



**Integrated Communities Care Management Learning Collaborative  
In-Person Learning Session 2  
November 17<sup>th</sup>, 2015  
Sheraton Burlington Hotel & Conference Center**

**AGENDA**

<b>8:30 AM - 9:00 AM</b>	<b>Registration and Light Refreshments</b>
<b>9:00 AM - 9:15 AM</b>	<b>Welcome and Opening Remarks</b> Nancy Abernathy, Community Facilitator, Integrated Communities Care Management Learning Collaborative
<b>9:15 AM - 10:15 AM</b>	<b>Understanding the Population and Root Cause Analysis</b> Lauran Hardin, MSN, RN-BC CNL, Director Complex Care, Mercy Health, Grand Rapids, MI
<b>10:15 AM - 11:00 AM</b>	<b>Identifying and Building a Cross Continuum Team</b>
<b>11:00 AM - 11:15 AM</b>	<b>Break</b>
<b>11:15 AM - 12:00 PM</b>	<b>Tools for Intervention</b>
<b>12:00 PM - 1:00 PM</b>	<b>Networking Lunch</b>
<b>1:00 PM - 1:45 PM</b>	<b>Community Reports on Progress since September</b>
<b>1:45 PM - 2:30 PM</b>	<b>Demonstration - Standardized Patient Experience</b> Standardized Patients from UVM Standardized Patient Program
<b>2:30 PM - 2:45 PM</b>	<b>Afternoon Break and Light Refreshments</b>
<b>2:45 PM - 3:30 PM</b>	<b>Community Teams Break Out - Standardized Patients</b>
<b>3:30 PM - 4:00 PM</b>	<b>Community Teams Report Out and Share Next Steps</b>
<b>4:00 PM - 4:30 PM</b>	<b>Closing Remarks and Celebration</b> Jenney Samuelson, Assistant Director, Vermont Blueprint for Health



Integrated Communities Care Management Learning Collaborative

Learning Session #2

November 17, 2015 – Sheraton Inn, Burlington, VT

Afternoon Breakout Session, 2:45 – 3:30 pm

<b>HSA Community</b>	<b>Facilitator</b>	<b>Breakout Room</b>	<b>Standardized Patient</b>	<b>Interviewers</b>
Morrisville	Patty Launer	Kingsland	UVM (Young Woman in ED)	Volunteer Lead Care Coordinator; Team
Central Vermont	Nancy Abernathey	University Amphitheater	UVM (Young Woman in ED)	Volunteer Lead Care Coordinator; Team
St. Albans	Lauran Hardin	Diamond	UVM (Older Woman w/chronic illness)	Volunteer Lead Care Coordinator; Team
Middlebury	Bruce Saffran	Shelburne	UVM (Older Woman w/chronic illness)	Volunteer Lead Care Coordinator; Team



<b>Last Update:</b>		<b>Shared Plan of Care</b>				
<b>Follow-up Date:</b>						
<b>Lead Care Coordinator (LCC):</b>		<b>LCC phone:</b>				
<b>PATIENT INFORMATION</b>						
First Name:	Last Name:	Middle:	Sex:	Birthdate:	Age:	
				1/1/1934	81	
<b>Alerts:</b>						
<b>ABOUT ME</b>						
[INSERT PICTURE, while image is still selected, type CTRL+q to resize]	Strengths & preferred activities:					
	How I Learn:					
	Interaction tips:					
	Communication style:					
	Tips to avoid triggers/behaviors:					
	Mobility:					
<b>DEMOGRAPHIC INFORMATION</b>						
Primary/Emergency contact last name:		First Name:		Relationship to patient:		
Use Data to Identify people						
Street Address:		City:		State:		
Mailing Address:		City:		State:		
Email (Preferred? <input type="checkbox"/> <input type="checkbox"/> ):		Phone (Preferred? <input type="checkbox"/> <input type="checkbox"/> ):		Secondary Phone (Preferred? <input type="checkbox"/> <input type="checkbox"/> ):		
Legal Decision Maker Information:						

**Consider asking the following questions to complete "About Me" section:**

1. How do you like to spend your time?
2. Tell me about some of your strengths.
3. What do you think is most important for me to know about you?
4. When you want to learn something new do you prefer to read about it, watch a video, or talk to someone who can tell you about it?
5. When people are trying to help you what should they not do or say?
6. How do you usually get around your neighborhood or to someplace you want to go?



