

# The Skilled Nursing Organization

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- ☐ 1. Has a specific approach to prevent ReHospitalization and specific protocols/ tools to assist in that effort
- ☐ 2. Keeps score on ReHospitalizations in sync with Hospital/Health System measurements and CMS surveys
- ☐ 3. Looks at each ReHospitalization as a Risk Event. It proactively checks on the status of the client in the Emergency Room and makes every effort to take the client back before ReHospitalization occurs
- ☐ 4. Makes great first impressions and proactive admissions to ensure client/family satisfaction
- ☐ 5. Ensures that all necessary information (medications, equipment needs, required treatments, current client status, medical history, etc) is received at admission to successfully transition the new resident
- ☐ 6. Has superior Physician and/or Mid-Level involvement to assist in preventing ReHospitalization
- ☐ 7. Has the correct number of professionals with the correct clinical training to provide excellent care for clients
- ☐ 8. Works as an active partner in the new transition business of QST  
*"The hospital's continuing partnership with nursing homes in the future will be all about QST... Take the patients **Quicker**, take them **Sicker**, and watch the **Ticker**!"*  
– Clint Maun, CSP
- ☐ 9. Can effectively handle ReHospitalization Prevention on nights and weekends
- ☐ 10. Proactively publishes their ReHospitalization numbers and their successes. They also meet regularly with the Hospital/Health system to develop improvement strategies as needed