Victoria DeFiglio & Kelly Craig

Sept 8, 2015

Camden Coalition

of Healthcare Providers

Identifying & Engaging People in Community-Based Care Management

What would you like to learn today?

- Use the provided post-it notes to brainstorm
- Write down a topic, idea, or specific question you would like addressed today (one per post-it)
- We will collect and discuss throughout the course!

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Hotspotting

“Hotspotting is segmentation. It’s taking big data sets, [and] segmenting them into a strategy so that you can target different pockets of need…

Hotspotting is making sure that people who are in need get their needs met… in a rigorous, data-driven way.”

Dr. Jeffery Brenner,
family physician &
founder, CCHP

HERBIVORE
• BAKED EGGS w/ SPINACH, GOAT'S FETTA, SPANISH ONION, SUN-DRIED TOMATO, PINENUTS & NUTMEG $13.5
• FITZROY FRESH SANDWICH w/ AVOCADO, CARROT, SWEET CORNICHONS, ROCKET & HUMMUS $8-
CARNIVORE
• BAKED EGGS w/ SMOKED SALMON, CARAMELIZED ONIONS, SPINACH, TOMATO & LIGHT DILL & SPRING ONION CREAM CHEESE $14.5
• CROQUE-MONSIEUR w/ HAM, EXTRA SHARP VINTAGE CHEDDAR & BECHAMEL SAUCE $9-
• BIRCHER MUESLI w/ MIXED BERRY COMPOTE, VANILLA YOGHURT, ALMONDS & GOJI BERRIES $7.5
• SMUSHED AVOCADO ON ORGANIC MULTISEED SOURDOUGH w/ ARTICHOKE HEARTS, GOAT'S FETTA & LEMON $8.5

