Delivering & Sustaining Super-Utilizer Interventions: Lessons from Our Operational Journey

What We've Learned So Far (2.0)

October 2016

camdenhealth.org

@camdenhealth

Camden Coalition
of Healthcare Providers

MISSION
Our mission is to improve the health status of all Camden residents, by increasing the capacity, quality, and access of care in the city.

VISION
Camden will be the first city in the country to bend the cost curve while improving quality.

CAMDEN

Overview of the Camden Coalition

- 85 full-time staff
- $10 million annual budget: mix of foundation & federal grants, technical-assistance & care-coordination contracts, and hospital support
- Membership organization: 22-member board; incorporated non-profit

What We Were Doing

The Coalition had achieved national recognition for innovative efforts…

But internal operation did not match external reputation…

New initiatives demand new structures

What We Are Doing

- Defining ourselves and the problem we solve
- Improving project and program management
- Defining and tracking our efforts
- Aligning and motivating staff
- Planning for sustainability

Defining Ourselves & the Problems We Solve

Defining our approach

C-O-A-C-H

Connect tasks with vision & priorities
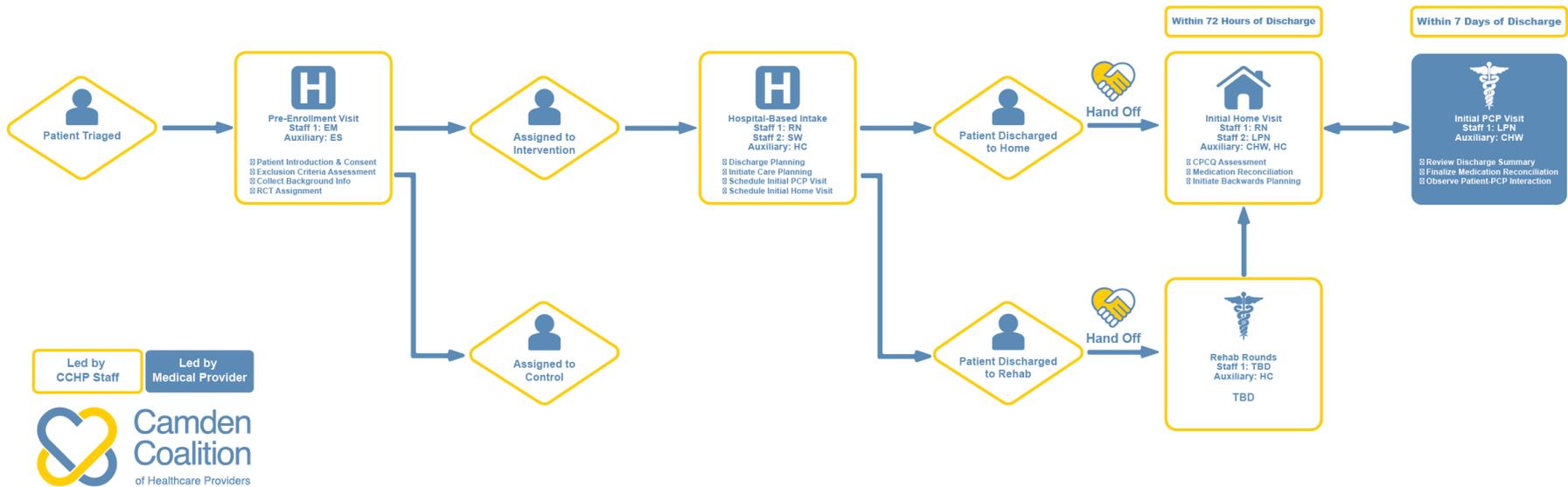**O**bserve normal routine
Assume a coaching style
Check backwards plan
Highlight progress with data ("I can")

CMI WORKFLOW

HOSPITAL-BASED OPERATIONS

Within 72 Hours of Discharge

Within 7 Days of Discharge

Patient Triaged

Pre-Enrollment Visit
Staff 1: EM
Auxiliary: ES
☐ Patient Introduction & Consent
☐ Exclusion Criteria Assessment
☐ Collect Background Info
☐ RCT Assignment

Assigned to Intervention

Hospital-Based Intake
Staff 1: RN
Staff 2: SW
Auxiliary: HC
☐ Discharge Planning
☐ Initiate Care Planning
☐ Schedule Initial PCP Visit
☐ Schedule Initial Home Visit

