Doctors and Nurses Know It, Patients Know It

Doctors and nurses know it, and families know it. Even before the COVID-19 pandemic, it was widely recognized that healthcare for patients facing serious illnesses is expensive, often poorly coordinated, and stressful for all involved. While patients, families, and clinicians may have ideas for improving serious illness care, it is often hard to find the time, resources, and institutional support to test and implement positive change. A $1-million gift from Susan and Dick Levy D’60 to the Geisel School of Medicine aims to address this problem.

The couple’s gift, made in early 2020, has helped launch the Susan & Richard Levy Health Care Delivery Incubator, a joint initiative between Dartmouth College, The Dartmouth Institute for Health Policy and Clinical Practice, and Dartmouth-Hitchcock Health (D-HH). The initiative brings together multidisciplinary teams of researchers, frontline healthcare providers, community members, and patients and their families to improve serious illness care.

“Facing a life-threatening illness is inherently stressful for patients and their families, as well as for those who care for them. If we can improve the way we deliver care, we can minimize suffering, improve health outcomes, and often reduce costs,” said Amber Barnato, MD, the Susan J. and Richard M. Levy Distinguished Professor in Health Care Delivery at Geisel and a palliative care physician at D-HH.

LEVY GIFT SUPPORTS Innovations in Care for the Seriously Ill
Dick Levy graduated from Dartmouth College in 1960 and received his PhD in nuclear chemistry from the University of California Berkeley. Dick is the former CEO and chairman of Varian Medical Systems, a company that nearly tripled in size during his tenure. His hands-on approach to management and the efforts he took to empower employees is well known in Silicon Valley and beyond. Susan is also a graduate of the University of California Berkley, having majored in English, and both have contributed broadly to their communities through volunteerism and philanthropy. Dick is especially passionate about improving quality and lowering costs within healthcare systems.

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THREE PROJECTS, THREE PATIENT POPULATIONS

After a competitive review process that began last September, the Incubator has chosen three projects to receive its first round of support. A common theme among these projects is moving care from the hospital into patients’ homes.

One project aims to redesign care for stable preterm infants by transitioning their feeding from the hospital to the home with extensive medical support and monitoring. Another project aims to transition heart failure care to the home with support from visiting nurses and outpatient services. The third project seeks to develop safe, individualized, home-based plans for patients who are being treated for a substance use disorder and also receiving IV antibiotic therapy.

Each project team must include clinical and non-clinical faculty and staff, as well as community-based social service providers and patient and family representatives. The teams will have access to financial and material support from the Incubator, including project management, analytics, and information technology; and mentoring from a network of Dartmouth College faculty and D-HH senior leadership. Each project is expected to last approximately 12 months. However, two of the three projects are on hold while the healthcare system responds to the COVID-19 pandemic and are expected to re-launch later this year.

In the meantime, the Incubator’s core staff is gathering data on real-time innovations taking place in response to COVID-19. Like many institutions across the world, D-HH has rapidly redesigned core services in an effort to support seriously ill patients.

“By studying creative ‘hacks’ implemented by healthcare organizations during this difficult time, we will gain valuable insights,” said Barnato. “Most importantly, we will share what we learn in order to inform healthcare systems worldwide.”

JENNIFER DURGIN