Intervention Paradigms

Traditional Medical

Diabetes

Heart Failure

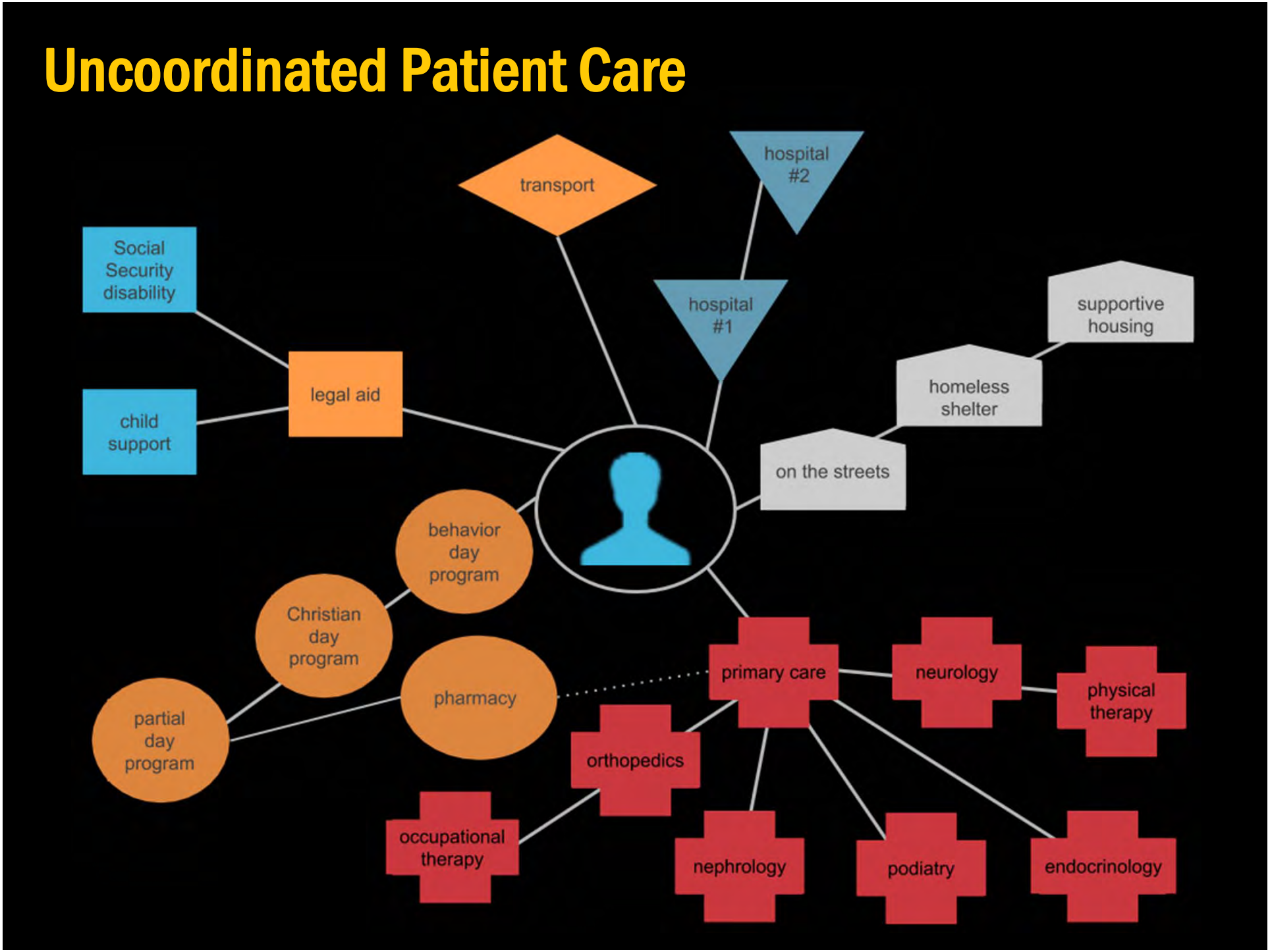
COPD

ESRD

Hotspotting

Complex

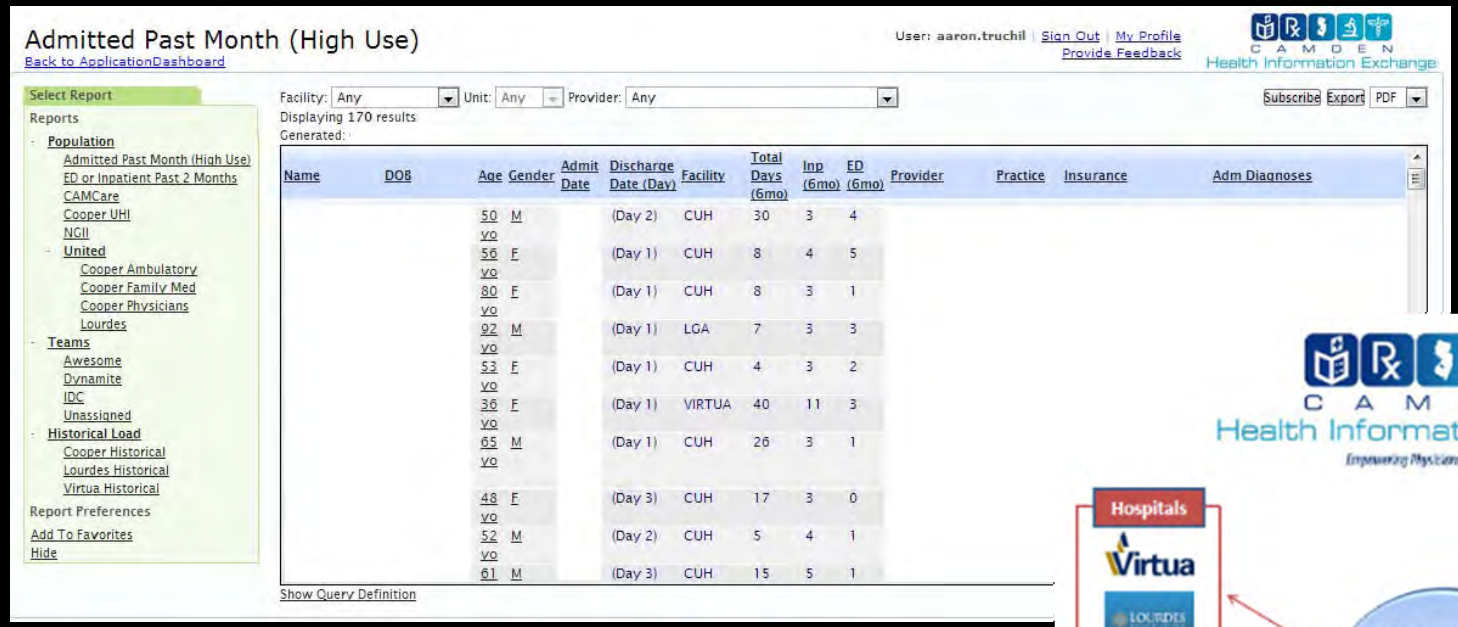
Uncoordinated Patient Care

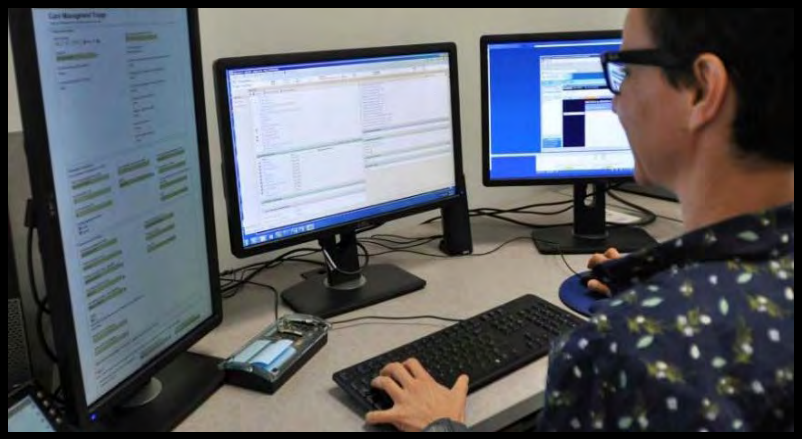


§ 1 Patient Engagement

Patient Relationships

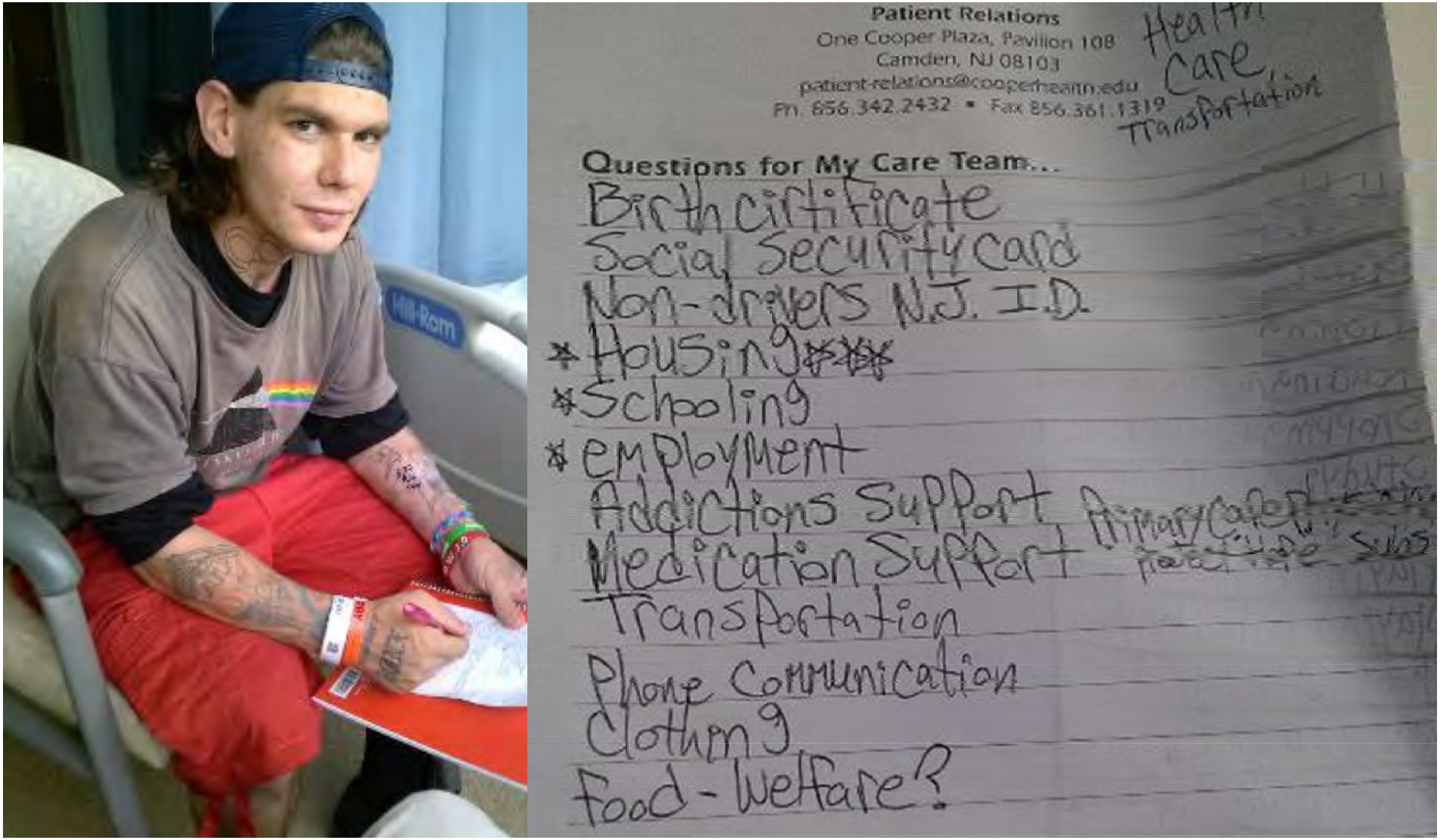
Data Driven Process to Identify High, Cost High Needs Patients





