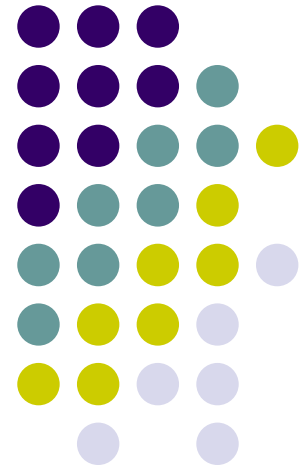


A Prescription for Health Promotion: Joining Forces with Health Care Providers

Lura Hawkins, CA Association of Physician Groups
June Simmons, Partners in Care Foundation
Janet Tedesco, CA Department of Aging



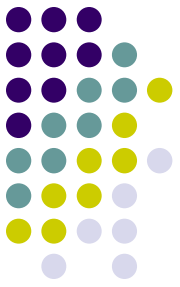
Learning Objectives



- Learn specific strategies to engage the health care system in Chronic Disease Self-Management Program (CDSMP) implementation
- Learn specific models of implementation that are effective within different types of health care organizations
- Understand how successful strategies can be replicated



California Evidence-Based Initiative



- Brings evidence-based health promotion programming to community-based organizations
- CA Department of Aging awarded grant from U.S. Administration on Aging in 2006
 - Supplemental sources of funding include: Atlantic Philanthropies, California Wellness Foundation, Kaiser Permanente, and National Council on Aging



California Evidence-Based Initiative

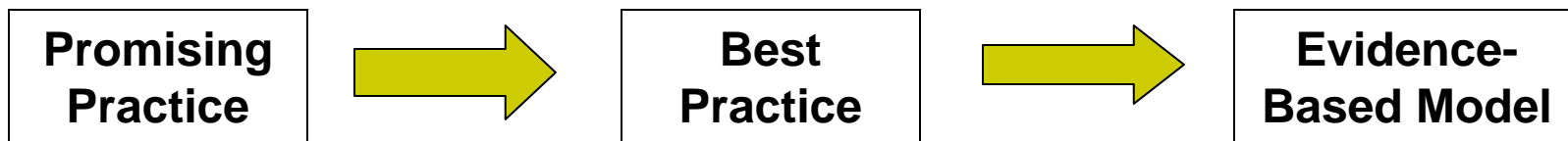


- American Recovery and Reinvestment Act (ARRA) Funding
 - \$27 million available for up to 50 states/territories
 - Dramatically increase program reach throughout the United States
 - Proposal submitted February 2010





Evidence-Based Programs



- Supported by extensive research and have been proven to work
- Clear, structured, detailed description of the program
- Have measurable outcomes
- Easier to market the program and engage partners
- Increases effective use of resources to enhance programming



AoA Approved Evidence-Based Programs

View more at www.healthyagingprograms.org



- **Chronic Disease Self-Management Program**
- **A Matter of Balance**
- **Medication Management Improvement System**
- **Healthy Moves for Aging Well**
- Enhance Wellness
- Enhance Fitness
- Healthy IDEAS or PEARLS



California's Partnership for Health Promotion



- Collaborative effort among:
 - California Department of Aging
 - California Department of Public Health
 - Partners in Care Foundation
 - Area Agencies on Aging across the state
 - Various other non-profit and health care organizations



California's Partnership for Health Promotion



- Non-profit and healthcare organizations include:
 - Area Agencies on Aging
 - California Association of Physician Groups/
members
 - Kaiser Permanente of Southern California
 - Catholic Healthcare West
 - Others



Role of Partnering Organizations



- California Department of Aging
 - Received AoA grant funding and distributed to agencies at local, community level
 - Supports and encourages statewide adoption of CDSMP
 - Develops goals and objectives for program in California
 - Monitors activities of agencies to ensure goals/objectives are met



