

LIJ Forest Hills Co-CEO Care Model

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DESCRIPTION & IMPLICATIONS

Long Island Jewish Forest Hills (LIJFH) is a 312-bed community hospital in Queens, New York. Each floor is overseen by a Nurse Manager and a Provider (physician, nurse practitioner, or physician assistant). An innovative Care Model was created that optimized and strengthened the Nurse Manager- Provider relationship. To begin, the Chief Nursing Officer and Medical Director engaged nurse leaders and providers in discussions to address communication barriers amongst the care team, as well as opportunities to enhance a patient's plan of care as they navigated through the healthcare continuum. To this end, LIJFH developed a care model that partnered a provider and a nurse leader on each unit and empowered them to oversee the patient's plan of care throughout their hospital course. The Co-CEO's had oversight of an interdisciplinary team and helped facilitate the patient's return to the community. Outcomes to date support this model of co-leading nursing units. It facilitates communication among the care team, and this, in turn, influences quality outcomes, the patient experience, and financial outcomes.

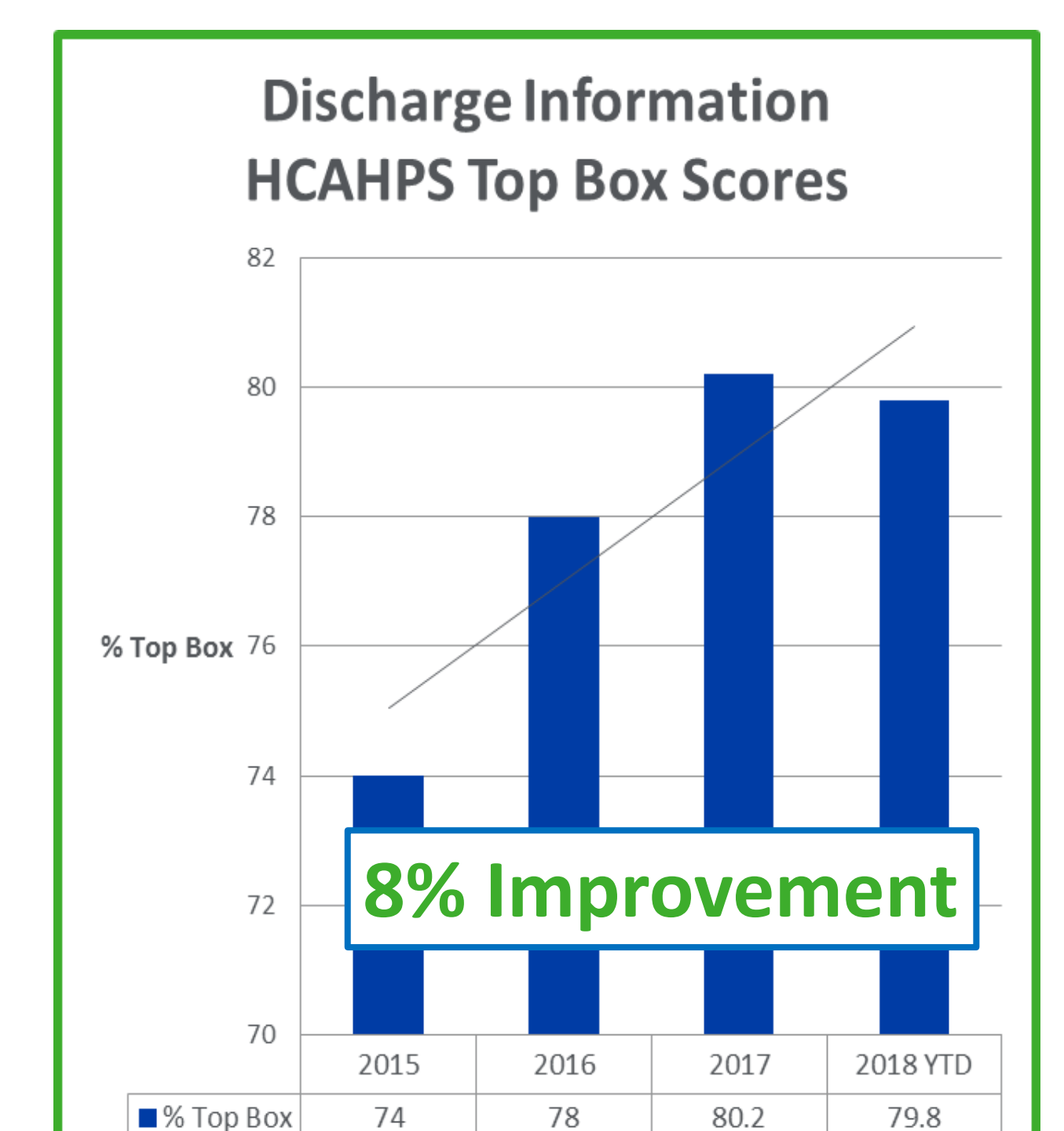
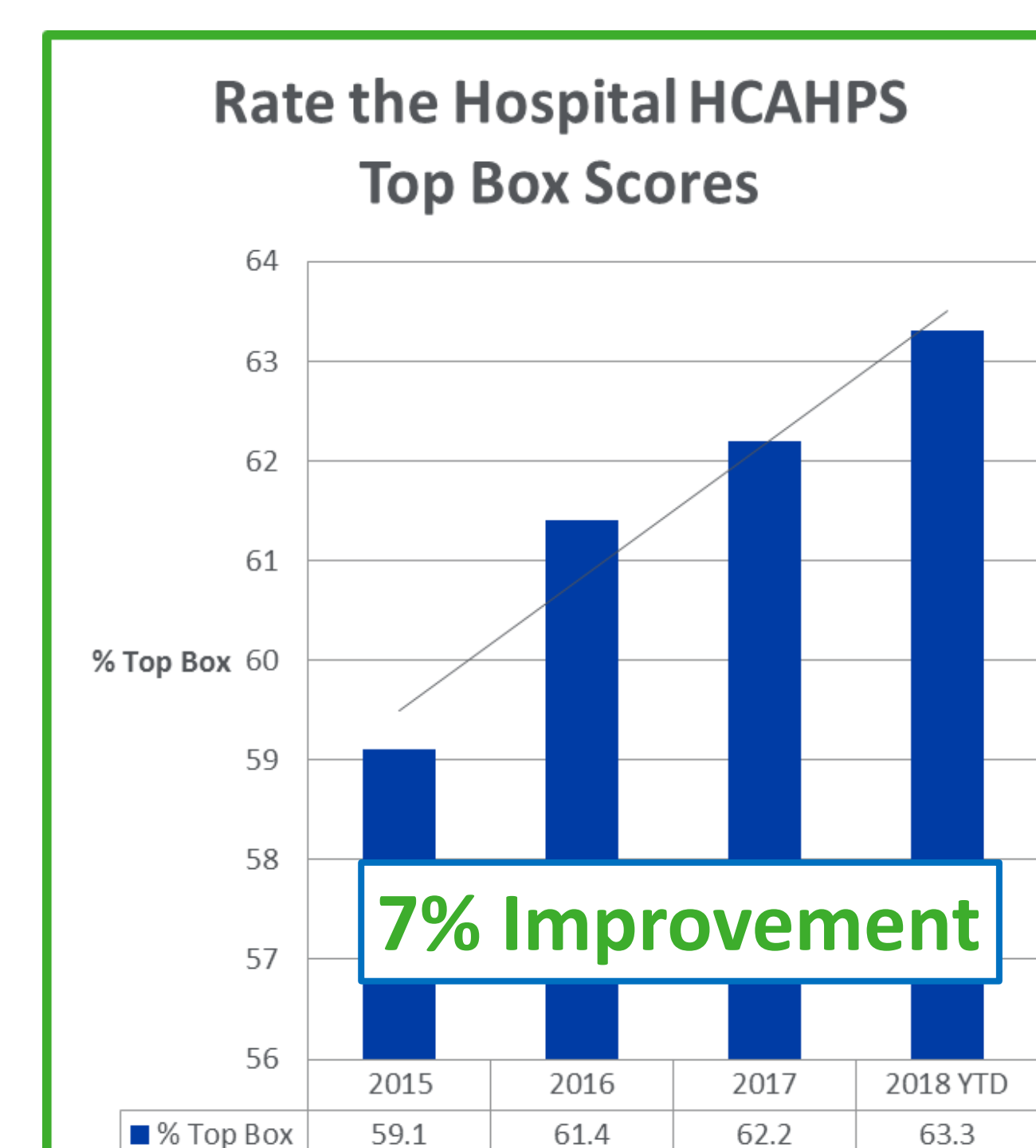
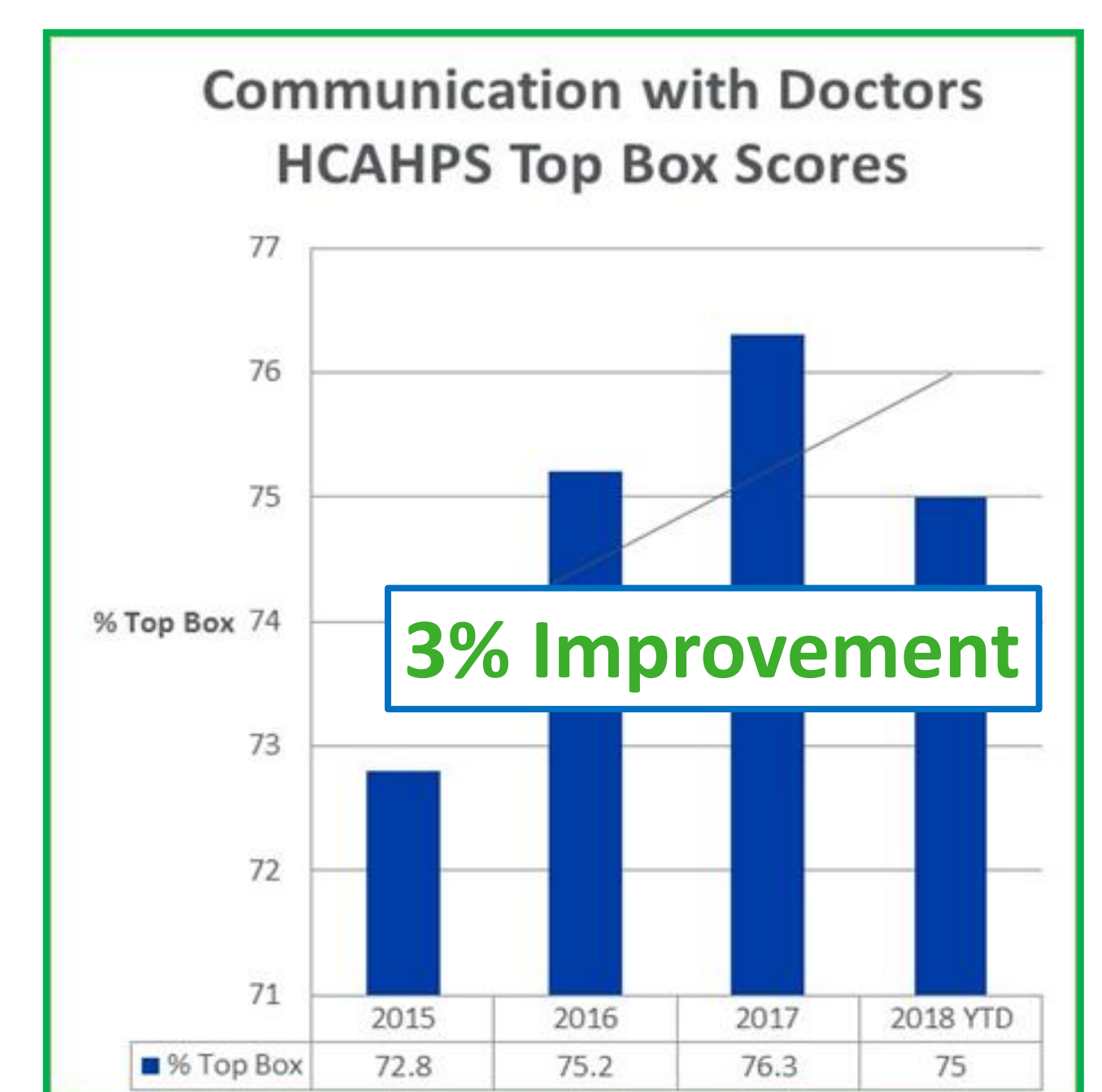
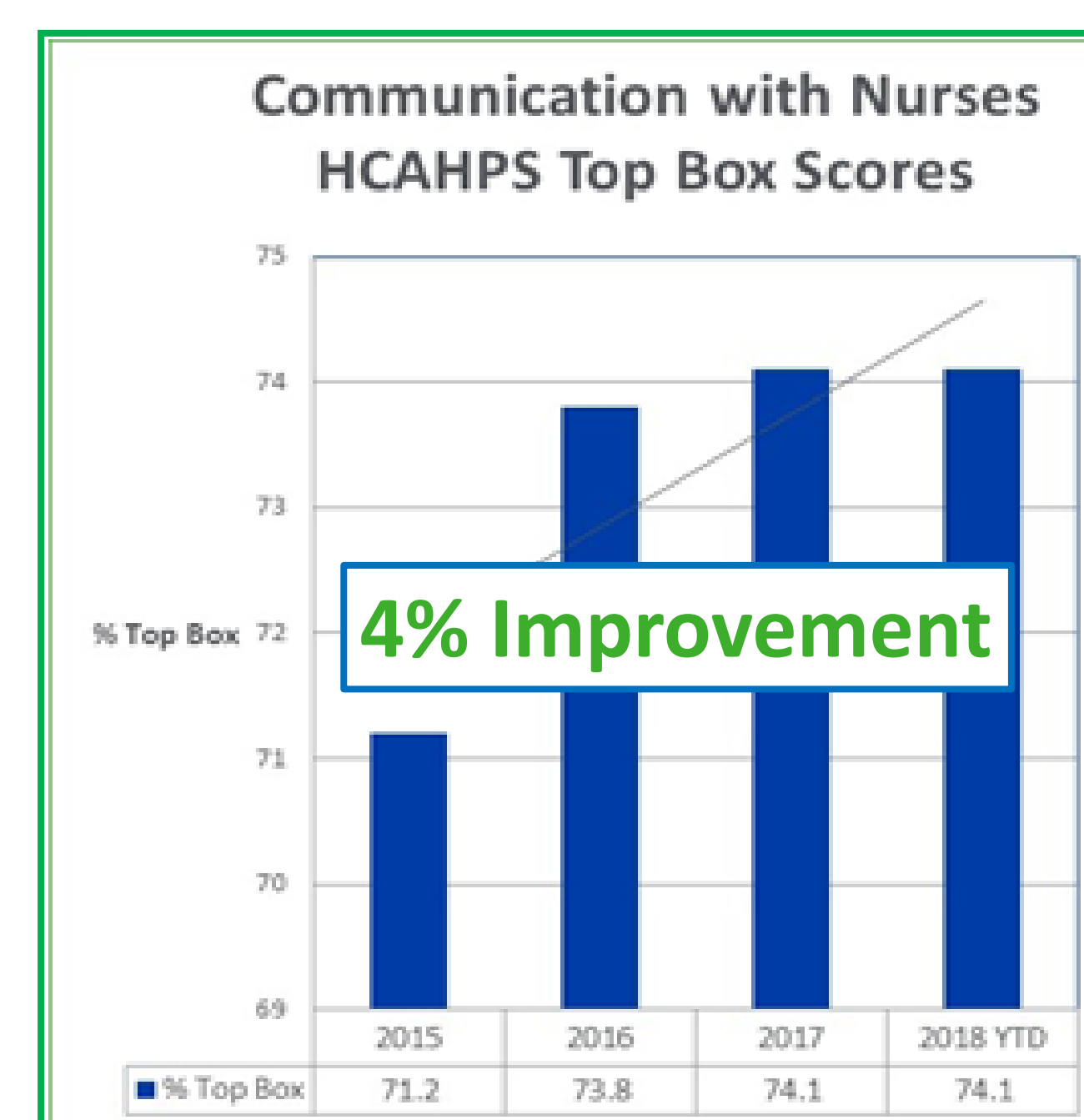
AIM