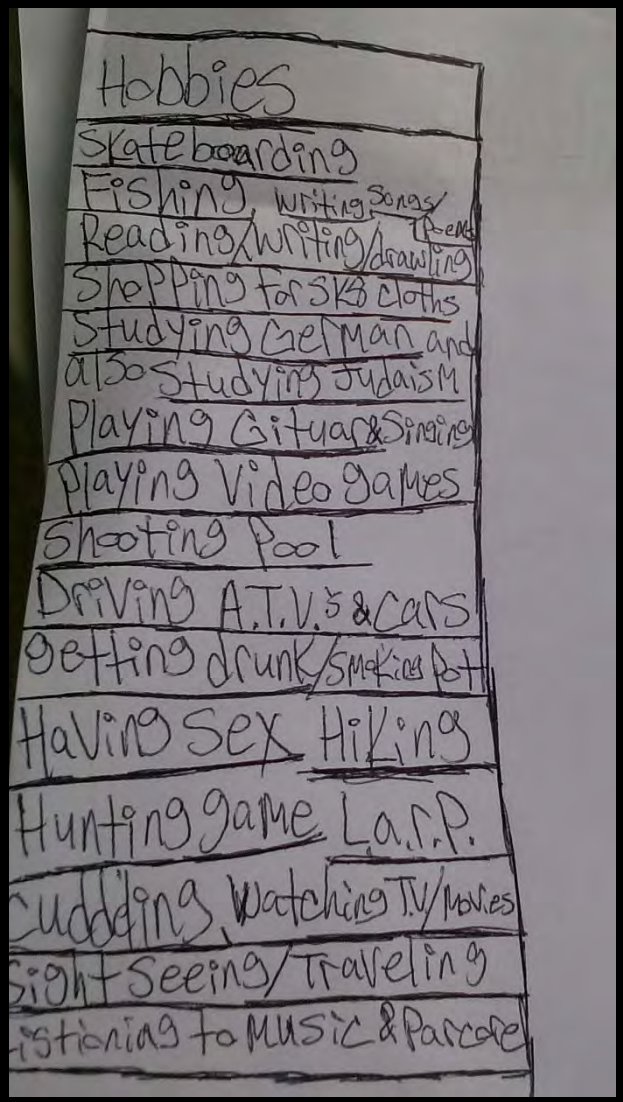
Bedside Engagement

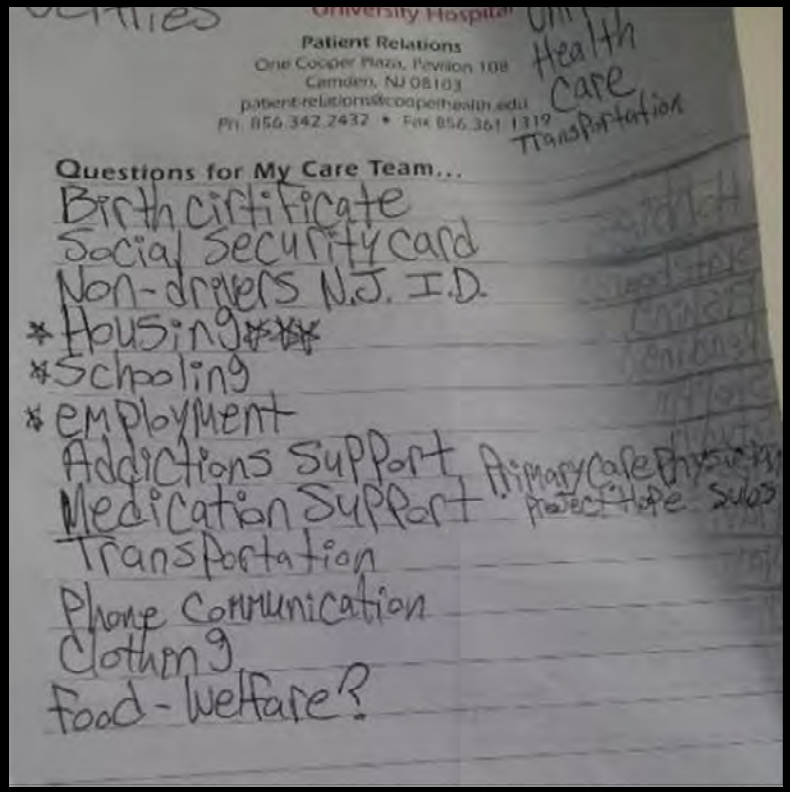
PATIENT ENROLLMENT



Initial Bedside Care Planning: Building rapport and trust

Bedside Care Planning





Therapeutic Relationships Are The Best Pill

- Acceptance framework
  - **Unconditional Positive Regard (Carl Rogers)**
  - **Empathy**
  - **Harm reduction**
  - **Motivational interviewing**
- Trauma-informed care: What happened to you?
- Hospital-Home-Practice-Community Based Services
- Holistic, Bio-Psycho-Social, patient-centered approach

Home Visits within 3 days post discharge, then minimum weekly visit for duration of intervention

