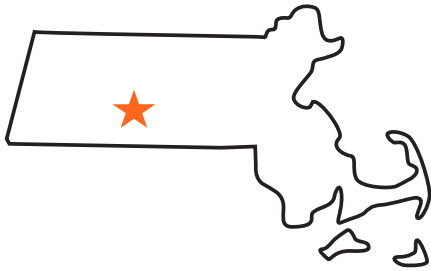


The Community Hospital Acceleration, Revitalization, and Transformation (CHART) Program



Holyoke Medical Center



Total Investment
\$3,873,745

Phase 1 HPC Investment:
\$500,000

Phase 2 HPC Investment:
\$1,900,000

Phase 2 Focus Area: Reducing emergency department (ED) revisits

Phase 2 Target Population: All patients with behavioral health needs who present in the ED, particularly those with high ED utilization

Phase 1 Capacity Building: Holyoke Medical Center transitioned to an electronic health record system. The goal was to better transmit ED medical information to surrounding community providers to improve care coordination and avoid unnecessary ED utilization.

Phase 2 Care Model: Holyoke Medical Center deployed a behavioral health social work team in the ED to enhance care coordination, intervene to address complex social needs, and increase communication among providers. Patients who frequently used the ED were referred to a CHART team of community health workers, patient navigators trained in social work, psychiatric nurse practitioners, medical assistants, and a physician able to prescribe buprenorphine for patients with opioid use disorder.

Key Transformation Achievements:

- Developed a risk stratification method to target patients in need of intensive services
- Developed new modes of communication with community partners
- Spread CHART-driven improvements in care delivery throughout hospital

46%

reduction in ED revisits

3,200+

care plans created during the life of the program

Patient Story

“Many times a patient comes to the emergency department because they are not well connected within their community, and sometimes needs help finding resources...Patients have been very receptive to this program and very appreciative when they are able to get the [resources] that they need.”

- Community Health Worker



An older adult patient with more than 130 behavioral health ED visits in one year was admitted to an inpatient floor for a long stay.



Initially, the patient rejected home visits post-discharge.



As the CHART team developed trust with the patient, the patient agreed to weekly visits from a community mental health worker.



The patient's ED visits decreased, and the patient was able to work part time and appeared to be less socially isolated since accepting the team's support.

About CHART

The Massachusetts Health Policy Commission (HPC) launched the Community Hospital Acceleration, Revitalization, and Transformation (CHART) program in 2014, which invested approximately \$70 million in 30 community hospitals. Profile information comes from multiple sources, including contract documents, program updates, and data submissions by awardees to the HPC (see Data Sources and Methods for additional details).