

16.30 Admission avoidance and addressing the decision to admit

Representative

NHS Improvement

- ▶ redesigning the emergency pathway: working to ensure effective referral and emergency patients are assessed before a decision to admit
- ▶ admission avoidance and developing hospital at home
- ▶ working with partners to ensure emergency admission is the exception and not the norm
- ▶ the impact on readmission rates and reduced hospital admissions

17.00 Questions and answers, followed by close 17.10

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Conference Registration



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Venue

76 Portland Place, London, W1B 1NT. A map of the venue will be sent with confirmation of your booking.

Date

Wednesday 20 October 2010.

Conference fee

- £365 + VAT (£428.88) for NHS, social care, private healthcare organisations and universities.
 £300 + VAT (£352.50) for voluntary sector/charities.
 £495 + VAT (£581.63) for commercial organisations.
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The fee includes lunch, refreshments and a copy of the conference handbook. VAT at 17.5%.

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Credits

This conference is recognised by the IHM, CPD Approved by the Royal College of Physicians, London and Approved by the Association of Surgeons of Great Britain and Ireland.

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