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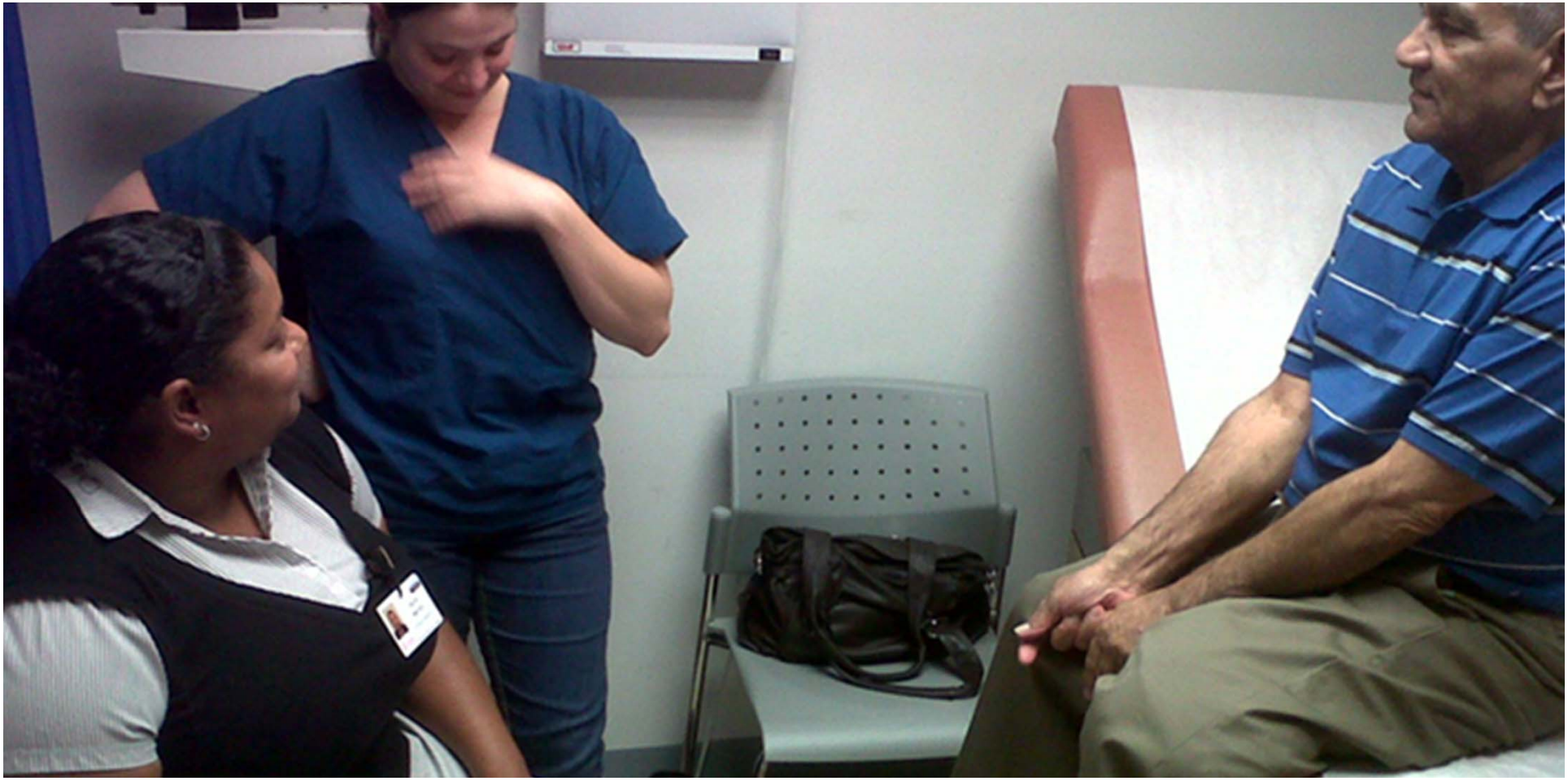


Accompaniment to PCP and specialists within 7 days post discharge

Graduation: Average duration of intervention is close to 90 days but varies with complexity

Lessons Learned

Hiring the right people

Task-shifting

Training

“Fail Fast”

Why?

Qualitative Evaluation at CCHP

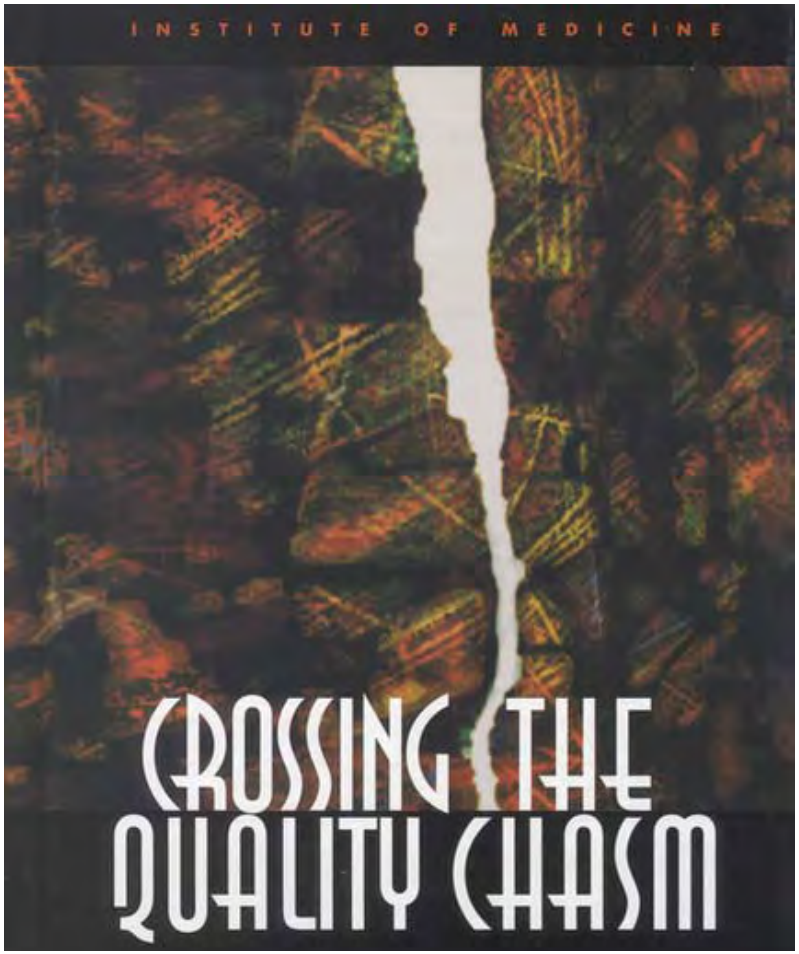
- Useful for describing complex phenomena
- Explores the how, and why, behind an effect or phenomenon
- Gives more recognition to the individuals in the processes
- Creates a feedback loop to the intervention

How?