Patient Discharged to Home

Hand Off

Initial Home Visit
Staff 1: RN
Staff 2: LPN
Auxiliary: CHW, HC
☐ CPCQ Assessment
☐ Medication Reconciliation
☐ Initiate Backwards Planning

Initial PCP Visit
Staff 1: LPN
Auxiliary: CHW
☐ Review Discharge Summary
☐ Finalize Medication Reconciliation
☐ Observe Patient-PCP Interaction

Assigned to Control

Patient Discharged to Rehab

Hand Off

Rehab Rounds
Staff 1: TBD
Auxiliary: HC

TBD

Led by
CCHP Staff

Led by
Medical Provider

Camden
Coalition
of Healthcare Providers

Defining our services

Protocolizing Our Work

Solving the right problems

Improving Project & Program Management
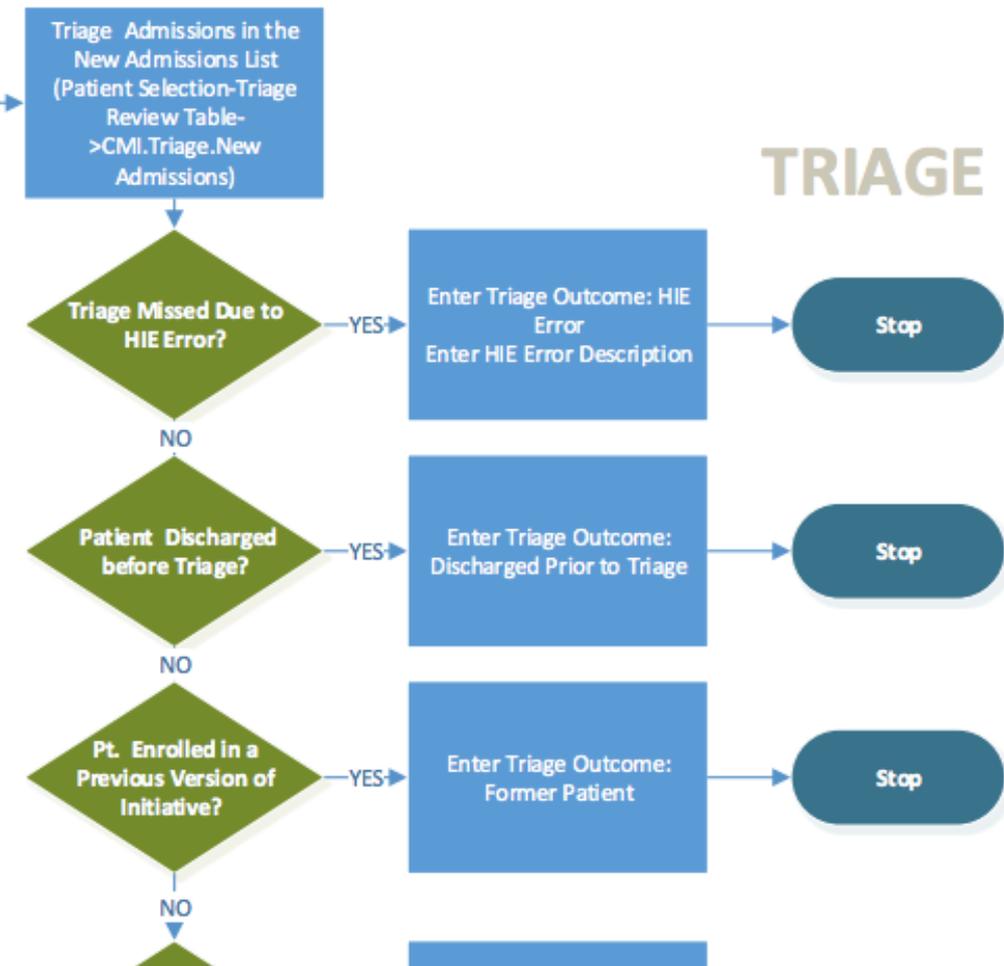
Harnessing the generative tension of dyadic leadership

