

# Welcome to LINKING CLINICAL AND COMMUNITY TO IMPROVE POPULATION HEALTH

Guest Presenter: Patricia Daly MS, RN

#### **Announcements**

Check out the Mass in Motion Calendar for upcoming events such as webinars and quarterly meetings

www.hria.org/mim

## LINKING CLINICAL AND COMMUNITY TO IMPROVE POPULATION HEALTH

October 18, 2012





#### **Learning Objectives**

- Increase understanding of the goals of clinical initiatives in the Community Transformation Grant (CTG)
- Be able to discuss the impact of community on health equity
- Be able to describe ways to engage and assist health care providers in their role as advocates and "champions"
- Increase understanding of possible areas for collaboration and partnership to improve population health





#### Goals of the CTG

- Reduce death and disability from cardiovascular disease (CVD) by 5%,
- Reduce obesity by 5%
- Reduce tobacco use by 5%





#### CTG COMMUNITY HEALTH CENTERS (CHCs)

Middlesex County:

Cambridge Health Alliance - Windsor Street HC Edward M Kennedy CHC - Framingham Lowell Community Health Center

8-County (Phase 1):

Plymouth County

**Brockton Neighborhood Health Center** 

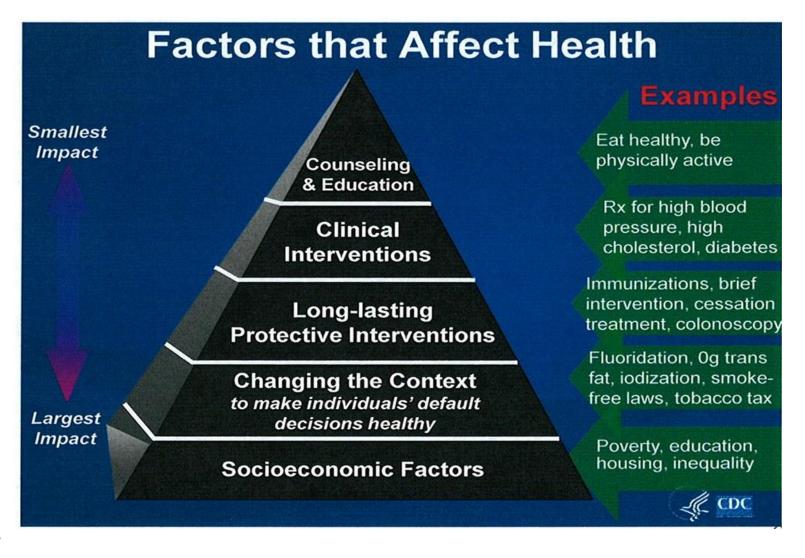
**Barnstable County** 

Harbor Community Health Center – Hyannis

Outer Cape Community Health Center





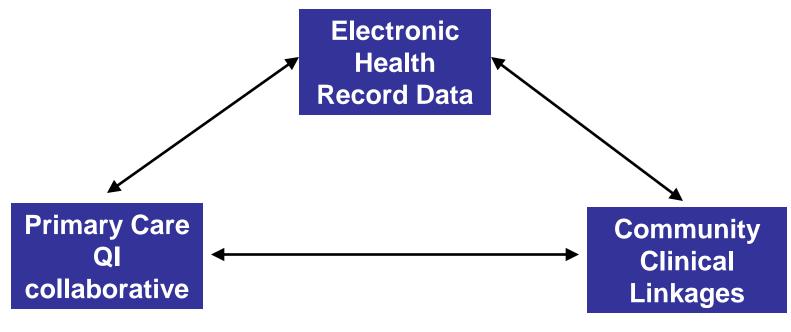






#### **Clinical Interventions Goal**

To improve clinical outcomes for people with or at risk for chronic disease by implementing clinical systems change and enhancing linkage to community resources.







#### **Electronic Health Record Data**

- Expand/enhance monitoring and clinical data reporting systems to look at populations of patients in addition to individual patients over time.
- EHR data transmission from CHCs to MDPH
  - Use encounter-level, de-indentified clinical data to create provider feedback reports with actionable information for care teams.





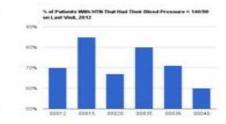


#### Provider #00020

#### Blood pressure screening& Control:

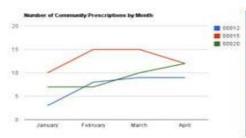
90% of patients had their blood pressure recorded on their last visit.

70% of patients with hypertension had their blood pressure <140/90 on last visit. (National Average: 64%, MA Rate: 71%)



#### Health Equity Focus

80% of your patients with last documented BP > 140/90 indicated Spanish as preferred language



#### Community Prescriptions (Community Rx):

You wrote 12 Community Rx this month.