Interviews gathered & coded, become **data**

From which we extract **themes.**

Authentic Healing Relationships



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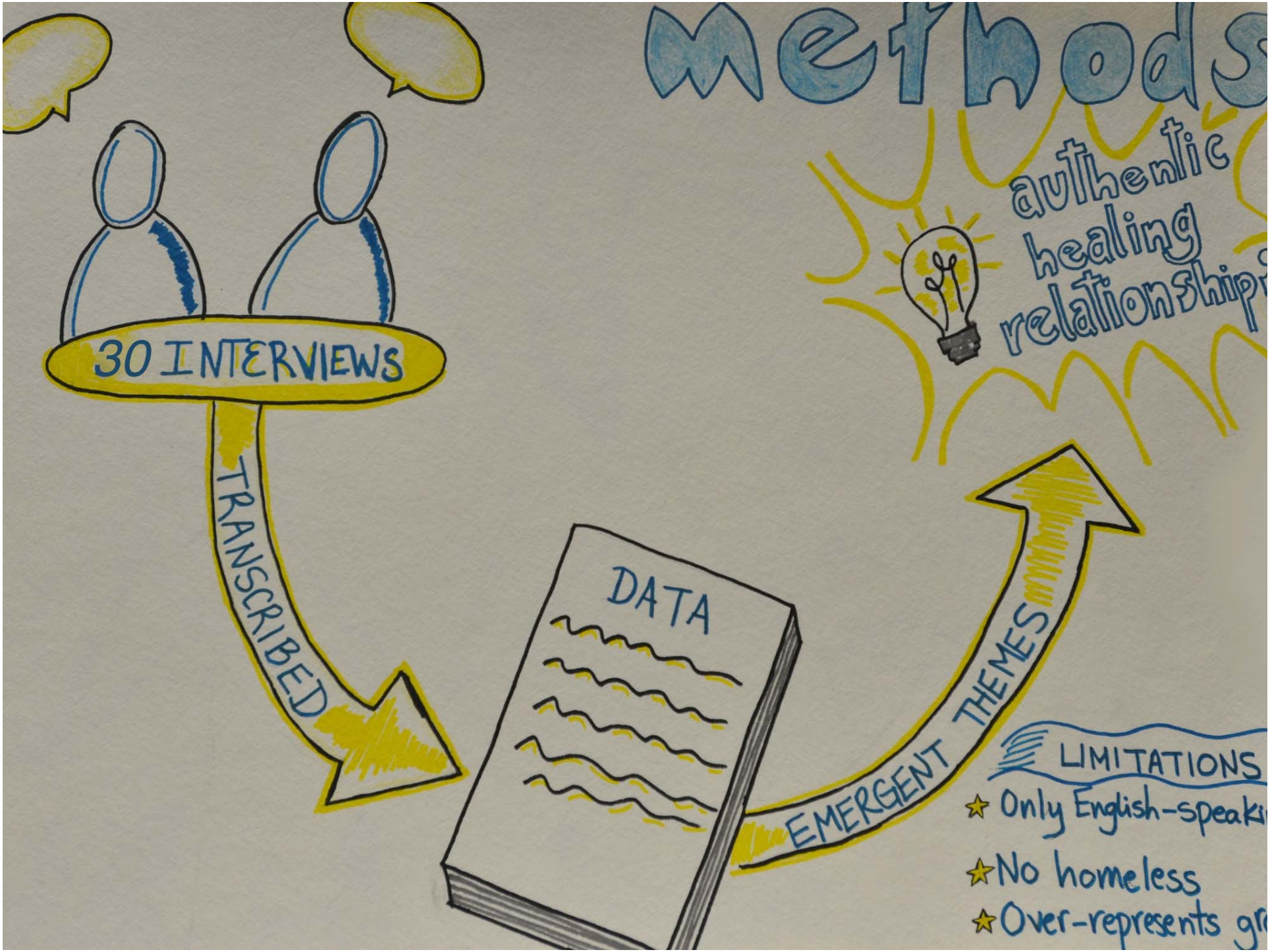
Care management of patients with complex health care needs

Generating Hypotheses About Care Needs of High Utilizers: Lessons from Patient Interviews

Dawn B. Mautner, MD, MS,[1,2,*] Hauchie Pang, MPH,[3,**] Jeffrey C. Brenner, MD,[4,5] Judy A. Shea, PhD,[6,7] Kennen S. Gross, PhD,[4,5] Rosemary Frasso, PhD, MSc, CPH,[3] and Carolyn C. Cannuscio, ScD, ScM[6,8,9]