Using a lean startup approach

THE LEAN STARTUP

How Constant **Innovation** Creates Radically Successful Businesses

Finding digital process efficiencies *after* analog iteration

Assigning Owners to All Projects & Tasks

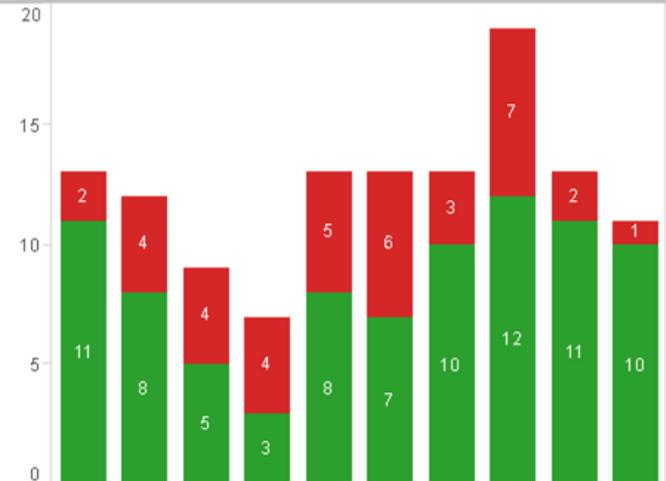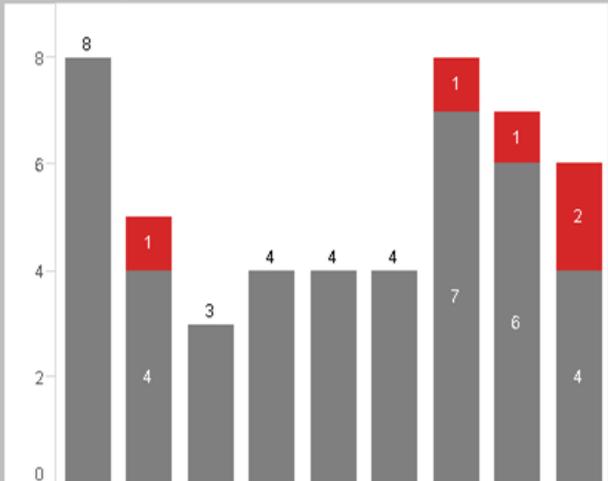| STATU	Project	Status	Start Da	End Dat	Responsibl	Accountabl	Consulted	Informed
	Engaged and Emergent Strategic Planning							
○	Design and Draft Nicholson 2016 deliverables plan	Current-Ongoing	7/15/2015	9/31/2015	Carter	Len		
●	Support draft of operational plan for Atlantic/RWJF	Complete	8/11/2015	9/8/2015	Carter	Maggie		
○	Finalize ACO gainsharing plan	Current-Started	8/26/2015	12/25/2015	Maggie	Len	Mark, Natassia, Natasha	
○	Plan and Hold Board Retreat	Current-Started	7/1/2015	8/30/2015	Maggie	Len	Mark, Carter, Natassia	Jared, Jeff
○	Support the planning of the operational structure of CSL	Current-Started			Maggie	Len	Victoria, Jared	
	Design and develop a plan for launching a focus factory for publications	Future			Maggie	Len		
	Design and Opertationalize Systems							
●	Develop, implement, and transition Verizon phone distribution and monitoring system	Complete	6/1/2015	7/31/2015	Josh	Maggie	Andrew, Amadly, Kelly, Jared,	Pat, Len, CMI
○	Operationalize Grant Reporting Monitoring System	Current-Finalizing	3/1/2015	9/31/2015	Zach	Carter	Len, Jared, Maggie	
○	Prepare and hold quarterly HNJH Executive Meeting	Current-Finalizing	9/9/2015	10/9/2015	Carter	Len	Jared, Natasha	
	Program Improvement & Standardization							
○	Develop a passport to Health 2.0	Current-Ongoing	9/1/2015	11/1/2015	Robin	Carter	Kelly, Ebony	CMI
	Develop Passport to Wellness 3.0	Future			Robin	Carter	Maggie	
○	Develop and Deploy Complex Care Planning Modules	Current-Ongoing	9/1/2014	2/1/2015	Robin	Carter	Kelly, Laura, CMI	Len, Jared
○	Establish an online host for Care Planning Resource Library	Current-Ongoing	4/1/2015	11/1/2015	Robin	Carter	Len, Carise, Jared, Mark	CMI
○	Develop electronic rolodex for resources	Current-Ongoing	9/1/2015	11/1/2015	Robin	Carter	Laura, Kelly, CMI	
○	Develop Care Planning Facilitator Toolkit	Current-Ongoing	9/1/2015	11/1/2015	Robin	Carter	Maggie	
●	Develop and Transition Quality Committee Management and Planning to CRI	Complete	7/1/2015	8/18/2015	Carter	Len	Maggie, Natasha	
●	Assesment and recommendations for Care Kenesis Utilization	Complete		8/30/2015	Erica	Carter	Jared	
○	Implement system for regular updates of HEDIS metrics	Current-Ongoing	5/1/2015	12/25/2015	Carter	Natasha	Len	
○	Develop Operational Journey presentation	Current-Ongoing	9/1/2015	10/31/2015	Carter	Maggie	Jared, Dave	
○	Design and Pilot Citywide post discharge tool	Future			Molly	CRI	Maggie, Carter	
	Database Management & Optimization							
●	Develop and implement a process to engage with and track former RCT control patients	Complete	6/1/2015	8/10/2015	Itir	Maggie	Andrew, Aaron	Kelly, CMI