Role of Partnering Organizations



- Partners in Care Foundation
 - Statewide program office for CA Departments of Aging and Public Health
 - Provides technical assistance to community partners offering CDSMP
 - Secures additional funding to expand reach of CDSMP

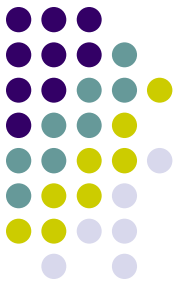


Role of Partnering Organizations



- California Association of Physician Groups
 - Non-Profit Trade Association with 150 medical groups and independent physician associations as members
 - Creates relationships between medical industry & community-based organizations
 - Recruits practices to adopt DCSMP





Chronic Disease Self-Management Program

An Evidence-Based Health Promotion Program



Chronic Conditions: The Scope of the Problem



- Chronic diseases affect the quality of life of 133 million Americans (nearly 1 in 2 adults)*
 - More than 14 million in California**
- Chronic diseases represent more than 80% of the health care dollar***
- 80% of Americans 65 and older have at least one chronic condition*
 - 50% have at least two chronic conditions

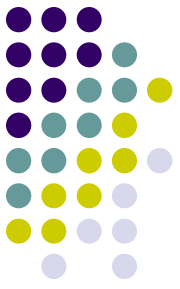


*Centers for Disease Control and Prevention, 2009

**California HealthCare Foundation, 2006

***Robert Wood Johnson Foundation, 2004

Chronic Conditions: The Scope of the Problem



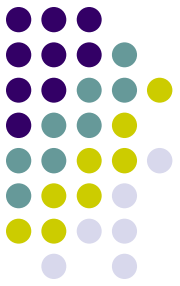
- Chronic conditions account for:
 - 76% of inpatient hospitalizations*
 - 88% of all prescriptions filled*
 - 72% of all physician visits*
 - 7 out of 10 deaths each year in the US**
- 99% of Medicare spending is on behalf of beneficiaries with at least one chronic condition***



*Johns Hopkins University, 2003

**Centers for Disease Control and Prevention, 2009

***Thorpe & Walker, 2010



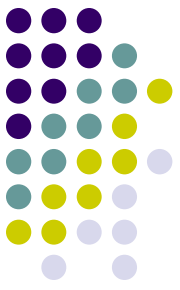
High Costs and Poor Outcomes

- Spend twice as much as any other developed country, yet ranked 37th in the world on health outcomes*
- 46 million uninsured**
- Little prevention/lots of expensive late care
- Growing role for community and family caregiving and self-care



*World Health Organization, 2000

**Henry J. Kaiser Family Foundation, 2008



CDSMP: About the Program

- Award-winning program developed by Stanford University
- Designed to help people better manage chronic health conditions and live a happier, healthier life
- Consists of six 2½ hour sessions led by 2 trained leaders
- Groups are small (8-16 people)
- Highly scripted and structured





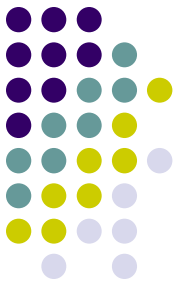
Workshop Overview

- Managing symptoms
- Dealing with difficult emotions (frustration, anger, pain)
- Improving communication (family, friends, doctors)
- Relaxation techniques
- Tips for eating well
- Medication "how to's"
- Effective problem-solving
- Setting weekly goals

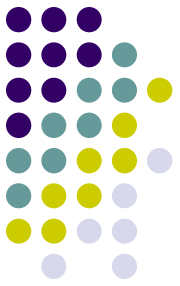


Target Population

- Have at least 1 chronic condition
 - Arthritis, diabetes, heart disease, depression, chronic pain, etc.
- Family members, friends, or caregiver of someone with a chronic condition can also attend
- Must have stamina to attend 2 ½ hour class
- Must have cognitive function to participate
- Diverse adults in underserved communities



Goals of a Self-Management Program



- Participants learn how to identify problems
- Participants learn how to act on problems
- Participants learn problem-solving skills related to chronic conditions
- Participants learn how to generate short-term action plans