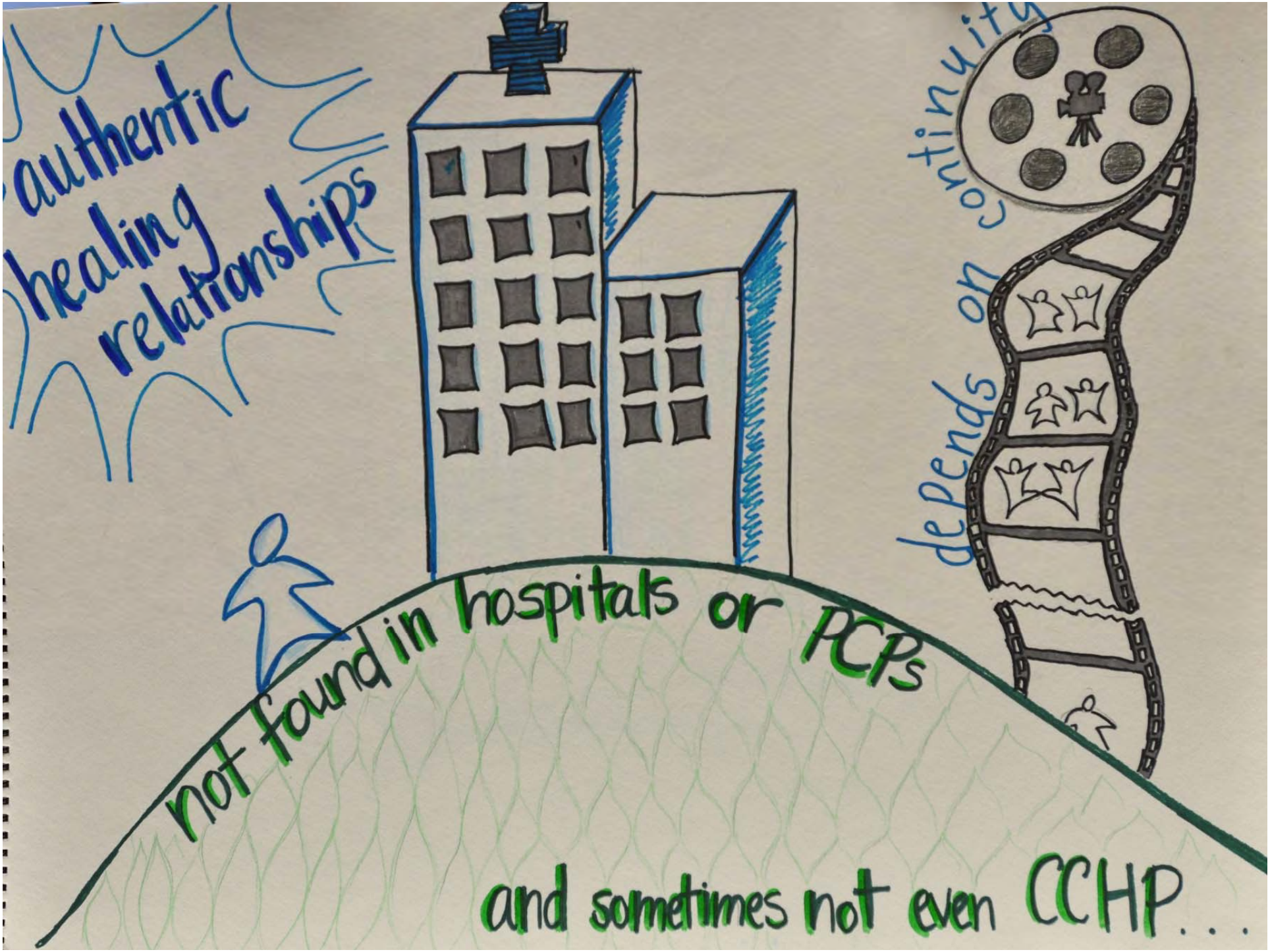
Population Health Management


methods
authentic
healing
relationships
30 INTERVIEWS
TRANSCRIBED
DATA
EMERGENT THEMES
LIMITATIONS
Only English-speaki
No homeless
Over-represents gr

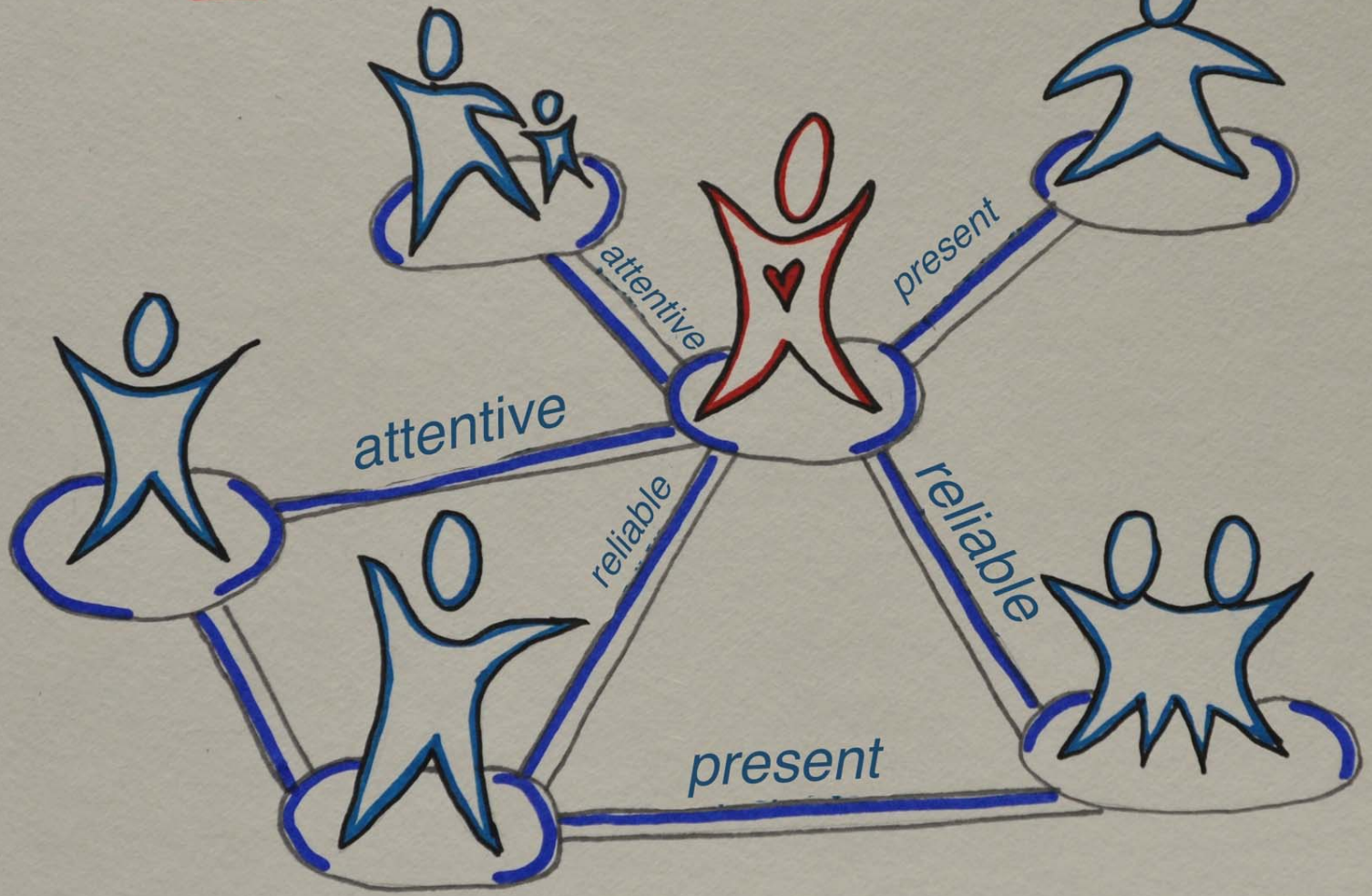
CCHP forms aythentic healing relationships

- SECURE
- GENUINE
- CONTINUOUS

linked with motivation...


authentic healing relationships
depends on continuity
not found in hospitals or PCPs
and sometimes not even CCHP...