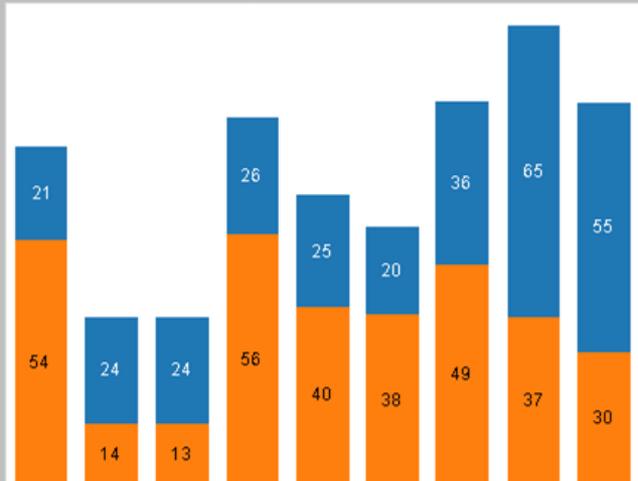# Defining and Tracking Our Efforts

Developed & measured process metrics
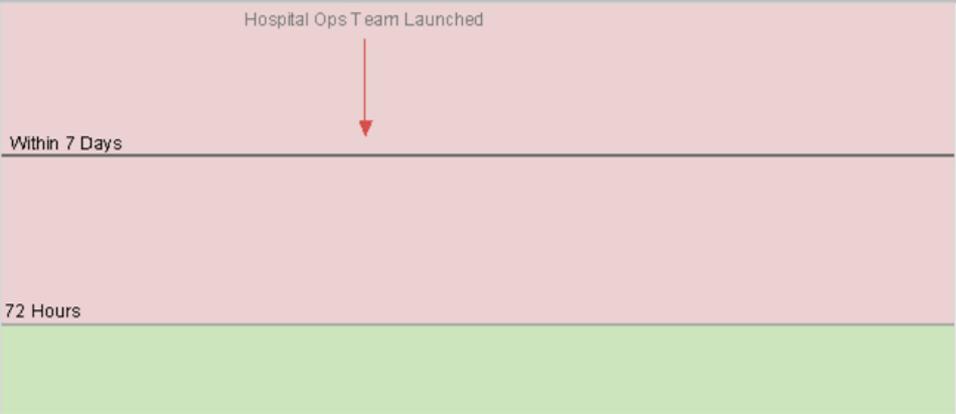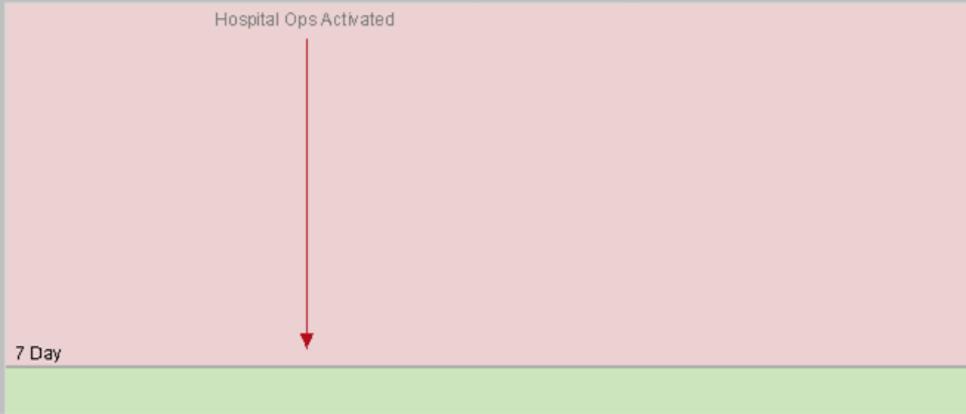
Developed tools to drive our work

