

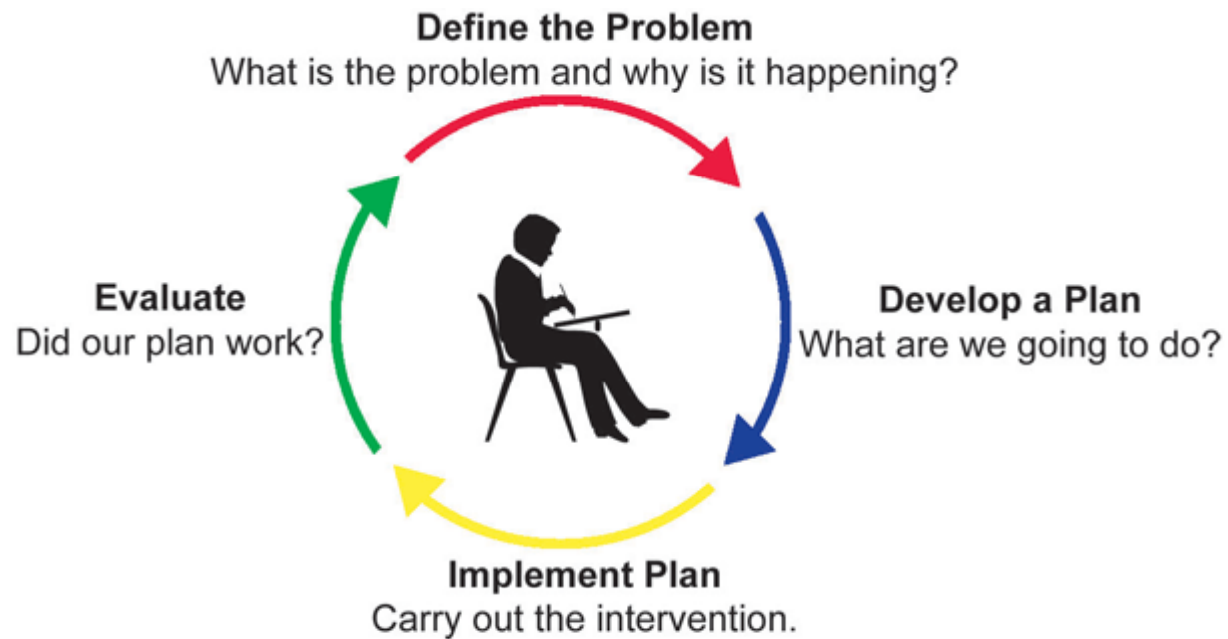


# Understanding and improving activation in high-risk patients

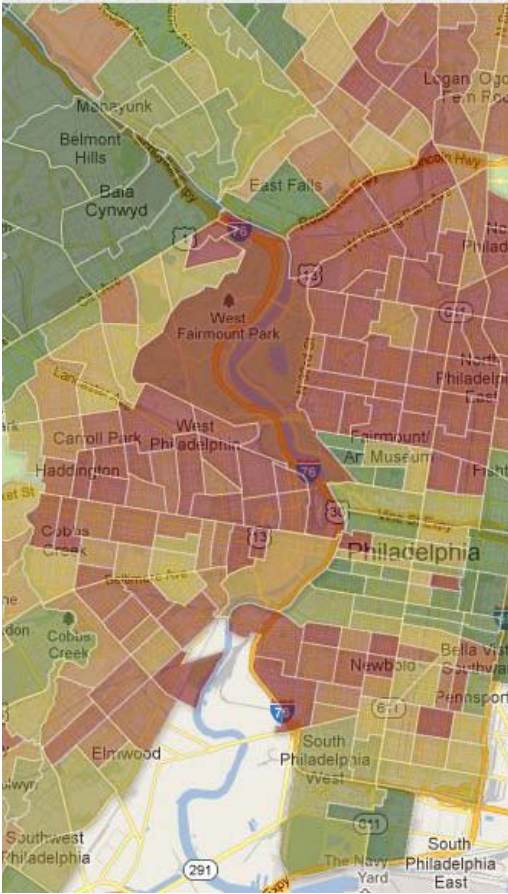