Friend and Family Networks ESSENTIAL



Genuine Healing Relationships

"They showed me how to bring myself back"

"She talked to me as a person, not as a patient"

"Just to have them come around and sit and talk… is what I enjoyed… to know that they were interested in me"

Recommendations

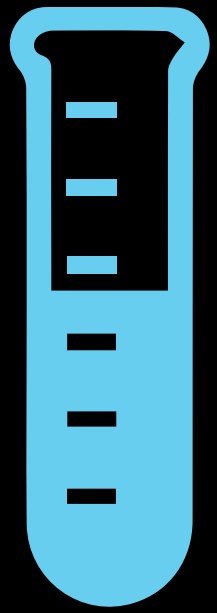
- Further develop tools for identifying, replicating, monitoring, and sustaining authentic healing relationships in health care delivery
- Care for patients with frequent hospitalizations should include techniques from attachment theory, motivational interviewing, trauma informed care, and harm reduction
- Care management should expand beyond on individual behavior change to include family and friends

Conclusion

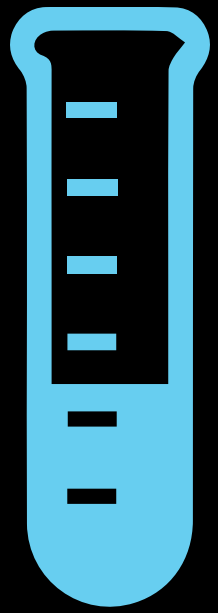
- Sheds new light on importance of a continuous healing relationship in decreasing hospitalizations and improving outcomes
- Three core elements of authentic healing relationships as security, genuineness, and continuity
- AHR linked with motivating patient involvement in their own treatment
- AHR not readily found in the traditional health care system

Questions?

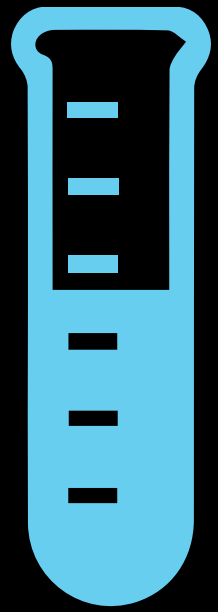
§ 1 Test tubes



IMPORTANCE



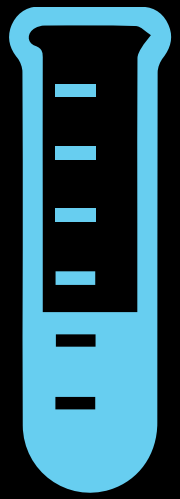
BELONGING



SECURITY

BELONGING= The deep desire to feel accepted and cared for

IMPORTANCE= The deep desire to feel signifant and recognized



SECURITY= The desire to know what's coming next, and to have controlled surroundings

BOOM
significance
significance

Breakout I

OPTION A: Test tube sharing

In your groups, please share :

A time you had a strong emotional reaction to a patient.

Please consider:

- What were your test tubes at the time?
- What were the patient's test tubes?
- Name one strategy you can use when coping with this feeling in the future.
- What are structures you can put in place to talk about test tubes on your teams?

OPTION B: Personal Narratives

In your groups, share the answers to the following:

- What motivates you to do this work?
- What keeps you up at night?
- Pick up to four defining moments in your life and share them with the group.

§ 1 Backwards Planning

C-O-A-C-H

"Taking people from where they are to where they want to be"

Connect tasks with vision and priorities

Observe normal routine

Assume a coaching style

Check backwards plan

Highlight progress with data ("I can")

	NEED TO WORK ON	DON'T NEED TO WORK ON
NOW		
LATER		

Backwards Planning: Gameboard

- Socialize with my friends & family
- Find a good friend
- Feel like my life matters to someone else