Developed tools to evaluate our progress

	October 2014	November 2014	December 2014	January 2015	February 2015	March 2015	April 2015	May 2015	June 2015	July 2015	August 2015
	143	113	107	128	55	108	97	102	91	80	93

Hospital Utilization by Member Typology

Typology	November	December	January	February	March	April	May	June	July	August
Inpatient-High Utilizer	24	27	28	18	61	53	48	40	41	47
Inpatient-Standard	40	27	36	46	94	79	95	91	74	99
ED-High Utilizer	88	96	104	122	329	278	350	305	325	345
ED-Standard	441	600	636	876	2,106	2,224	2,392	2,048	1,845	1,865

All Inpatient Post Hospital Visits

ACO
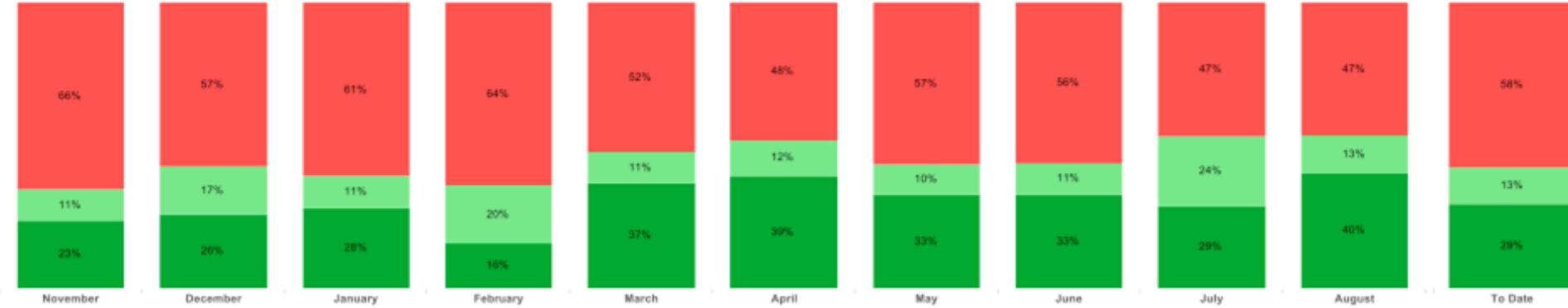
ED High-Use Post Hospital Visits

ACO

Expanded our evaluation beyond clinical programs

Invested in Operational Analysis

August Inpatients:
Practice-level Utilization Outcomes

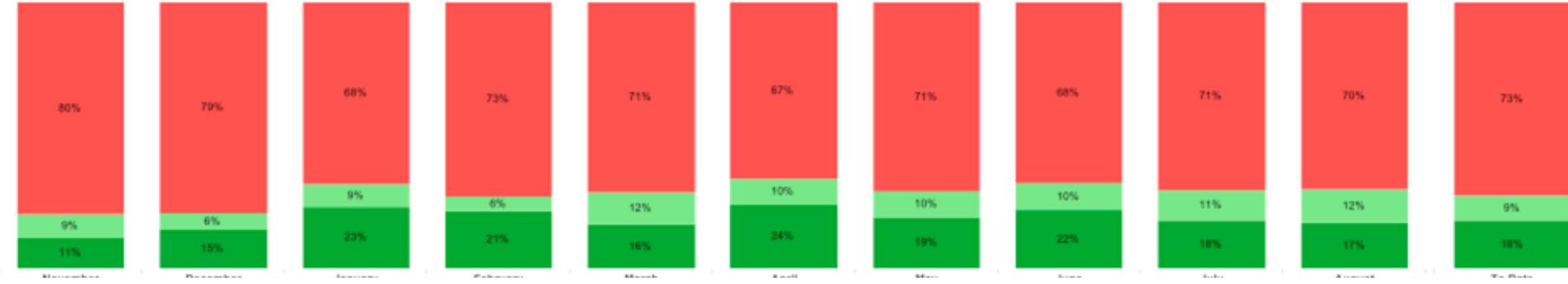| Horizon Inpatients	Ruled Out	Unreachable	Scheduled	Declined	Readmitted before PCP	Staff capacity	Total	Show Rate
Acosta	4	0	5	0	1	0	10	100%
	40%	0%	50%	0%	10%	0%		
Cooper Family	1	2	7	1	0	0	11	100%
	9%	18%	64%	9%	0%	0%		
Cooper IM	12	2	10	2	0	0	26	80%
	46%	8%	38%	8%	0%	0%		
Cooper Peds	4	1	10	3	0	0	18	90%
	22%	6%	56%	17%	0%	0%		
Fairview	2	0	3	0	0	0	5	67%
	40%	0%	60%	0%	0%	0%		
Osborn	4	2	10	0	0	0	16	90%
	25%	13%	63%	0%	0%	0%		
Project HOPE	1	1	5	0	0	0	7	80%
	14%	14%	71%	0%	0%	0%		
Reliance	7	1	8	1	0	0	17	75%
	41%	6%	47%	6%	0%	0%		
St. Luke's	1	0	0	0	0	0	1	N/A
	100%	0%	0%	0%	0%	0%		
Virtua	6	0	11	1	0	0	18	73%
	33%	0%	61%	6%	0%	0%		
	42	9	64	8	0	0	129	83%
Percent	33%	7%	50%	6%	0%	Adjusted total	87	