8 of your patients with prescriptions contacted the CDMS program at Mitchell Heights Housing or the Lifestyle Coaching in Fall River

#### Recommendations:

Based on this report, your target for improvement is:

> BP control for patients identifying Spanish as preferred language





#### **Quality Improvement Coaching**

Assist and support practice teams to:

- Improve the collection of accurate data on populations of patients
- Use data to identify gaps and inequities in care and prioritize areas for improvement
- Implement changes using rapid cycle improvement (PDSA) model
- Use data to evaluate system change
- Spread and sustain successful system changes





## **Enhance linkages between Mass in Motion initiatives and clinical services**

Developing and implementing a bi-directional communication plan that actively links patients, primary care providers and participating community agencies

Community Rx



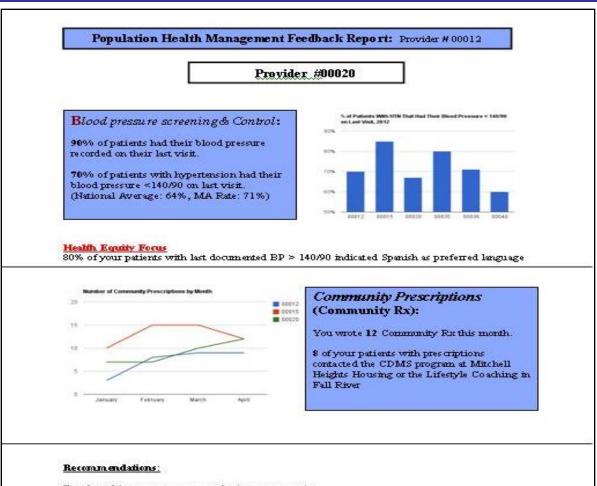












Based on this report, your target for improvement is:

> BP control for patients identifying Spanish as preferred language





Are there other community resources that would be valuable to include in a Community Rx?







## Primary Care Collaborative Reaching for Excellence PC-CORE

#### In development:

- ➤ Bi-monthly technical assistance/sharing calls
- ➤ Annual Learning Sessions
- ➤ Website/server with resources
- Listserv
- **≻**Newsletter
- Train-the-Trainer toolkit for practice-based QI champions





Joanna Kreil, MSW, MPH, LCSW

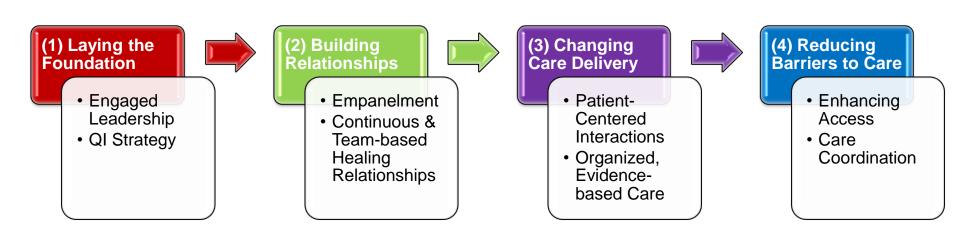
Quality Initiatives Manager

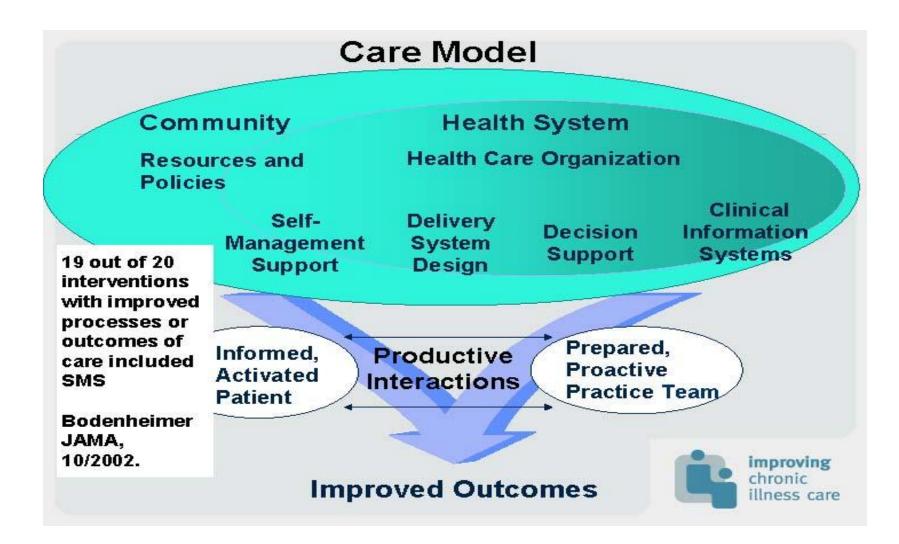
Massachusetts League of Community Health Centers