Develop a Care Model that strengthens the Provider-Nurse Manager relationship in order to enhance communication among the team and influence patient and organizational outcomes.

INTERDISCIPLINARY TEAM

The team was co-led by the Chief Nursing Officer and Medical Director and includes: Nurse Managers, Hospitalists, Voluntary Physicians, Residents, Nurse Practitioners, Physician Assistants, Case Managers, Social Workers, and Nurses

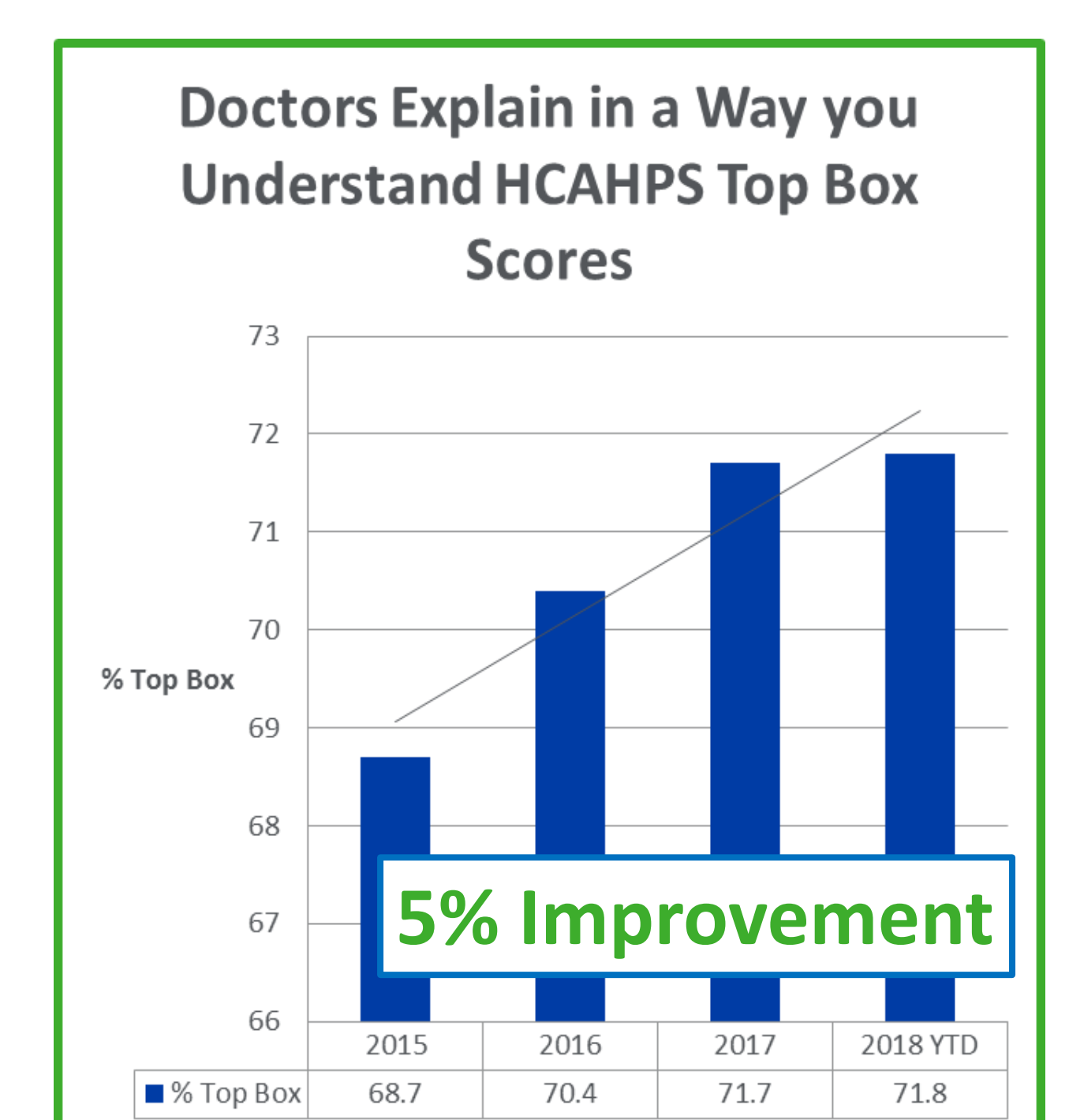
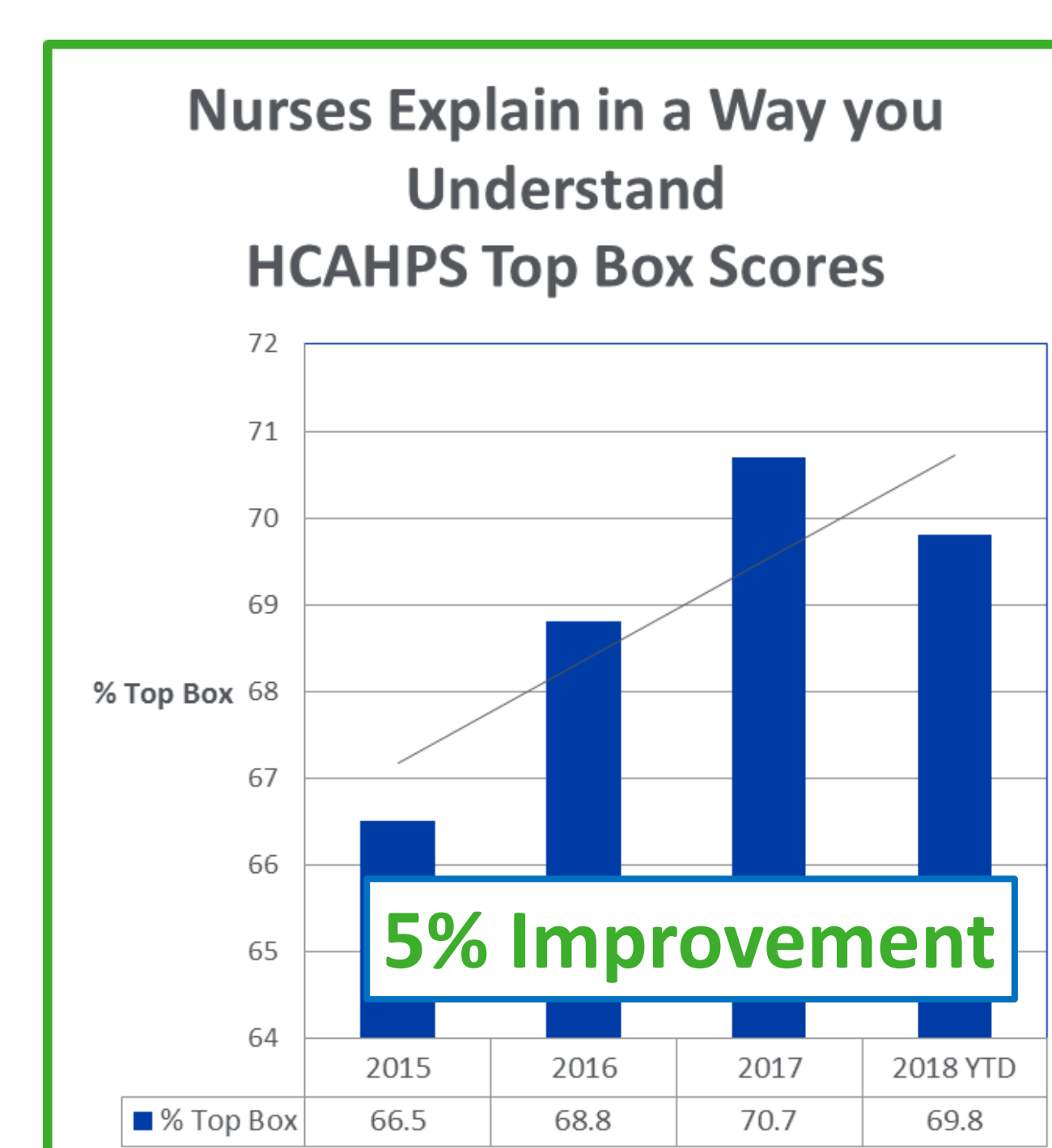
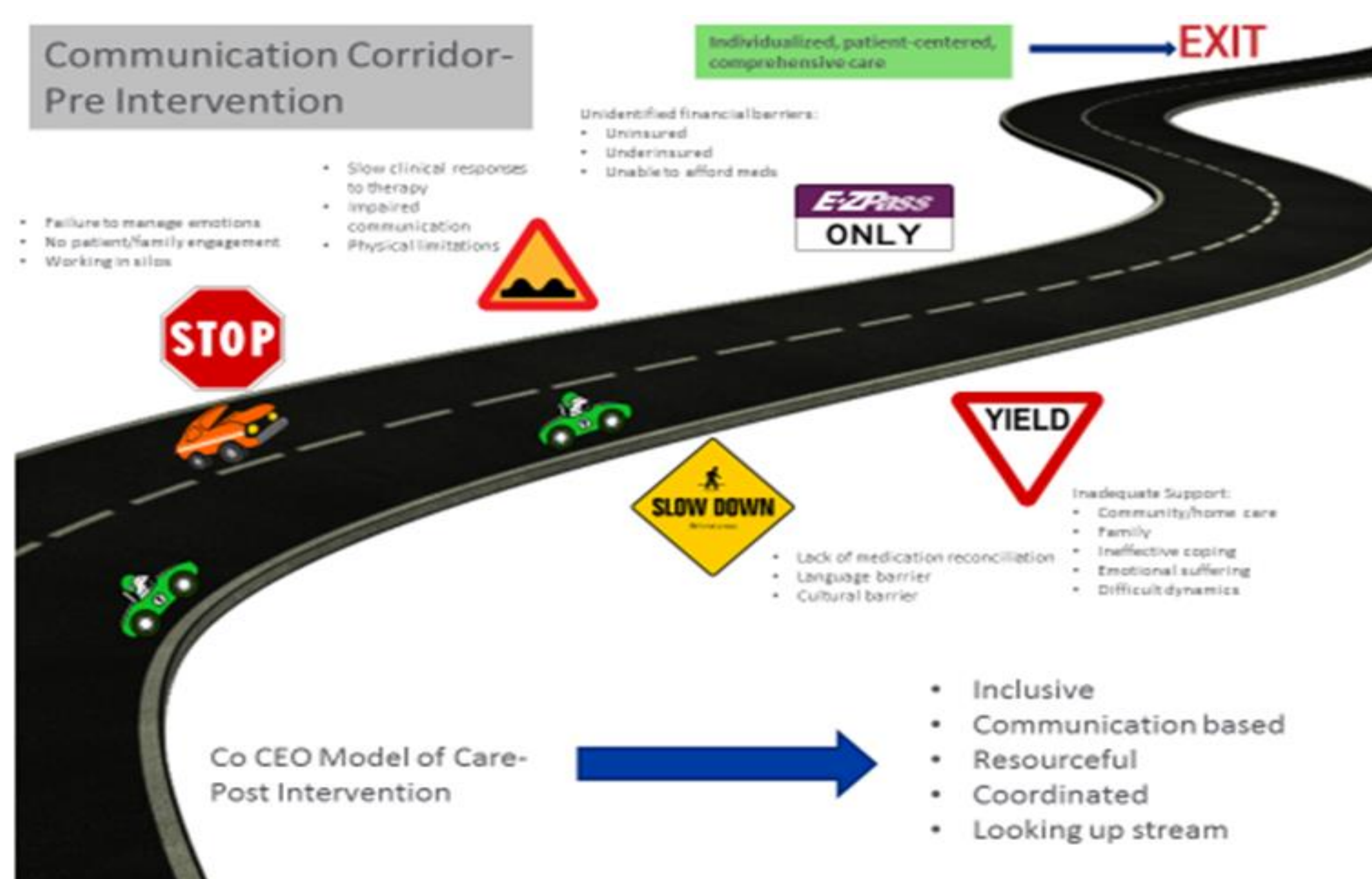
PATIENT EXPERIENCE OUTCOMES