Aligning and Motivating Staff

STRATEGIC DESIGN

STATISTICS MBA ANTHROPOLOGY
NURSING INFOMATICS
COLLABORATION PSYCHOLOGY
TEAM WORK DIVERSITY
POLICY & ADVOCACY EDUCATION
DATA DRIVEN SOCIAL WORK
SERVANT LEADERSHIP BUSINESS
MEDICINE

Building a team for population health

Hiring for attitude, not licensure
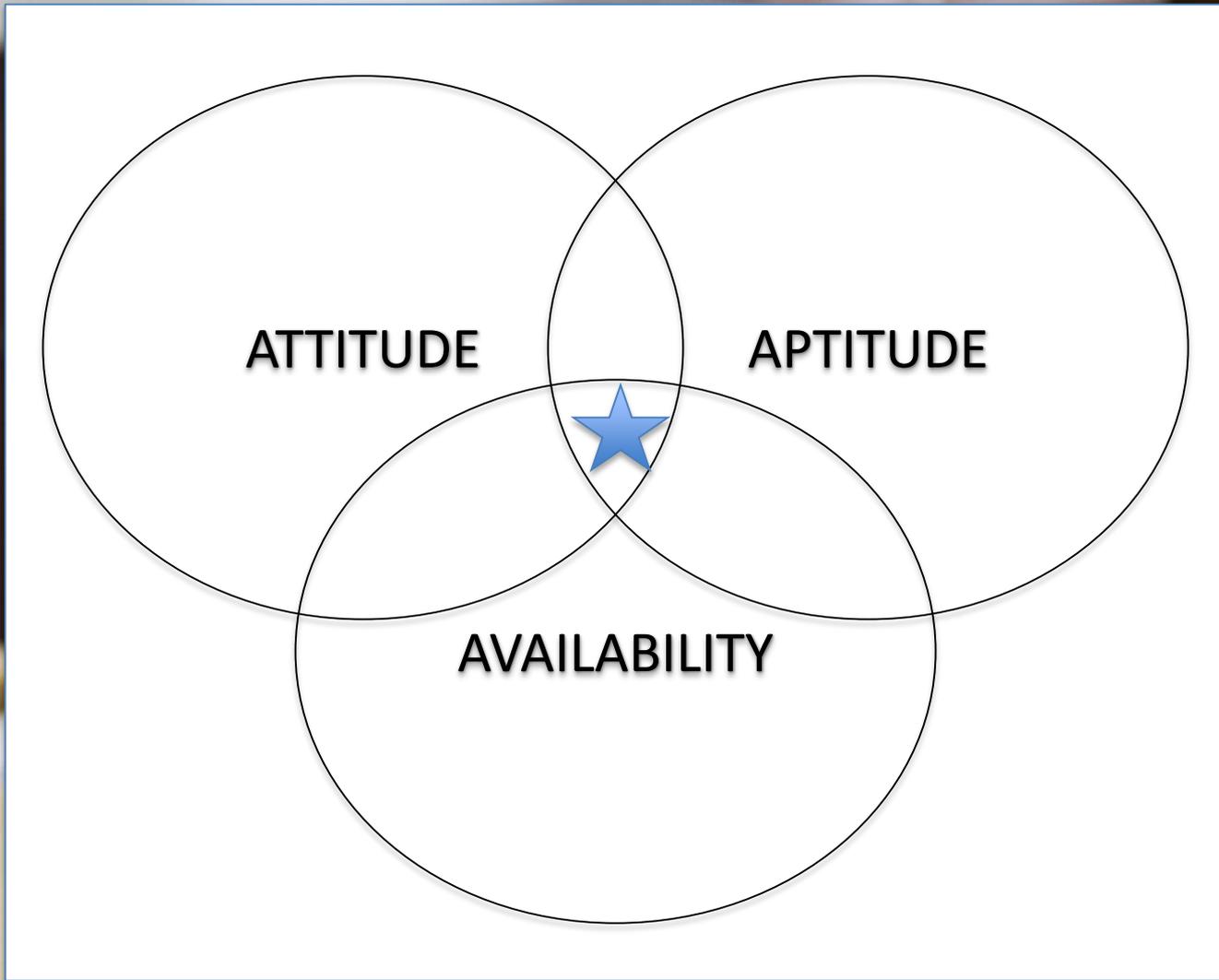
Expanding staff capacity and clarifying professional growth