**PROFESSIONALS & SERVICES**

<b>Primary care clinician:</b>		<b>Phone:</b>		<b>Fax:</b>
<b>Street Address:</b>		<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Preferred pharmacy:</b>		<b>Phone:</b>		<b>Fax:</b>
<b>Preferred hospital:</b>		<b>Phone:</b>		<b>Fax:</b>

OTHER PROVIDERS	NAME/TYPE/LOCATION	LAST VISIT	REASON FOR SERVICE	CONTACT INFORMATION

Use the Eco-map to complete this section



Insurance Information				
Primary insurance:		ID number:		
Policy holder:		Employer:	Policy holder birthdate:	
Secondary insurance:		ID number:		
Policy holder:		Employer:	Policy holder birthdate:	
Waiver	Type:	<input type="checkbox"/> Waiting List	Date applied:	
Medicaid redetermination date:				







# Example 1: Camden Cards

<p><b>Get a job and/or go back to work</b></p> <p><b>(Education &amp; Employment)</b></p>	<ul style="list-style-type: none"><li>● Have spending money</li><li>● Get an education</li><li>● Work hard at a job I like</li></ul>
<p><b>Have medical equipment &amp; medication</b></p> <p><b>(Medication &amp; Equipment Support)</b></p>	<ul style="list-style-type: none"><li>● Find medications that work for me</li><li>● Get medical equipment that will help me manage my conditions</li></ul>
<p><b>Legal issues</b></p> <p><b>(Legal Assistance)</b></p>	<ul style="list-style-type: none"><li>● Stay out of jail</li><li>● Get help with a legal issue I am facing</li><li>● Get a lawyer</li></ul>

<p><b>Talk to someone about my mental health</b> <b>(Mental Health Support)</b></p>	<ul style="list-style-type: none"><li>● To feel better about myself</li><li>● To have more energy and motivation</li><li>● Have fun and not worry all the time</li></ul>
<p><b>Have transportation</b> <b>(Transportation Support)</b></p>	<ul style="list-style-type: none"><li>● Find ways to get to and from medical appointments</li><li>● Not have to rely on others to get places</li></ul>
<p><b>Have a better living situation</b> <b>(Housing Support)</b></p>	<ul style="list-style-type: none"><li>● Have a safe place to live</li><li>● Make improvements to where I stay</li><li>● Find housing I qualify for</li></ul>

<p><b>Have a better relationship with my doctors &amp; nurses</b></p> <p><b>(Provider Relationship)</b></p>	<ul style="list-style-type: none"> <li>● Feel at ease in my health care providers office</li> <li>● Feel comfortable telling my provider when I don't understand something they say</li> </ul>
<p><b>Learn more about _____</b></p> <p><b>(COPD, Diabetes, etc...)</b></p> <p><b>(Health Management)</b></p>	<ul style="list-style-type: none"> <li>● Better control my pain</li> <li>● Learn more about managing my health on a day-to-day basis</li> <li>● Be physically fit</li> </ul>
<p><b>See if I qualify for insurance and other government programs</b></p> <p><b>(Benefits &amp; Entitlements)</b></p>	<ul style="list-style-type: none"> <li>● Apply for assistance</li> <li>● Apply for health insurance</li> <li>● Figure out if I qualify for additional income</li> </ul>

<p><b>Help people in my community</b> <b>(Advocacy &amp; Activism)</b></p>	<ul style="list-style-type: none"><li>● Get involved with/organize a local interest group</li><li>● Let people know about issues happening in our community</li><li>● Use my story to raise awareness</li></ul>
<p><b>Identification</b> <b>(ID Support)</b></p>	<ul style="list-style-type: none"><li>● Get a photo ID</li><li>● Get a driver's license</li><li>● Get a social security card</li><li>● Get a birth certificate</li><li>● Get proof of income</li></ul>
<p><b>Have support</b> <b>(Family, Personal, &amp; Peer Support)</b></p>	<ul style="list-style-type: none"><li>● Socialize with friends and family</li><li>● Find a good friend</li><li>● Feel like my life matters to someone else</li></ul>

**Talk to someone about my drug or alcohol use**

**(Addiction, Assessment, &Connection)**

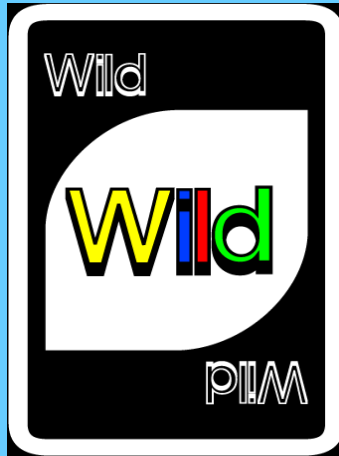
- Learn more about how a drug or alcohol I use affects my chronic condition
- Find someone I can talk to about my alcohol or drug use