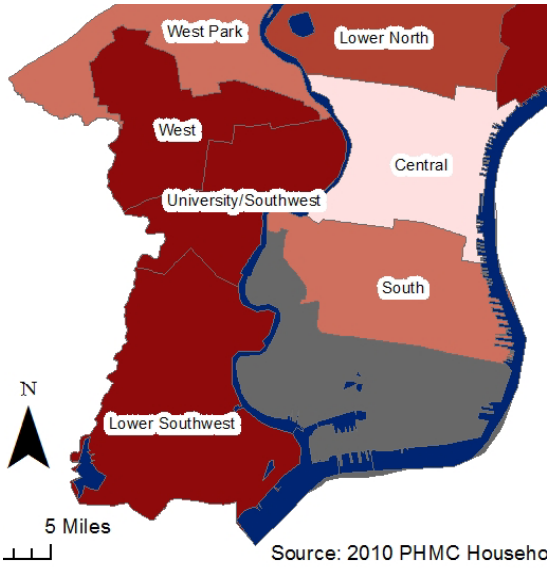
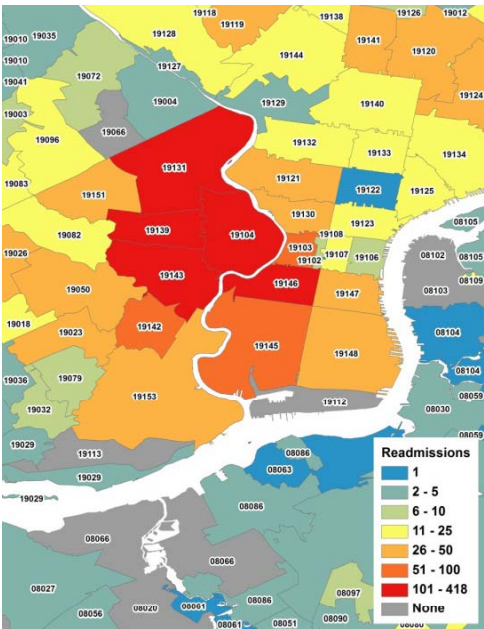
Shreya Kangovi, MD, MS  
Penn Center for Community Health Workers  
November 6th, 2013