Living our **Core Values** & Developing our **Key Competencies**

CORE VALUES

- Servant Leadership
- Communication & Collaboration
- Compassion & Respect
- Innovation
- Data-driven Practice
- Diversity & Inclusion

KEY COMPETENCIES

- Relationship Building
- Domain Expertise
- Self-mastery
- Outcome Orientation
- Developing people
- Change Management

Planning for Sustainability

Creating bench strength

Improving business planning

Driving funding through strategy, *not* strategy through funding
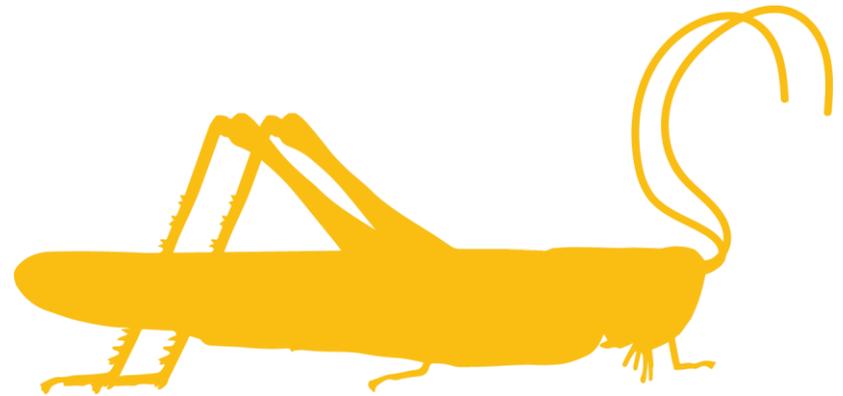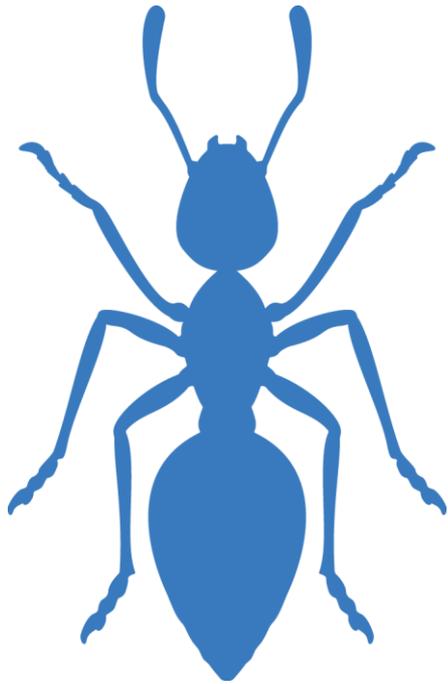
Are you an ant or a grasshopper?