**Food & Nutrition**

- Get access to healthy food
- Eat better
- Learn how to cook healthy food

## Example 2: St Johnsbury's Version of the Camden Cards

## Wild Card

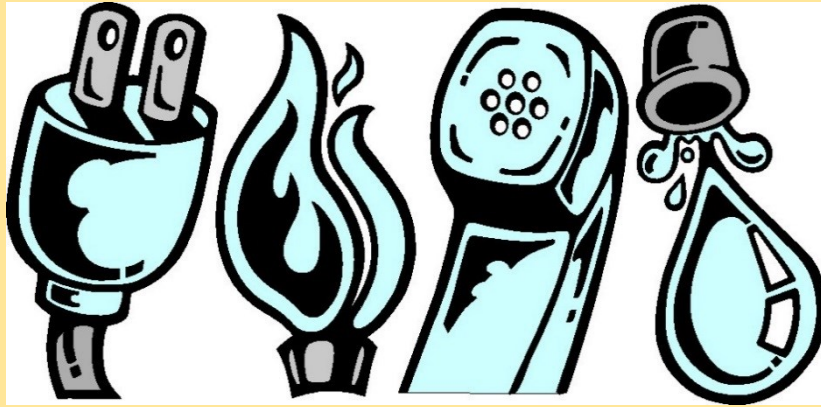


## Relationship Safety





## Utilities



## Medication & Supplies



## Legal



## Family Relationships



## Budgeting/Finances

Categories	Income:	\$1,000	
	Percentages	\$/Month	\$/Week
Rent/Mortgage	20%	\$ 200.00	\$ 50.00
Food (Exclusive of Eating Out)	15%	\$ 150.00	\$ 37.50
Car Payment	7%	\$ 70.00	\$ 17.50
Car Essentials (Gas, Insurance, Maint.)	8%	\$ 80.00	\$ 20.00
Medical/Life Insurance	3%	\$ 30.00	\$ 7.50
Clothing/Gifts/Toiletries	3%	\$ 30.00	\$ 7.50
Entertainment (Eating Out, Movies)	4%	\$ 40.00	\$ 10.00
Savings	10%	\$ 100.00	\$ 25.00
Debt Repayment	30%	\$ 300.00	\$ 75.00
<b>Budget Totals</b>	<b>100%</b>	<b>\$1,000.00</b>	<b>\$250.00</b>

## Education & Employment



## Health Insurance



## Food & Nutrition



## Transportation



## Health Education & Management



## Housing Assistance



## Mental Health



# **Check Backwards Plan- User Guide**

## **Domain Cards**

- Print domain cards on cardstock
  - Left column: Domain names - front of card
  - Right column: possible prompts - back of card
- Cut out each domain name and prompts (cut across each domain– not down the center)
  - Fold cards in half
  - Tape/staple to secure

## **Board**

- Print board on cardstock

## **Purpose**

*The purpose of backwards planning is to determine a care plan based off patient priorities. The cards help highlight different health goals. The board will help patients organize their health goals according to what they deem as important.*

- Domain cards placed in the top left square represent items of high priority.
- Domain cards placed in the top right or bottom left square represent items of lower priority. These squares offer an opportunity to openly discuss *why* a patient feels they are of lesser importance.
- Domain cards placed in the bottom right square most likely represent items the patient has managed well in the past. This square offers an opportunity to highlight past accomplishments and/or progress.

## **Activity**

- 1) Take out cards and board and explain their purpose.
- 2) Read through each domain card with the patient (use prompts on back if you need a conversation starter).
- 3) Have the patient place domain cards in the squares that corresponds to the domain's importance. Example: need to work on now vs. need to work on later.
- 4) Develop care plan based off domain card titles and placement on board

