

MULTIDISCIPLINARY CARE PLANS: ROAD MAP TO IMPROVING CARE

Sarah A. Cloud, MSW, LICSW, Director of Social Work

Beth Israel Deaconess Hospital-Plymouth

Introduction/Problem

Multidisciplinary care plans provide a systematic approach to meeting an individual patient's complex needs by:

- Creating institutional memory across numerous providers
- Summarizing recurrent presentations and related testing
- o Identifying existing clinical, behavioral, and social services
- o Recommending strategies to promote safe, high-quality care

Aim/Goal

- o Provide a snap shot of the patient's complexity
- o Provide guidance on next steps to care for the patient
- o Reduce unnecessary hospital admissions
- Reduce readmissions and ED visits

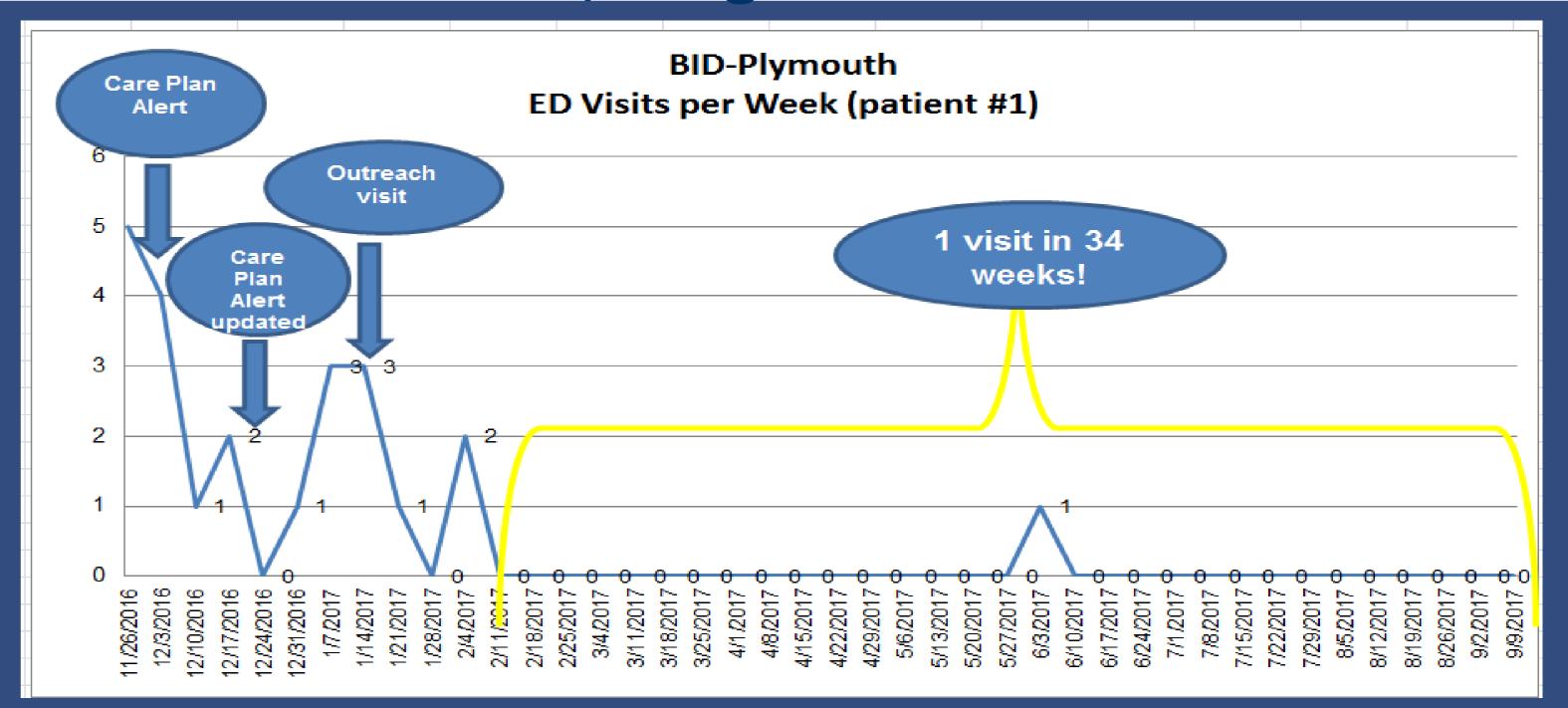
The Team

- o Sarah Cloud, MSW, LICSW, Director of Social Work
- o Pedro Bonilla, MD, Medical Director Outpatient & Emergency Psychiatry
- o Alejandro Mendoza, MD, Chairman, Department of Psychiatry
- o Amanda Ortengren, DO, Hospitalist
- o Kim Scheub, MD, Emergency Medicine
- o Elizabeth Charron, RN, BSN, Clinical Nurse Manager