Participant Health Effects

- Greater energy/reduced fatigue
- Increase in exercise
- Better psychological well-being
- Enhanced partnerships with physicians
- Improved health status
- Decrease in pain
- Decrease in depression
- Decrease in shortness of breath
- Improved quality of life
- Greater self-efficacy and empowerment



Health Care Utilization Effects



- Fewer outpatient visits
- Fewer emergency room visits
- Fewer hospitalizations
- Fewer days in hospital
- Results in more appropriate utilization of health care resources
 - Health care needs addressed in outpatient settings vs. ER visits and hospitalizations



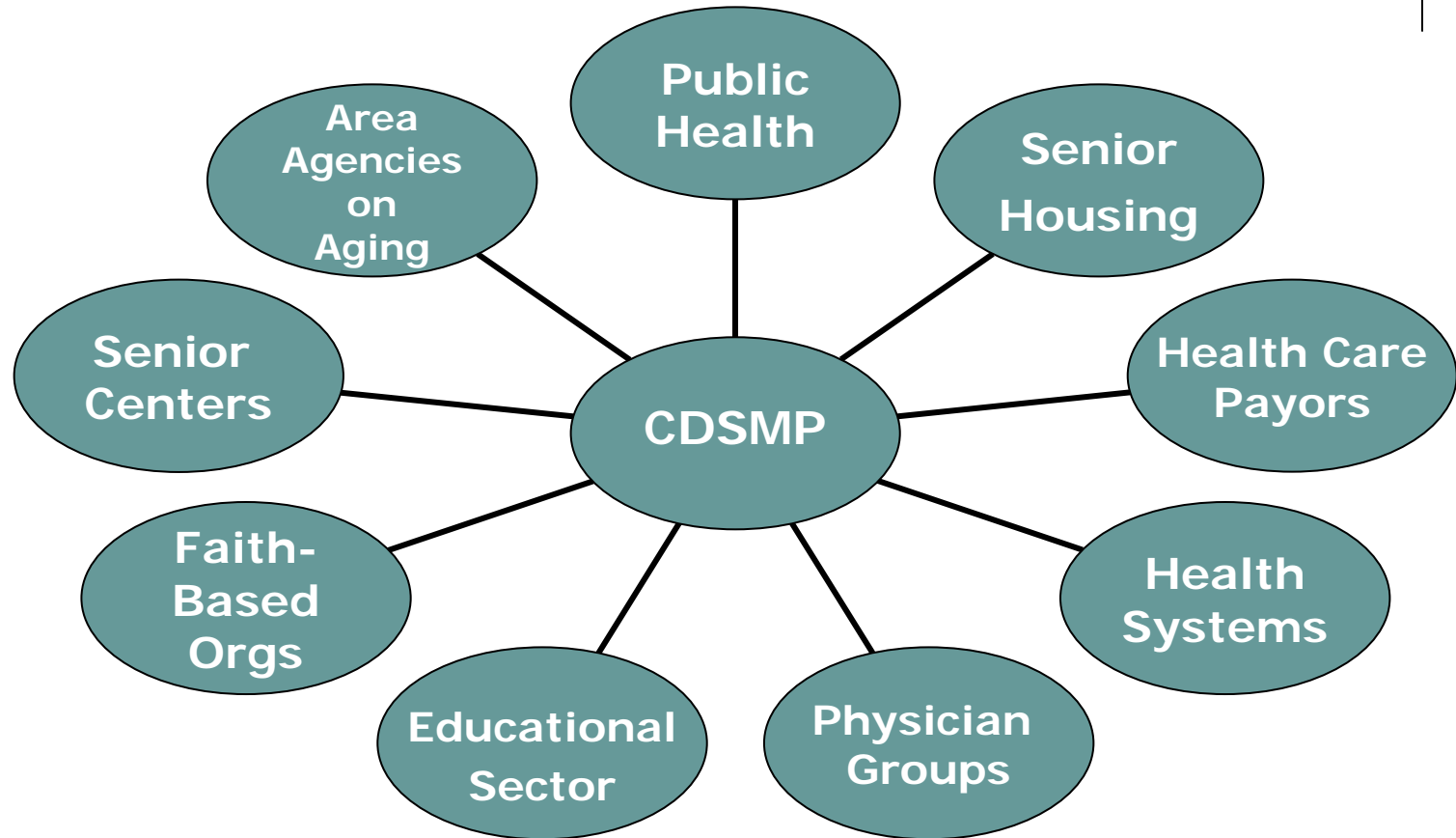
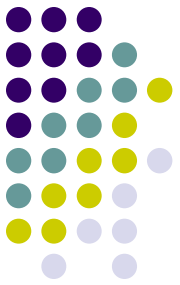
Health Care Utilization Effects