# Outline....



# The problem



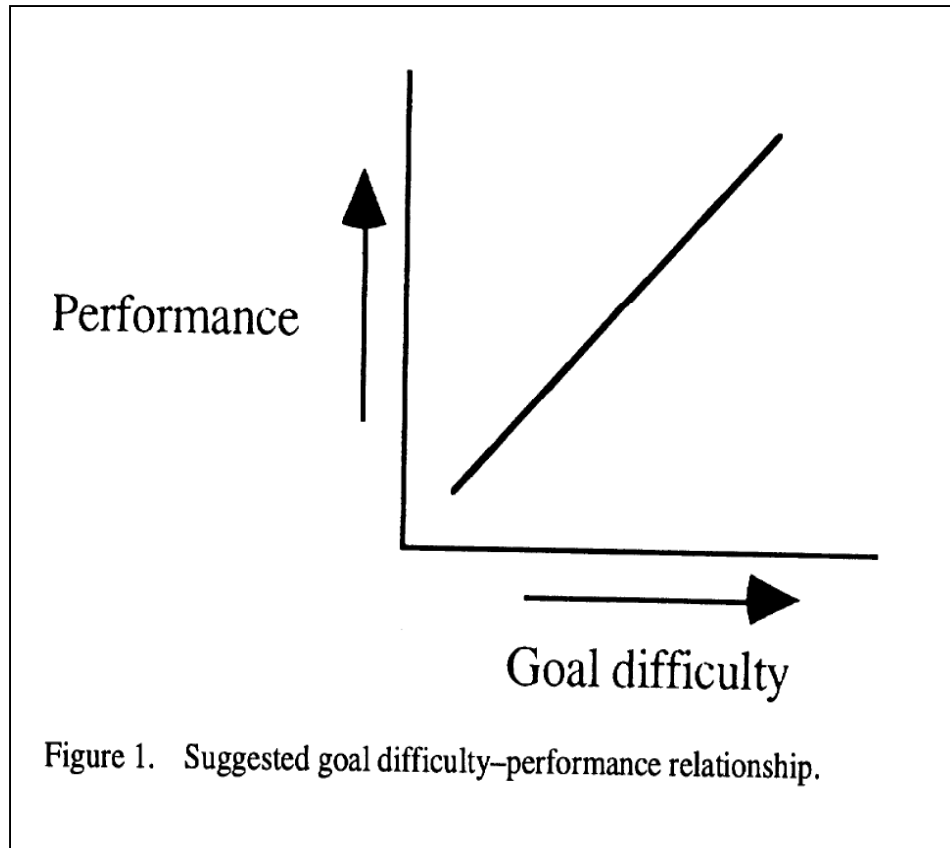
# The story

- *“They can give you advice, like here’s the kind of medicine you need. But they don’t really know how it works in the real world.”*
- *“I can’t get what I need from the clinic so I have to go to the ER.”*
- *“Set up to fail.”*

# The story

- *“They can give you advice, like here’s the kind of medicine you need. But they don’t really know how it works in the real world.”*
- *“I can’t get what I need from the clinic so I have to go to the ER.”*
- ***“Set up to fail.”***