Building an evidence base

Spreading processes & tenets, *not* programs

- Acceptance Framework
  - Harm Reduction
  - Motivational Interviewing
- Trauma-Informed Care
- Community- and hospital-based
- Holistic, biopsychosocial approach
- Human-centered design

Activating the "Coalition"

LOCAL
• Community Advisory Council
• Care Management meetings
• Faith in Prevention
• Medical Assistant program
• ACO Quality Improvement dinners
• Housing First in Camden

STATE
• Good Care Collaborative
• South Jersey Behavioral Health Innovation Collaborative

NATIONAL
• Population Health Conference
• Student Hotspotting program

Where We Are Heading

Review: What we're doing

- Defining ourselves and the problem we solve
- Organizing around strategy
- Improving the way we manage projects & programs
- Defining and tracking our efforts
- Aligning and motivating staff
- Planning for sustainability

But we're not done learning…

DWeinman@camdenhealth.org

Learn from our mistakes…

- Mission creep
- Agreement on values
- Too much doing, not enough leading
- Inadequate organizational goverance
- Jumping to the technological solution
- Building before testing
- Failing to communicate with stakeholders

Camden Coalition of Healthcare Providers

Protocol TR1.1:
Provide 5-Star Cab Service for Patient

STEP	DESCRIPTION
1. Note the following before beginning	• If the patient is using the cab for the first time, make sure to inform the patient beforehand that the cab ride is paid for and give the patient CCHP Staff's contact information so that he/she can call if any issues with payment arise.
2. Fill out 'Pick Up Request' form	• Fill out every section of the 5-Star Cab Inc. Pick-Up Request Form (located in the Mural Room Form Collection Folders labeled 'Cab Vouchers') • Grand/Department Section must be filled out regardless of who is submitting it
3. Fax the form to 5-Star Cab Fax #:856-757-0479	• Send the fax at least a day before the requested transportation if possible

Documenting & protocolizing essential processes

PCP Payments & Patient Access Support Program Project Plan

Status	Task	Deadline	Owner	Participants	Notes
	1 = completed				
	2 = in process				
	3 = late				
	Collect 25 patient satisfaction surveys from each practice	8/8			What is a realistic target date for this? Given the timeline we have laid out f
	Analyze satisfaction survey results (overall)	8/11	Interns	Natasha, Maggie, Carter	
	Analyze satisfaction survey results (practice specific)	8/18	Interns	Natasha, Maggie, Carter	
	Produce draft patient satisfaction reports (overall and practice specific)	9/1			Do we need Jeff edits on these?
	Create final overall and practice-specific patient satisfaction reports	9/15	Nadia		
	Present results to Qualtiy Committee	11/11			
	Present results to the Exec Committee	11/19			We should remember to get this on Natassia and Mark's radar
	Branding				
	Select 7-day pledge swag				
	Obtain budget approval				
	Order 7 day pledge swag	7/30			
	Distribute swag to practices				
	Practice/Patient Incentive Plan				
	Taxi Vouchers				
🟢	Create taxi flyer	Complete			
🟡	Get Cooper legal approval on flyer and script	7/11	Natasha		
	Send taxi flyer to UHI	7/10	Natasha		
	Gift Cards				
	Log giftcards in TrackVia	7/11			
🟡	Build TrackVia system for gift cards	7/25	Itir		
	Order padded envelopes for gift cards	7/11	Liz		
	Identify and capture how to check gift card activation	7/11			
🟢	Develop and file policy for patients claiming no gift cards	Complete			
	Develop and document weekly process for mailing cards	7/18			
	Invoicing				Is there work needed around figuring out how to cut checks? Do we need to
	Develop excel invoice for pratice payments	8/15	Carter		
	Develop manual invoice for practices with no excel	8/15	Carter		
	Get legal language from Mark for bottom of invoice	8/15			
	Write up email instructions for using invoice and distribute to practices	8/15			
	Develop system to cross-check accompanied PCP visits with Care Team	8/15			
	Create packet of policies, procedures and tools for Kathy and Accounting	8/22			I pushed this back an entire month. Is that fine?
	Quality Improvement Process				
	Draft Quality Improvement Plan template	9/7			
	Review sample template from United	7/30			
	Schedule meeting to backwards plan for product that we want	7/25	Natasha	???	
	Obtain Jeff's feedback on QI plan	8/1			Make want to scoop up the time now
	Develop QI Plan Template draft	8/22			
	Finalize QI Plan Template	9/7			

Formalizing the use of planning throughout a project's life cycle