EVOLUTION OF THE CARE MODEL

- | | |
|--|----------------------------|
| Formation of Co-CEO's | Focus on Population Health |
| • Restructuring Interdisciplinary Rounds | • Heart Failure |
| • IDR Rounding Tool | • Pneumonia |
| • Complex Care Committee | • COPD |
| • Bed Board Modifications | • Transitions to Community |
| | • House Calls |
| | • Transitional Home Visits |

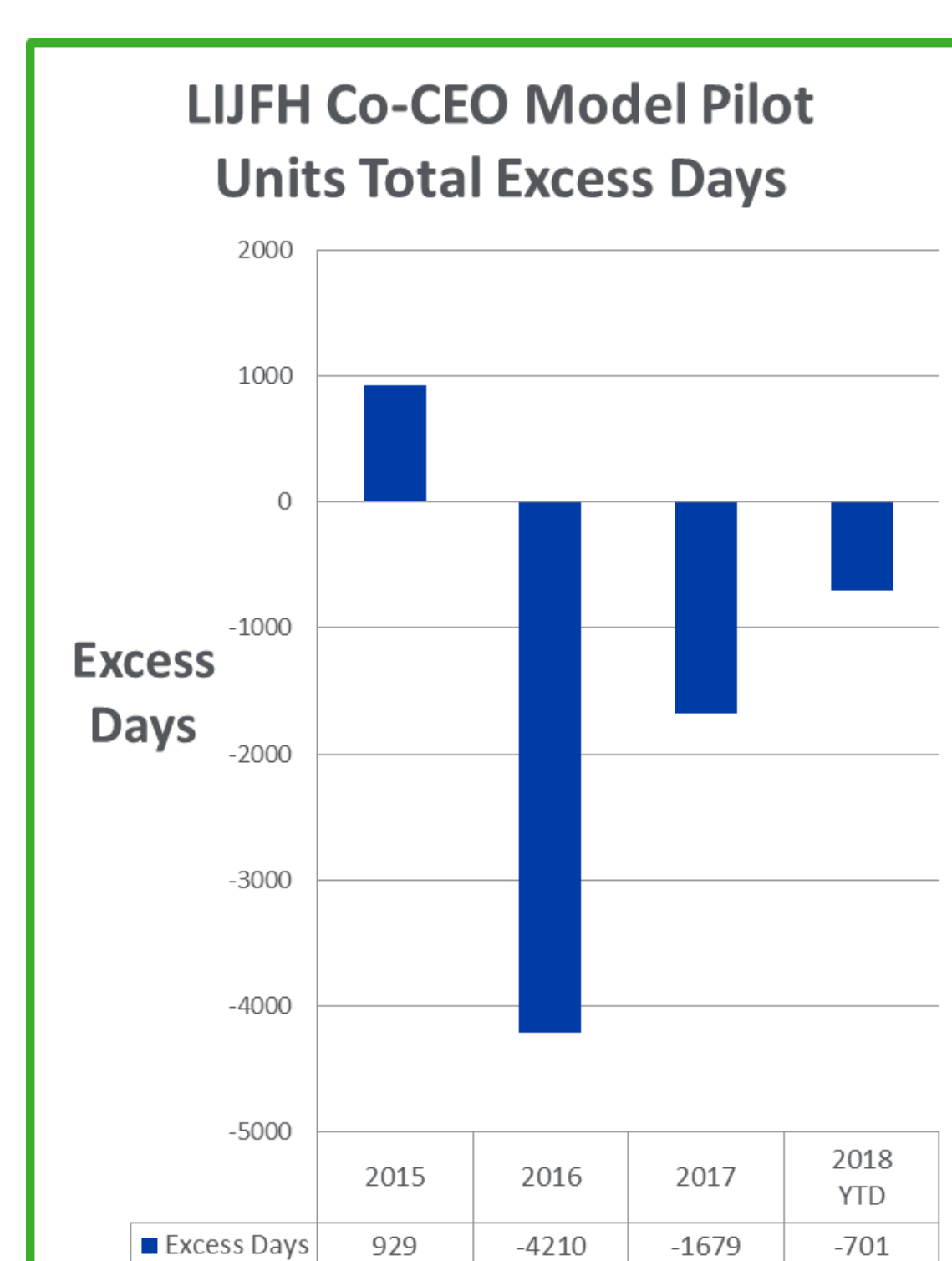
COMMUNICATION CORRIDOR



FINANCIAL OUTCOMES

- Total Excess Day reduction**
- Baseline Unfavorable Days 929 in 2015
 - Favorable 4210 Days in 2016
 - Favorable 1679 Days in 2017
 - Favorable 701 Days in July 2018 YTD

- Excess Days = Each excess day reduction yields \$300 in Cost Savings
- 4210 Excess Days = \$1,263,000 2016
- 1679 Excess Days = \$503,700 2017
- 701 Excess Days = \$210,300 YTD 2018



QUALITY OUTCOMES

HAPI: 70% Reduction; Falls: 17% Reduction; Falls with Injury: 62% Reduction