# Goal-setting



## Exceptions:

1. Unattainable
2. Complex/distal
3. Goal conflict

# Cycle of deactivation

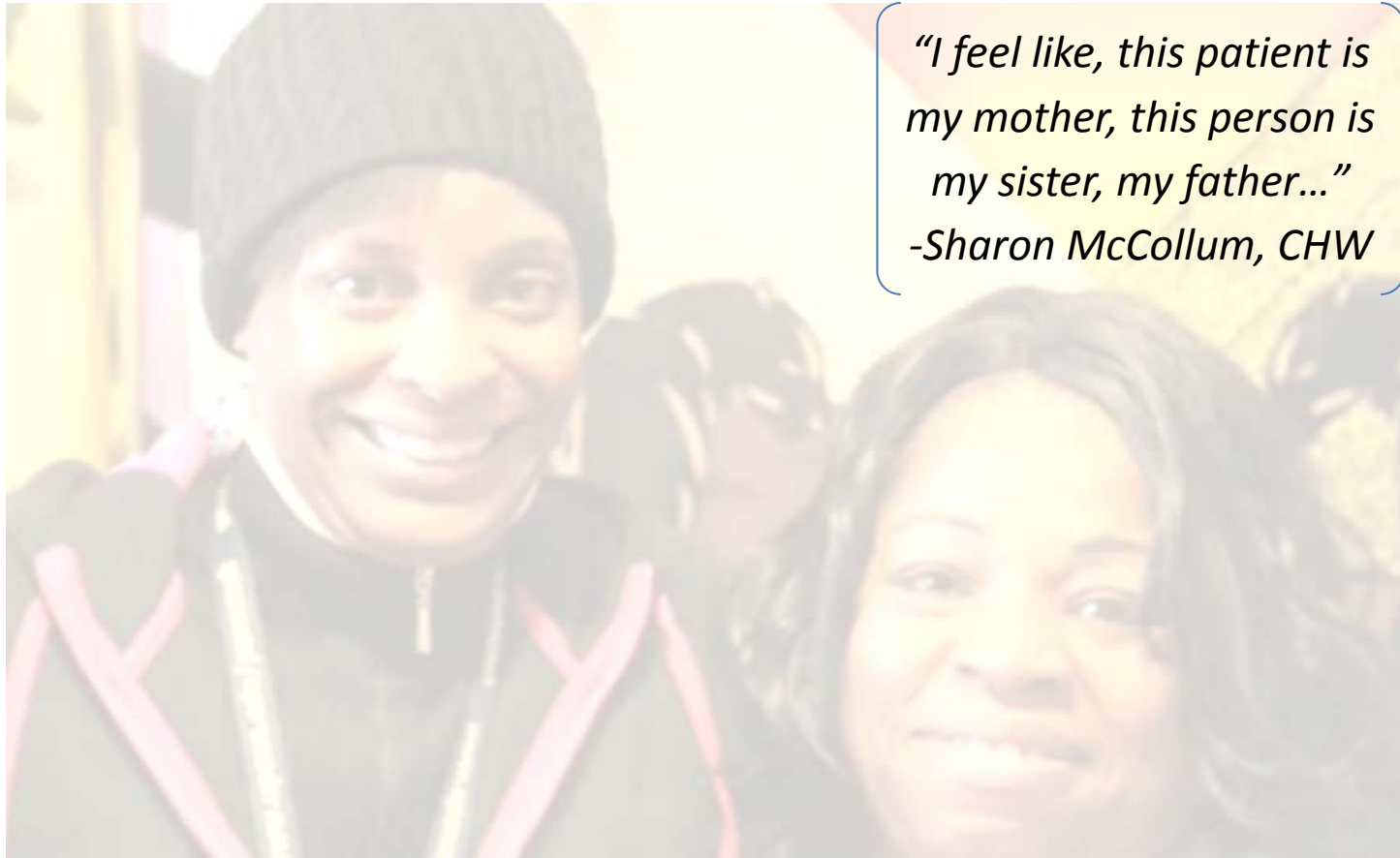


# Solutions

<b>Problems</b>	<b>Intervention Design</b>
Disconnect from traditional healthcare	Community Health Workers
Barriers to primary care	Patient-Centered Medical Home
Cycle of deactivation	Goal-setting and achievement



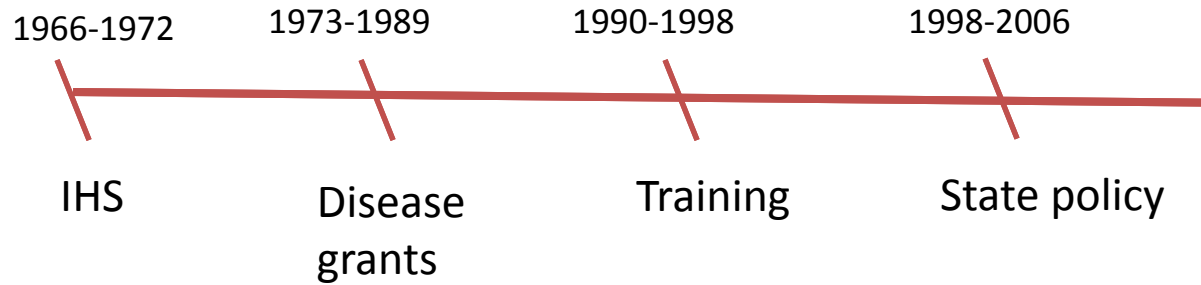
# Who is a CHW?



# Role vs. Identity

- Navigators, health coaches, advocates, care coordinators, case managers
- Both role and identity may influence activation

# Community Health Workers



## 2013: Health Systems

- Recruitment
- Work practice
- Integration
- Patient, not disease-centered
- High-quality evidence

