PRESS RELEASE

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New Video Series Shows Positive Impact of Hospitals and Home Care Collaboration on Patient Care

The transformative effect of hospital and home care collaboration on patient care is made clear in a new video series developed by the Home Care Association of New York State, Iroquois Healthcare Association and the Healthcare Association of New York State.

Produced as part of the Statewide Hospital-Home Care Collaborative for COVID-19 and Beyond, funded by the Mother Cabrini Health Foundation, these videos show how hospitals and home care providers from across the state are working together in a coordinated fashion to provide high quality, patient-centered care.

“Hospitals, Home Health Agencies and physicians are partnering in models that offer true, transformative pathways for a strengthened health care system,” said Al Cardillo, President and Chief Executive Officer of the Home Care Association of New York State. “Patients are overwhelmingly benefited by collaborative, coordinated and integrated care across providers, which makes the system stronger and more capable, optimizes resources and efficiency, and most importantly, maintains the patient at center-focus. These Hospital-Home Care-Physician Collaboratives, which we and our hospital partners have been working to promote statewide, offer solutions that we hope all will consider, including Governor Hochul and the Legislature as they weigh approaches to supporting New York’s health care system.”

“It was never more evident than when the COVID-19 pandemic overwhelmed the capacity of many hospitals to meet the surge in patient demand that collaboration was necessary because the pandemic forced healthcare into the home, and it is a trend that is only growing,” said IHA President and CEO Gary Fitzgerald.

“We saw an incredible amount of innovation during the pandemic,” said Bea Grause, RN, JD, President, Healthcare Association of New York State. “That unprecedented level of creativity and problem-solving resulted in better patient care and outcomes. Our members look forward to more opportunities to transform care and meet the needs of all New Yorkers.”
Among the videos:

**University of Rochester Medical Center & UR Home Care:** The Critical Illness Recovery Program serves patients who are recovering from prolonged stints in intensive care units and are especially prone to Post-Intensive Care Syndrome, a collection of physical, mental and emotional symptoms that continue to persist after a patient leaves the intensive care unit (ICU). Its telemedicine program has reduced the rate of readmissions for ICU patients by more than 50 percent.

**St. Peter’s Health Partners:** The Care Transitions Coach COVID ED Diversion Program helps discharged COVID patients safely recover at home. Prior to COVID, emergency departments did not discharge patients on oxygen, which presented new challenges for patients and providers. Daily contact between nurses and patients ensured the program’s success by consistently checking in with patients before they could meet with their primary care physician.

**New York-Presbyterian Queens and St. Mary’s Home Care:** With one in five children having a special health care need, the Home-Based Asthma Management program helps children with chronic illnesses such as childhood asthma, one of the most common emergency visits and often exacerbated by environmental issues including mold. Through its telehealth program, home care visits have prevented repeat hospitalizations for sick children due to early intervention, better monitoring and improved communication.

The three organizations recently issued reports detailing best practices for establishing new models of hospital-home care innovation, meeting the growing demand for mental health services, public vaccination efforts, and partnering with the aging services network.

The associations look forward to continuing their engagement with providers across the healthcare continuum, community partners and policymakers to advance collaborative models of patient care.

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