- o Donna Sawyer, APRNBC, Emergency Department
- o Colleen Slowey-Morelli, MSW, LICSW, Emergency Department
- o Jennifer Meech, RN BSN, ACM, ED Case Management
- o Jessica Jordan, MSW, LICSW, Med Surge
- o Brendan Davidson, BA, Aftercare Specialist

The Interventions

- Patients are nominated by care team members based on complexity or identified based on utilization pattern.
- Cases are then determined to be medical or social services based on primary driver of utilization.
- Care Plan development is assigned to a primary author based on type of plan and familiarity with the case.
- Input is sought from internal and external care team members, including the patient and family.
- Draft plan is presented to multidisciplinary team for review, recommendation and approval.
- Plan is updated based on feedback, entered into EMR and shared with patient and providers.
- o Plan is updated as new information becomes available.

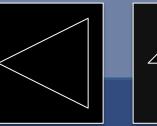
Results/Progress to Date



For more information, contact:

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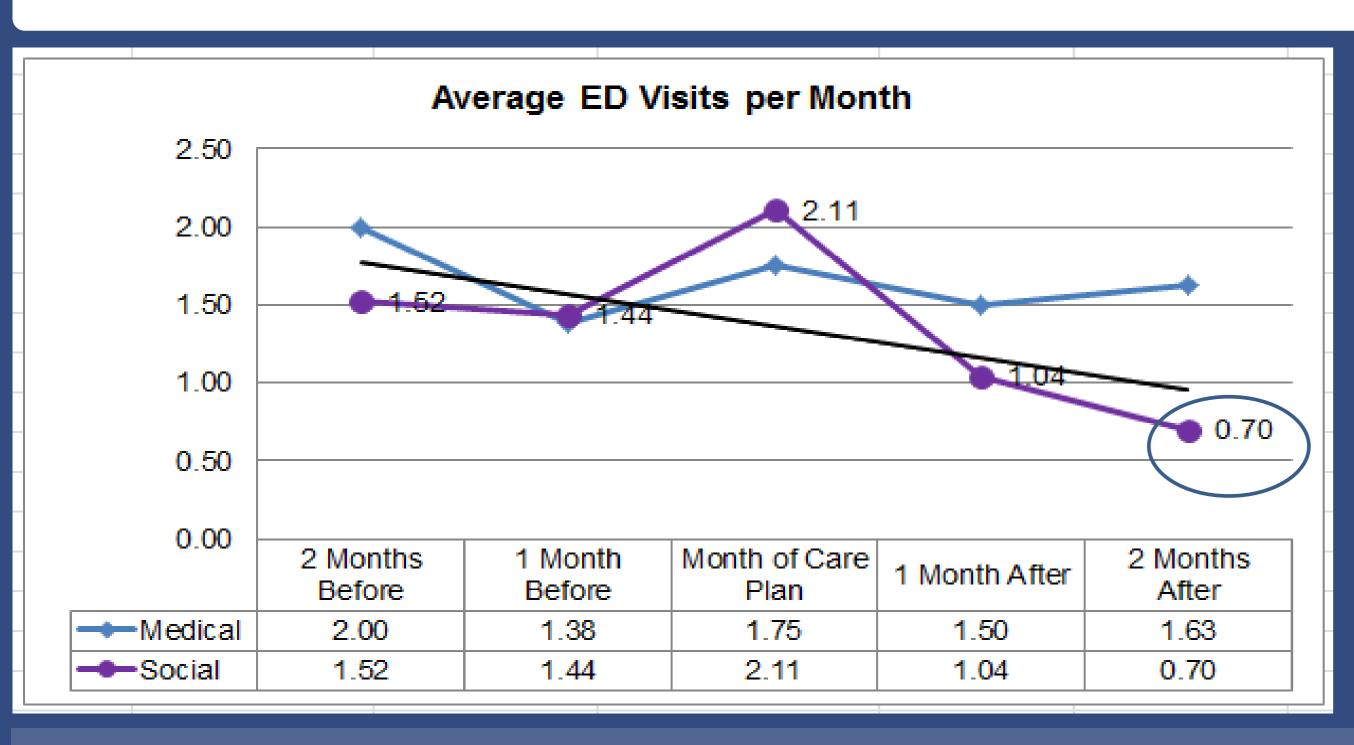


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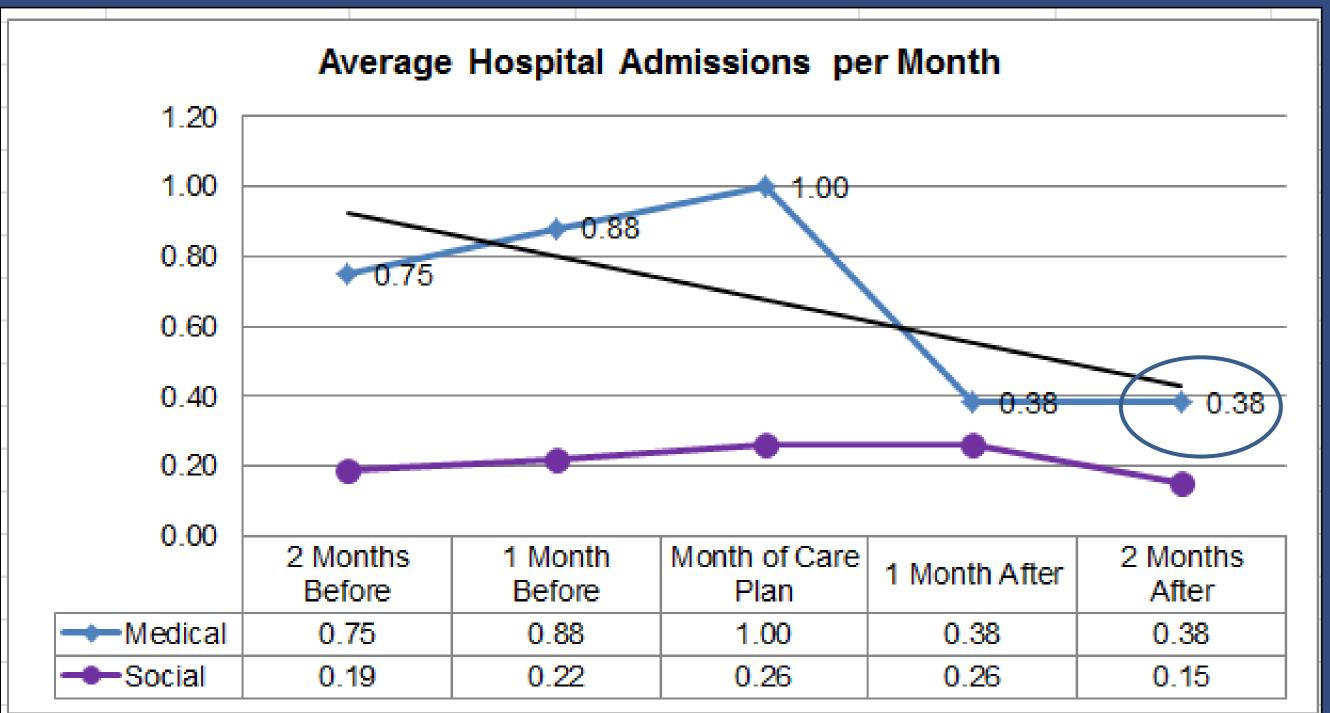
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More Results/Progress to Date



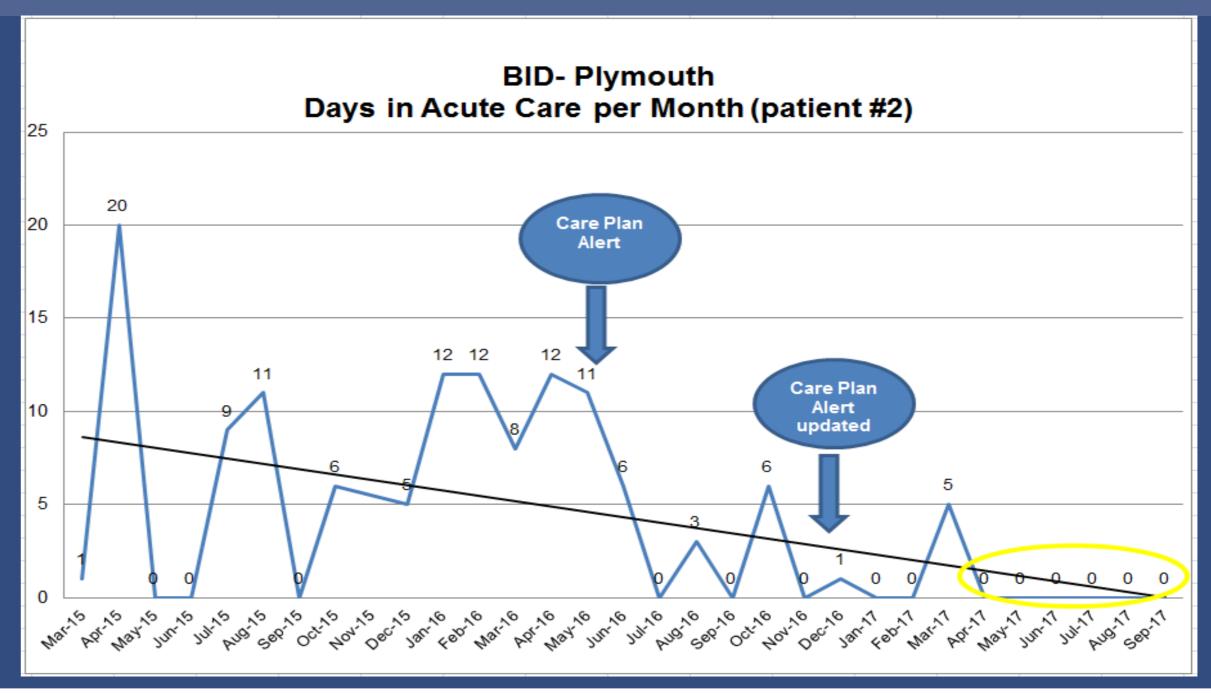
Social Services Driven Plan = **ED** visits

Effect of Care Plan Implementation on Emergency Department Visits



Medical Driven Plan = Admissions

Social Services Driven Plan



Lessons Learned

- o Engage the patient and capture who he/she is as a person, not just as a patient.
- o Identify the primary driver of utilization as the basis of the plan Medical or Social Services.
- o Identify strategies and interventions by discipline and role on the care team.
- Keep the plan short (1-2 pages).

Next Steps

- o Expand upon the practice of inviting patients in to develop the plan when not in crisis.
- Continued training across all members of the care team and community treatment providers.
- Enhance technology to support easy identification of cases with a care plan on record

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