# IMPACT

*(Individualized Management Towards  
Patient Centered Targets)*

# Design Map

Theme	Intervention	Requirement for Community Health Worker	
		Traits	Skills
<b><u>1. Establishing a relationship:</u></b> Patients wish to establish a relationship with a health care provider to whom they could relate.	CHW establishes a relationship	Community member who is non-judgmental, discreet and reliable	CHW certification and privacy training
<b><u>2. Patient goal-setting:</u></b> Patients suggested tailoring support to their needs and goals.	CHW helps patient to create an individualized action plan, or 'Pathway' for achieving each goal	Listens more than he/she talks, insightful problem solver, organized	Qualitative interviewing, Goal-setting theory, Pathways approach
<b><u>3. Goal-alignment :</u></b> Patient and provider goals are misaligned	CHW helps align patient and team goals	Confident but respectful	SBAR, interdisciplinary rounds
<b><u>4. Goal-support:</u></b> Patients needed tailored support to address "real-life" issues in order to stay healthy.	CHWs provide tailored support towards helping patients achieve their Pathway goals using phone calls, text messaging and visits.	Creative, calm, knows limits, non-directive, compulsive about patient care	Training to address psychosocial, navigation, neighborhood, resource-related, and health behavioral issues reported by patients
<b><u>5. Primary Care:</u></b> Patients face so many barriers to PCP follow-up that they go to hospital	CHWs advocate and coach patients to get access within PCMH	Pushy, polite, punctual. Able to end relationships and transition responsibility.	Coaching for PCP visits, navigation to/within PCMH

# Recruitment, Hiring & Training



## **IMPACT PROJECT JOB ANNOUNCEMENT:** **COMMUNITY HEALTH WORKER**

*Are you a trusted member of your community?  
Have you ever helped a family member or friend to get health care services?  
Are there things harming your community's health that you feel passionate  
about changing?*

*...If the answer is yes, this may be the job for you!*

**POSTING DATE:** November 5, 2012

**CLOSING DATE:** November 30, 2012

**JOB DATES:** January 28<sup>th</sup>, 2013-June 15<sup>th</sup> 2014

**LOCATION:** The Hospital of the University of Pennsylvania, Penn Presbyterian Medical Center, Penn Internal Medicine Associates, Edward S. Cooper Practice of General Internal Medicine, 3701 Market Street, Philadelphia PA 19104.

**IMMEDIATE SUPERVISOR:** Casey Chanton, MSW, IMPACT Project Manager

**SALARY RANGE:** \$14-15/hr +benefits

### IMPACT TRAINING SYLLABUS

HELPING OUR NEIGHBORS  
MAKE THE TRANSITION FROM HOSPITAL TO  
HOME



#### PART ONE: PRINCIPLES OF COMMUNITY HEALTH WORK

- CHW: Roles and Competencies
- CHW Code of Ethics: Confidentiality and professional boundaries
- Conflict Resolution: Verbal de-escalation and safety
- Health Care System: Providers and payers
- Basic Health Concepts: Common diseases

#### PART TWO: THE PATIENT JOURNEY

- Hospital: Tour, introduction to hospital personnel and discharge summaries
- Home: Patient home visit, and training on home visit safety and conduct
- Clinic: Tour of a community health center and introduction to personnel

#### PART THREE: THE CHALLENGES PATIENTS FACE

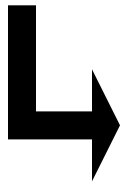
- Clinical Challenges: Basic Life Support training and knowing limits
- Mental Health: Alarm signs, counseling and local mental health resources
- Substance Abuse: Community-based addiction resources
- Insurance: Helping beneficiaries understand their insurance
- Community Resources: Community-based organizations
- Motivational Interviewing: Overview and role-playing

#### PART FOUR: CONNECTING PATIENTS WITH PRIMARY CARE

- PCP Visit: coaching patients on PCP follow-up visit (medication reconciliation and feedback)
- Patient Navigation: Referrals, prior authorizations and pre-certifications
- Ending the Client Relationship: Transitioning patient to PCP

