Despite major strides in health care over the last several years, there are wide variations in quality among providers across the U.S. and persistent gaps between optimal care and current clinical practice.

1 in 5 patients require post-acute care after hospitalization, which often poses difficult and stressful decisions that can have long-lasting implications for their recovery.

Antibiotic-resistant bacteria lead to 23,000 deaths per year.

About 43 million family caregivers—unpaid relatives or friends—care for adults with terminal or chronic conditions.

Helping Patients with Difficult Decisions about Post-Acute Care

Being in the hospital can be stressful enough. But each year, approximately one in five hospital patients in the United States—including some 300,000 New Yorkers—require continued care following hospital stays for major surgery or serious illness.

And all too often, patients and their families do not have the critical information and support they need to carefully assess their options and make the best possible decisions.

UHF has conducted a yearlong inquiry, supported by the New York State Health Foundation, to better understand why hospital discharge planning can fall short despite well-intentioned efforts by hospital staff. The resulting, four-part Difficult Decisions series examines the challenges faced by patients and their families when arranging post-acute care.

The first report in the series takes a broad look at the many barriers, including regulation, that can stand in the way of informed decision-making about post-acute care. The second report focuses on the experiences of patients and family caregivers, and the third examines the perspectives of health care providers.

“We heard vivid stories from our participants about the limited choices they felt they had, the lack of information about the quality of care at different facilities, and what they perceived as the failure of hospital staff to prepare them for the experience of being in a nursing facility, not a hospital,” said Carol Levine, director of UHF’s family caregiving initiatives and co-author of the second Difficult Decisions report with UHF program manager Kristina Ramos-Callan.

The fourth installment will discuss best practices, innovations, and policy levers that could help support New Yorkers who need to make decisions about post-acute care.

“Access to meaningful information and decision support is missing, but it’s absolutely essential for achieving optimal outcomes,” said Lynn Rogut, director of quality measurement and care transformation for UHF’s Quality Institute and head of the Difficult Decisions project.
UHF tackled quality issues in a variety of ways, helping to make health care delivery in New York more patient-focused, outcome-driven, safe, and effective.

In 2018, we…

**Addressed antibiotic resistance**, a growing public health threat, collaborating with more than 30 hospital-owned outpatient practices to examine antibiotic prescribing practices and implement targeted interventions. UHF completed the second stage of its outpatient antibiotic stewardship initiative last year, published an article on stage I findings, and disseminated a toolkit on best practices.

**Built quality improvement teams** through our 15-month Clinical Quality Fellowship Program, co-led with Greater New York Hospital Association, which has trained more than 200 physicians and nurses in over 50 hospitals to be quality improvement leaders. The program observed its 10th anniversary in 2018 with a graduating class of 28.

**Supported health care consumers** by identifying gaps in quality information that can hinder informed decision-making in our report, “Empowering New Yorkers with Measures of Quality that Matter to Them.”

**Prioritized patient needs** by organizing an 18-month learning collaborative with three partners—the Institute for Family Health, Montefiore Health System, and Northwell Health—to elicit first-hand reports from patients on their symptoms, health goals, and outcomes. To give patients more of a voice in managing their care, UHF compiled lessons learned in a package of resources, including an implementation guide, three field reports, and an overview of the implications for policy and practice.

**Helped improve primary care** by providing analysis, advice, and technical assistance to support city and state efforts to transform primary care delivery with a special focus on small practices, those working to achieve patient-centered medical home standards, and those collaborating with accountable care organizations to improve care and reduce costs.