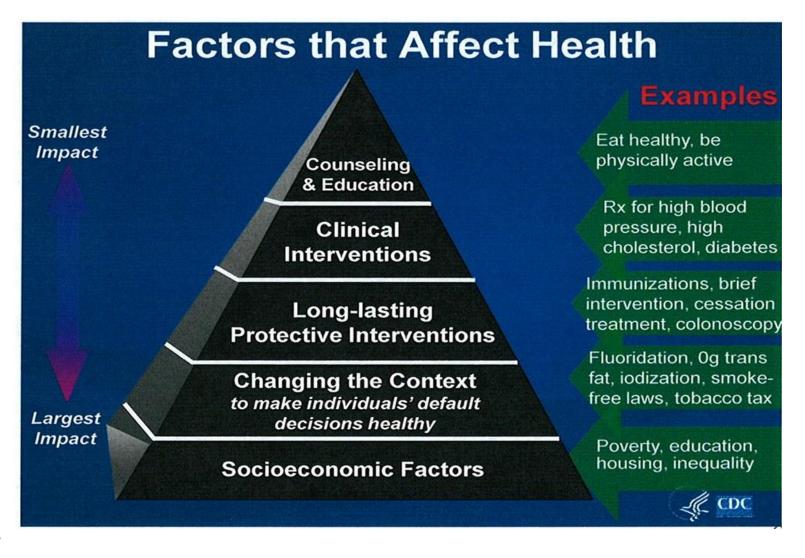




## Change Concepts, Safety Net Medical Home Initiative, Qualis Health











#### **Changing the Context**

Community health centers work with their Mass in Motion initiatives preventing and controlling chronic diseases by:

Identifying a clinical champions at the health center who will work with Mass in Motion coalition





#### Why Health Care Providers as Champions?

- Understanding of medical issues
  - Have an important, relevant, personal or professional story to tell
  - Know the facts (data) and where to find them 0
  - Leverage expertise—theirs and others
- Understanding of health social determinants
  - Ability to speak for their patients (who might be voiceless children, adults and families)
  - Personalize an issue by drawing on years of experience working 0 with patients.
- High public trust: credible source of information

Networks—with other advocates and with decision-makers





#### **Challenges**

- Those with a more clinical focus may not be familiar with community or environmental influences that impact their patients abilities to make healthy choices.
- They may not be aware of the terminology used in community advocacy, such as food deserts, the built environment or complete streets.
- Physicians and other clinicians will have limited time available for day time meetings, making it critical to identify key roles and actions that fit their interests and schedules.





Have you ever collaborated with a member of the health care team (MD, RN, RD, CHW) in your community work?







#### **Working with Healthcare Professionals**

Sidney L. Liang, MPA

**MiM Grant Coordinator** 

**Director, SEARCH Program** 

**Lowell Community Health Center** 





#### **Working with Healthcare Professionals**



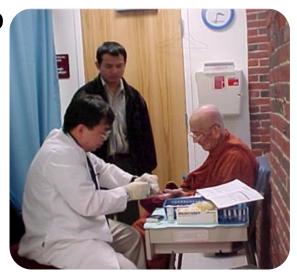
#### **Challenges/Frustrations:**

- Common grounds (challenges/successes)
- Understanding roles and responsibilities (health care providers/CHWs (advocates)
- Perceived Barriers (languages, educations, drives, interests)-Don't assume.
- Time: No one has time.
- Trust: can I trust this staff with my patients?
- Communications or lack thereof

#### **Working with Healthcare Professionals**

#### Some Methods of working together:

- Look for a champion in your cause
- Introduce yourself-build partnership
- Be Patience/Understanding
- Reinforce Communications
- Change and adapt to situations
- Acceptance



What are some of the important, unique roles that healthcare professionals can play in your Coalition's work?







#### Mass in Motion, Community Transformation Grants:

#### Ways to Involve Health Care Professionals

#### He/she can:

- Provide community education programs
- ✓ Serve on local board
- ✓ Write letters-to-the-editor
- ✓ Participate in local health fairs
- Testify before local and state officials about an issue of concern
- ✓ Participate on radio or TV programs/interviews
- ✓ Volunteer in schools, community or governmental organization.
- Meet with elected officials about health concerns
- ✓ Work as part of a community





Small asks can provide the open door for an otherwise busy physician to get involved. Even one hour can make a difference: ask if he or she can present at a local event or meet with local planning board.





#### Mass in Motion, Community Transformation Grants:

#### **Tips to Initiate Your Partnership**

- ✓ Share both what your coalition stands for and how you do the work you do. This will enable the healthcare professional champion to assess if the fit is right.
- ✓ Develop a short list of how a healthcare professional champion can be a resource for your coalition.
- Research which healthcare professional associations are closest to your coalition, their experience in community health advocacy.
- ✓ Create a plan to recruit healthcare professionals as champions.
- ✓ When you meet with healthcare professional organizations and prospective healthcare professional advocates, have written materials that describe your organization, its mission and focus on health promotion.



✓ Develop a set of questions to begin your conversation about potential partnership.



#### Mass in Motion, Community Transformation Grants

"The normal physician treats the problem; The good physician treats the person; The best physician treats the community."

#### Chinese proverb

Peters K & Henley E. Acting on synergies between clinic and community strategies to improve preventive medicine. J of Family Practice 2004 (53)12



#### Adapted from:

Be our Voice. Community Based Organization and Healthcare Professional Partnership Guide. *National Initiative for Children's Healthcare Quality (NICHQ)* 

Mobilizing Healthcare professionals as community leaders in the fight against childhood obesity. Advocate resource guide Pilot may 2011.

http://www.nichq.org/advocacy/





Thank you

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 After this webinar, do you feel more comfortable working with health care providers?



 Are there other resources that would help you in reaching out to health care providers in your community?