# IMPACT

Set goals



Support



Connect



# CHW Workflow: Patient-centered Pathways

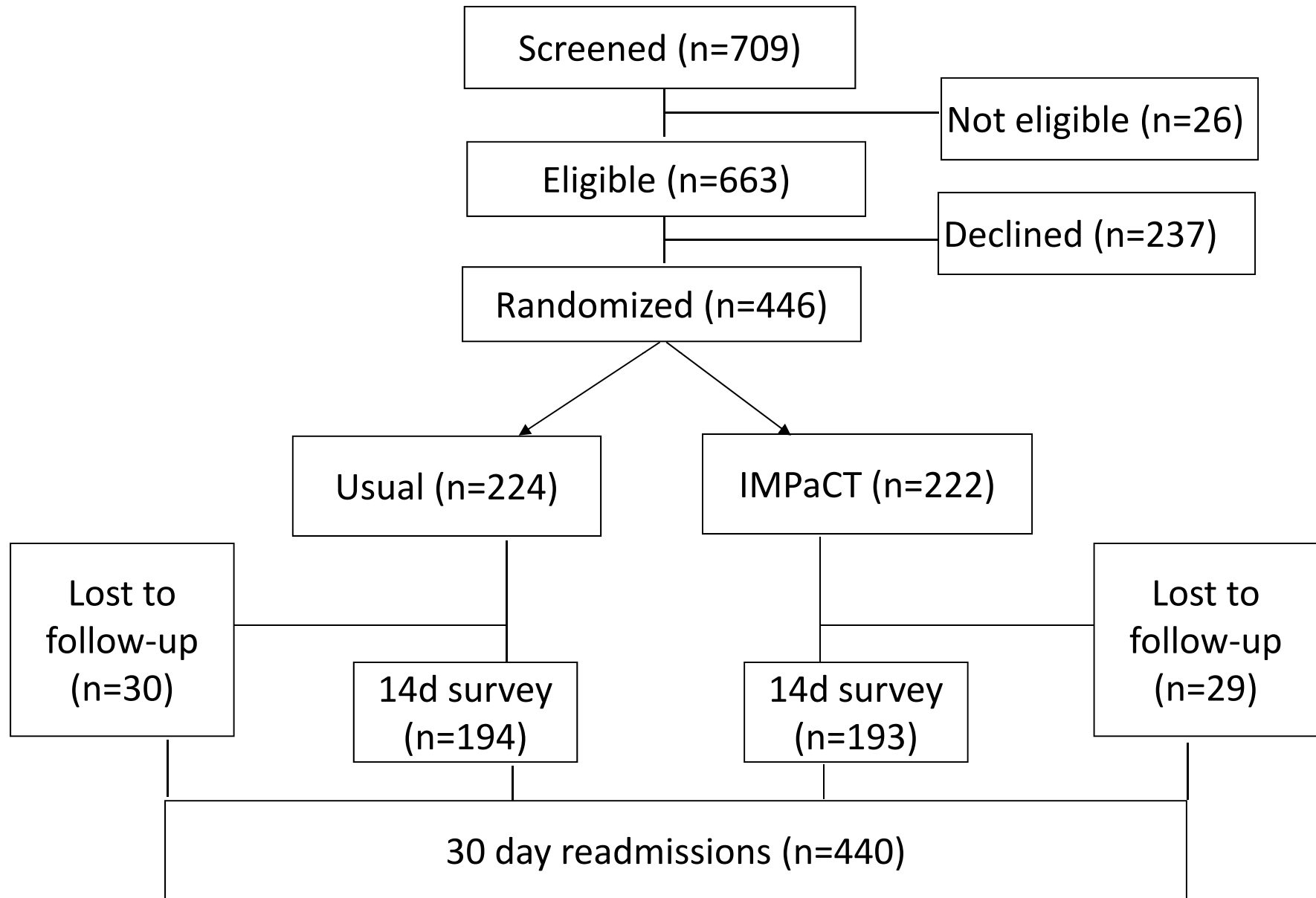
Pathway Component	Patient Info
Long term goal	Get my HgbA1C down to 8
Short-term goal: Let's make this real concrete so we know what exactly you want to achieve. What will it look like when you reach your goal?	Attend nutrition class at the YMCA
Confidence: How confident are you that you'll be able to reach this goal on a scale of 1-10?	7
Resources: What do you think we can use to help you with this goal?	-CHW knows nutritionist at YMCA -Sister already goes there
Plan: Ok ,what exactly do we need to do next?	[x]CHW will go with patient and her sister on Monday to join YMCA on 52 and Chestnut to sign up for nutrition class
Goal Achieved?	Yes: patient attended nutrition class at YMCA