**RIGHT NOW**

**LATER**

**NEED TO WORK ON**



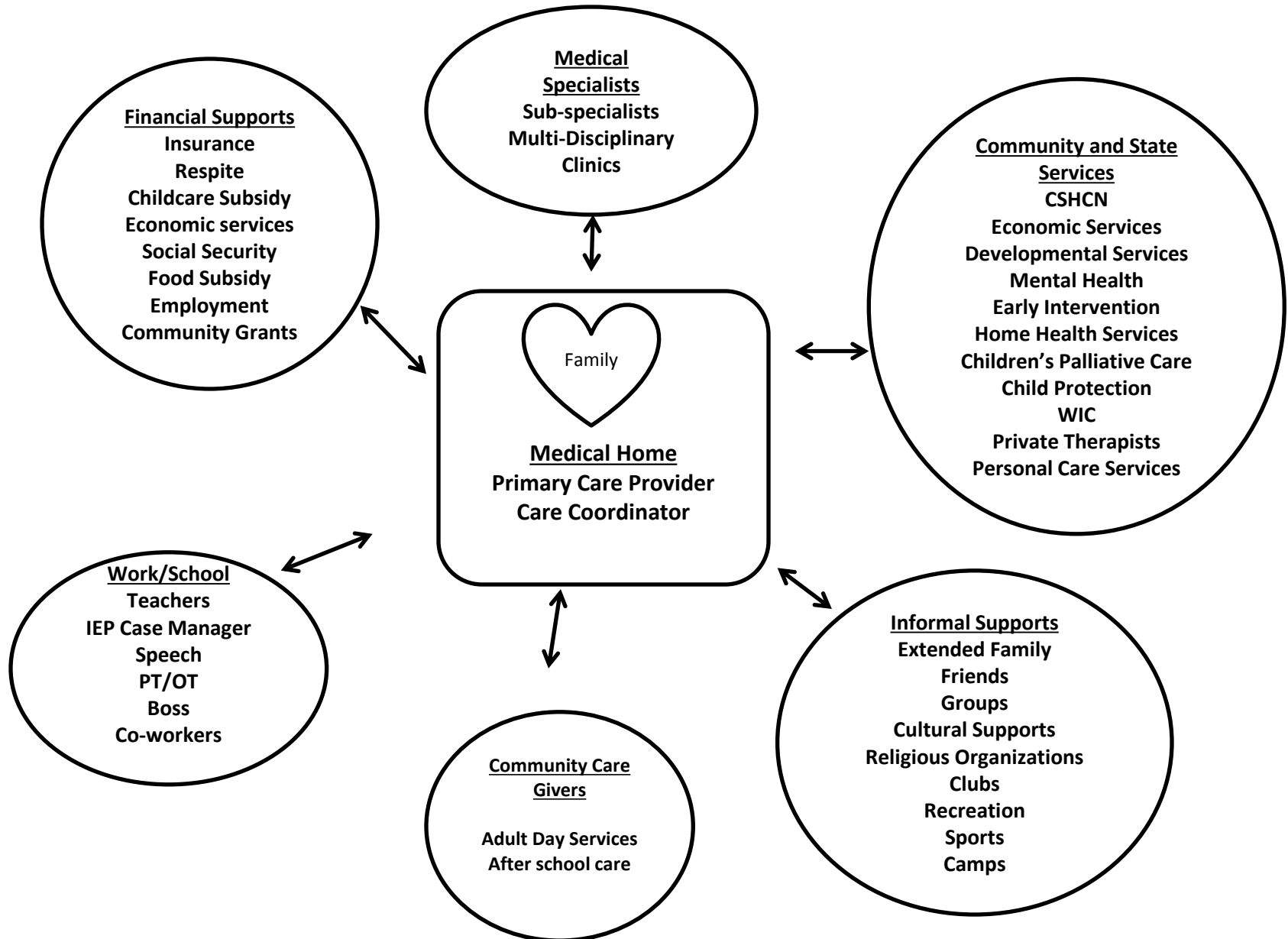
**DONT NEED TO WORK ON**



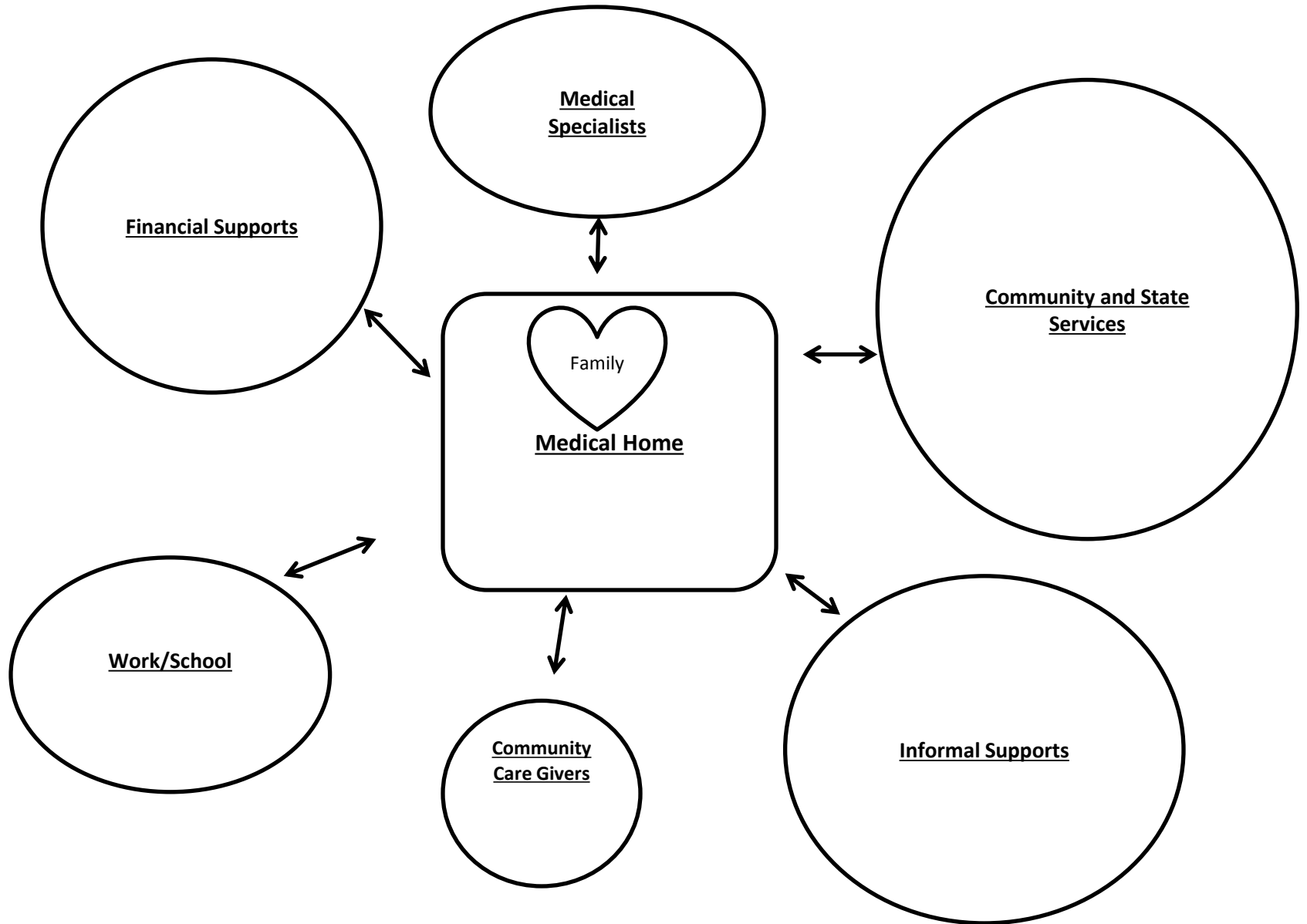
# Eco-Mapping: Example 1



# ECOMAP



# ECOMAP



# Eco-Mapping: Example 2



## THE ECOMAP

The **EcoMap** is a simple visual assessment tool used to highlight relationships between a child, their family and their social network. Practitioner and service user together map out the key connections between the child, the family and their ecological environment. Identifying these links clarifies and organises information displaying familial dynamics; raising issues about the character and reciprocity of relationships, and access to or absence of available resources.

The EcoMap uses standard symbols to express how the child/young person connects with the radial elements in their life – family, people, organisations, activities etc. For example, **a solid line** may indicate **a strong and healthy relationship**, while **a broken line** represents **a weaker tie**. Arrows can be added at the end of each line to indicate reciprocity of some relationships while **stressful or adverse relationships** are represented **by a dotted line crossed by several hashed lines**.

Using the EcoMap the practitioner can work directly with the child/family in an effort to better identify those relationships that are strong and resilient and those that may be characterised by risk and adversity.

As a simple visual tool the EcoMap can helpfully support the analysis and understandings of family relationships and assist improve grasp of the child's/young person's wider circumstances.