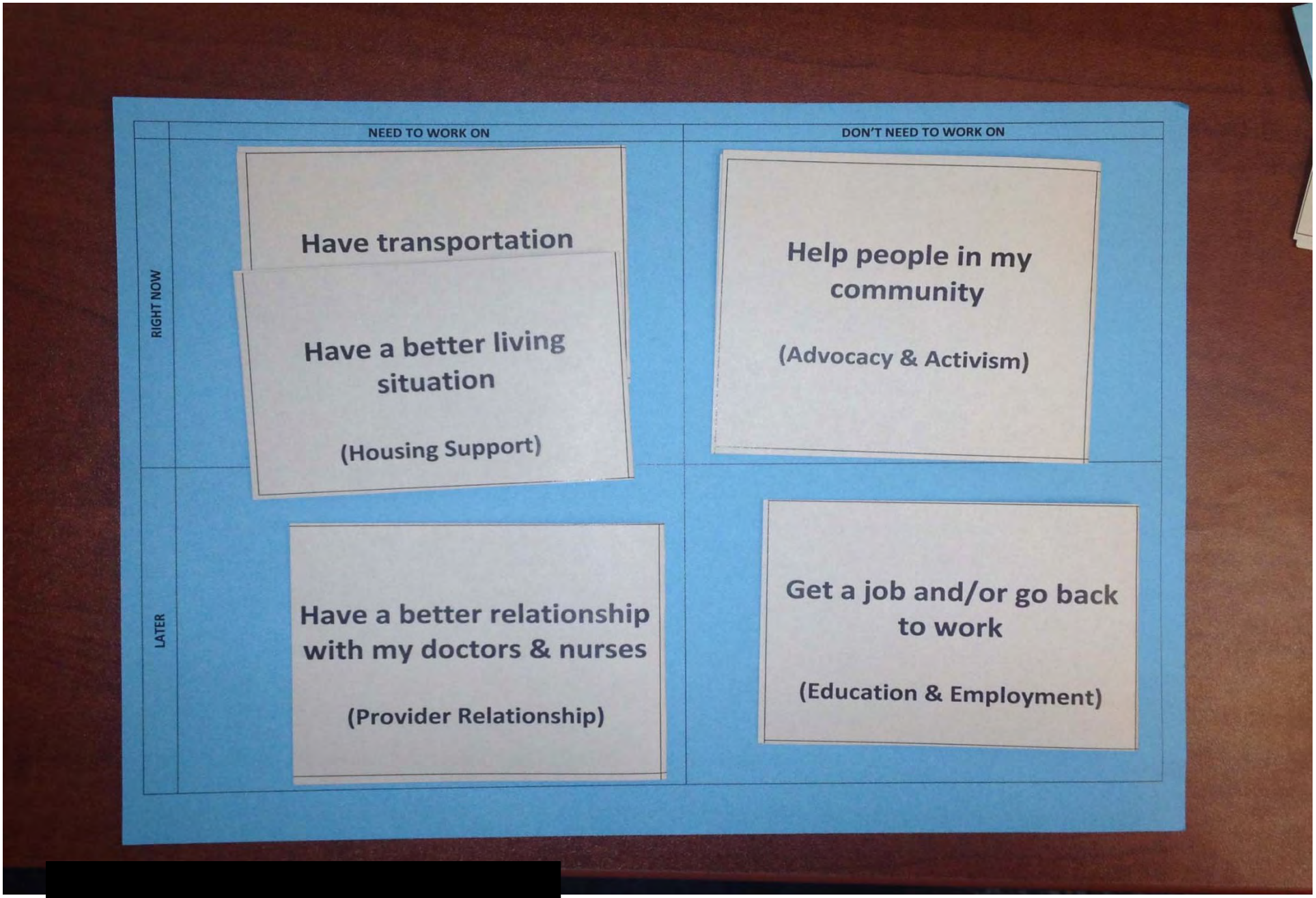
Have support

- To feel better about myself
- To have more energy & motivation
- Have fun & not worry all the time

Talk to someone about my mental health

- Have spending money
- Get an education
- Work hard at a job I like

Get a job and/or go back to work


NEED TO WORK ON
DON'T NEED TO WORK ON
RIGHT NOW
LATER
Have transportation
Have a better living situation
(Housing Support)
Help people in my community
(Advocacy & Activism)
Have a better relationship with my doctors & nurses
(Provider Relationship)
Get a job and/or go back to work
(Education & Employment)

	RIGHT NOW	LATER
NEED TO WORK ON	• Crisis • Deadline • Top priority	• Open-ended Questions
DON'T NEED TO WORK ON	• Open-ended Questions	• Highlight strengths

§ 1 OBSERVE NORMAL ROUTINE

KEY POINT

Before taking **ANY** next steps with a patient….ask questions to find out their normal routine.

One of your patients is a diabetic who is also an amputee. She needs to arrange transportation to get to one of her appointments, and you notice she also has Medicaid. The appropriate next step is to…

A) Pull out the Logisticare information from your bag, and give it to the patient.

B) Ask, "how do you normally get to appointments?"

C) Give her a cab voucher.

Bernard calls you after he takes his insulin out of the refrigerator. He tells you the name of the insulin, and describes that it's usually clear, but now he sees "little floaty things in it."

Ask, "who would you call if I didn't pick up the phone?"

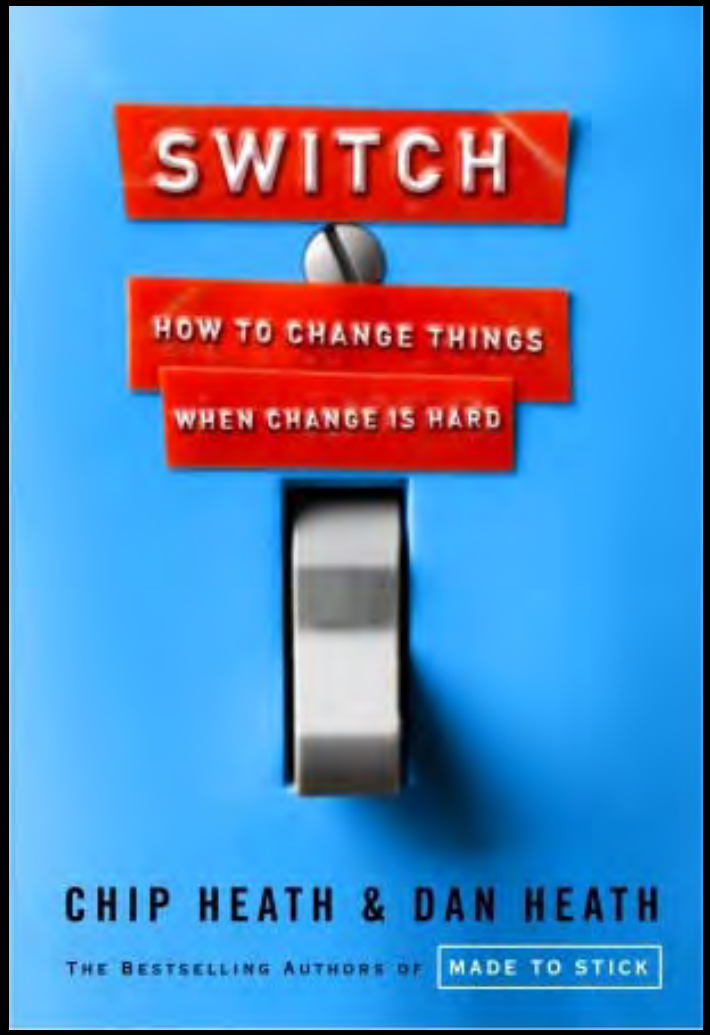
MARK'S VIDEO: IMPACT OF "O" IN THE FIELD

“Real Play”

- Share something you want to change (10-minutes a person)
- Responder may only ask open-ended questions!
- After the exercise, please record:
  - 1. What emotions came up for you when sharing and when responding?

BREAK

“Brightspotting”



“Brightspotting” Activity

How can you highlight “brightspots” at the:

- **Individual level**
- **Team level/community level**
- **State-wide level**

Breakout 2

What are your next steps?

- Pick 1-2 strategies you learned today to implement in your community.
- You will share out to the large group.

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Thank You!