# Cycle of activation

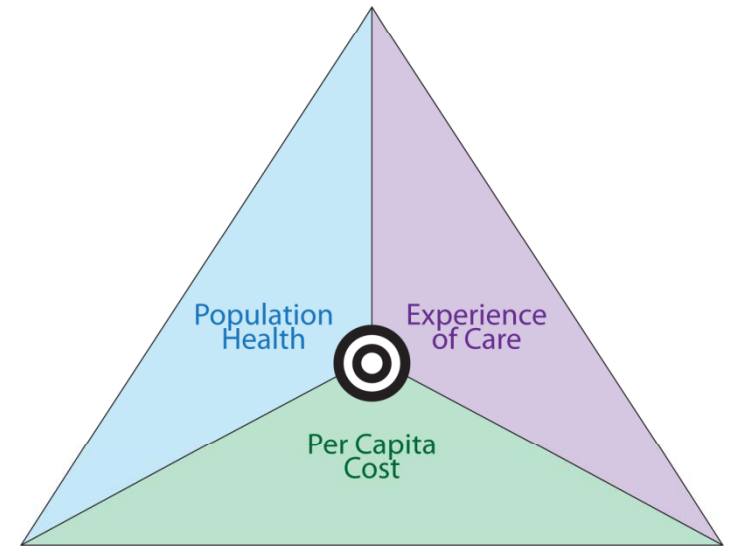


# Randomized Controlled Trial (n=446)

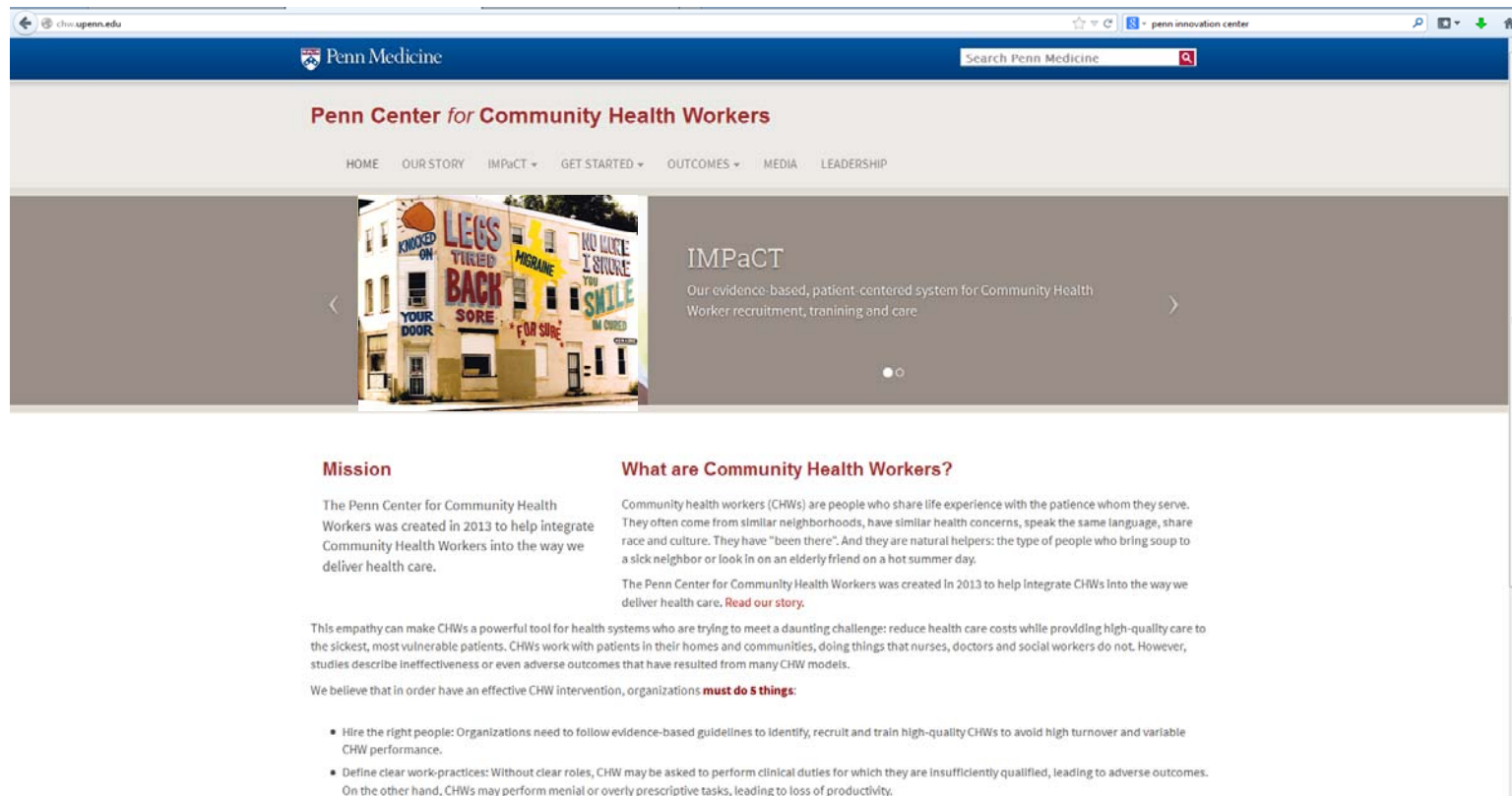


# Outcome Measures

- Primary care access
- Quality of communication
- Self-rated health
- Satisfaction
- Patient activation
- Medication adherence
- 30-day readmission



# Next Steps




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## Penn Center for Community Health Workers

HOME OUR STORY IMPaCT GET STARTED OUTCOMES MEDIA LEADERSHIP



### IMPACT

Our evidence-based, patient-centered system for Community Health Worker recruitment, training and care

#### Mission

The Penn Center for Community Health Workers was created in 2013 to help integrate Community Health Workers into the way we deliver health care.

#### What are Community Health Workers?

Community health workers (CHWs) are people who share life experience with the patients whom they serve. They often come from similar neighborhoods, have similar health concerns, speak the same language, share race and culture. They have "been there". And they are natural helpers: the type of people who bring soup to a sick neighbor or look in on an elderly friend on a hot summer day.

The Penn Center for Community Health Workers was created in 2013 to help integrate CHWs into the way we deliver health care. [Read our story.](#)

This empathy can make CHWs a powerful tool for health systems who are trying to meet a daunting challenge: reduce health care costs while providing high-quality care to the sickest, most vulnerable patients. CHWs work with patients in their homes and communities, doing things that nurses, doctors and social workers do not. However, studies describe ineffectiveness or even adverse outcomes that have resulted from many CHW models.

We believe that in order to have an effective CHW intervention, organizations **must do 5 things**:

- Hire the right people: Organizations need to follow evidence-based guidelines to identify, recruit and train high-quality CHWs to avoid high turnover and variable CHW performance.
- Define clear work-practices: Without clear roles, CHW may be asked to perform clinical duties for which they are insufficiently qualified, leading to adverse outcomes. On the other hand, CHWs may perform menial or overly prescriptive tasks, leading to loss of productivity.

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Thank you

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