Practitioners should:

- Place the person of focus – child/young person, parents/carers or family – at the centre
- Identify the significant relationships this person has to other people, organisations and activities
- Using the key below, draw connecting lines that identify the character of connection/relationship between the person of focus at the centre and the other people, organisations, and activities that are noted around them

### KEY

———— = A Strong Relationship

- - - - = A Weak/Vulnerable Relationship

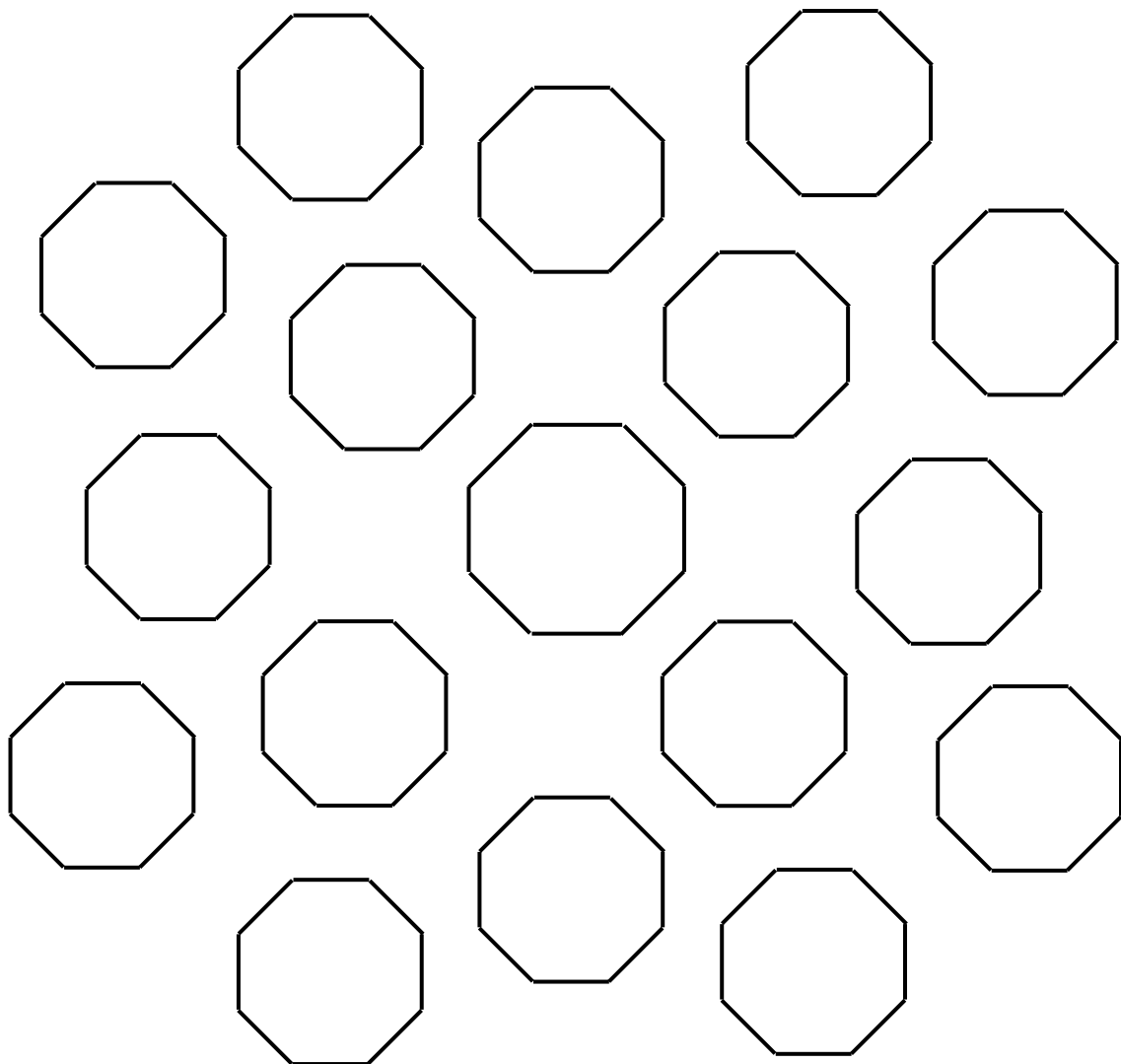
-// -// -// - = A Stressful/Adverse Relationship

Below are blank Templates – 2 different editable templates that can be completed on a laptop and a fixed template that can be used to simply draw out connections, links and relationships.

# BLANK TEMPLATE FOR ECOMAP

NAME OF CHILD/YOUNG PERSON:

DATE STARTED:



NAME OF WORKER:

DATE COMPLETED: