Successful model for statewide collaborative initiative to reduce avoidable hospital readmissions

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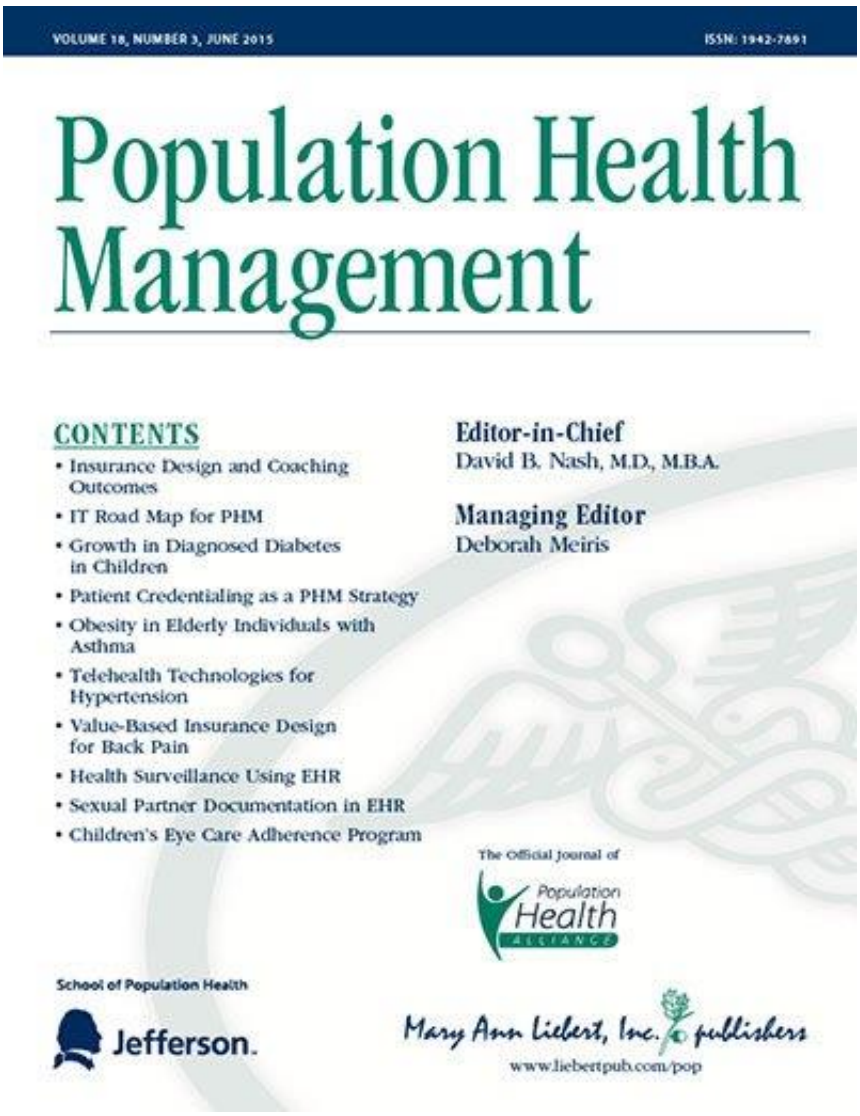

Credit: Mary Ann Liebert, Inc., publishers

A statewide effort led by key stakeholders in South Carolina successfully organized and implemented an evidence-based initiative aimed at improving the quality of healthcare transitions after hospital discharge to prevent avoidable readmissions. This promising model for engaging healthcare partners statewide and accelerating adoption of care transitions strategies is described in an article in *Population Health Management*.

R. Neal Axon MD, MSCR and coauthors from Charleston, SC-based Ralph H. Johnson VA Medical Center and The Medical University of South Carolina, and Columbia, SC-based BlueCross/Blue Shield of South Carolina, The South Carolina Hospital Association, Health Sciences South Carolina, and the University of South Carolina School of Medicine, report on the Preventing Avoidable Readmissions Together (PART) initiative—a statewide quality improvement learning collaborative. More than 90% of the state's acute care hospitals and hospital systems participated in PART events. The authors describe trends in readmission rates for all diagnoses and for specific diagnoses such as acute myocardial infarction, heart failure, and chronic obstructive pulmonary disease before and during the implementation of PART in the article "Evolution and Initial Experience of a Statewide Care Transitions Quality Improvement Collaborative: Preventing Avoidable Readmissions Together."

"Outstanding applied research like this study enables other integrated delivery systems to benchmark their performance," says Editor-in-Chief David B. Nash, MD, MBA, Dean and Dr. Raymond C. and Doris N. Grandon Professor, Jefferson School of Population Health, Philadelphia, PA.

More information: The article is available free on the *Population*

Health Management website until August 7, 2015.