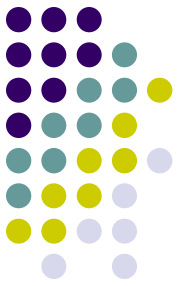
- CDSMP saves enough money through reductions in health care expenditures to pay for itself within the first year!



Target Sectors for Program Engagement

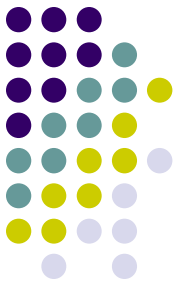


Advancing Program Reach



- Outreach strategies include:
 - Hosting program at senior center, senior housing site, library, church, synagogue, or other community-based site
 - Participating in community events such as health fairs
 - Marketing program at community locations such as grocery stores and laundromats
 - Utilizing media sources such as television, newspaper, and radio
 - **Collaborating with health care sector**





Collaborating with the Health Care Sector



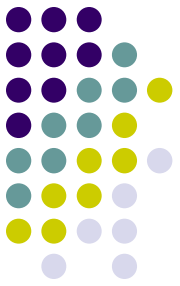
California Association of Physician Groups (CAPG)



- Non-profit Trade Association
- Represent approximately 150 physician organizations
 - 59,000 physicians
 - 15 million Californians
- Nation's largest professional association representing physician groups practicing in managed care



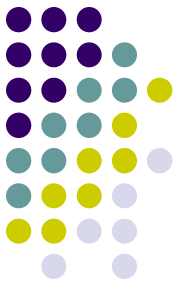
CAPG's Mission



- CAPG is the “Voice of Organized Medicine”
- Committed to the delivery of coordinated, quality, affordable, and accessible healthcare
- Advocacy, Training, and Education Workgroups and Committees



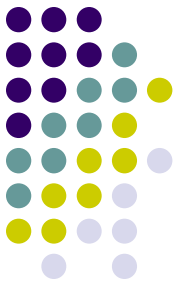
Who Comprises the Health Care Sector?



- Health care organizations include:
 - Physician groups, independent physician associations (IPA's), community clinics, health plans, hospitals

- Health care providers include:
 - Physicians, nurses, case managers, health educators, discharge planners, medical assistants, front office staff, physician's assistant, others

Why Engage the Health Care Sector in CDSMP?



- Impacts patient health
- Creates engaged/activated patient
- Augments other health care services
- Cost savings in a time of limited resources
- Health care professionals want to help their patients
- Promotes more appropriate utilization of health care resources

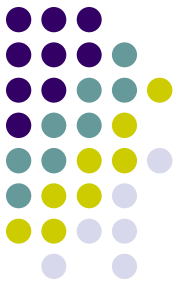


How to Engage the Health Care Sector



- Keep it simple and be prepared
 - Health care professionals have limited time
- Have research on program efficacy readily available
- Conduct presentations at meetings/conferences
- Use examples of settings similar to theirs
- Emphasize the increased quality of care and ROI

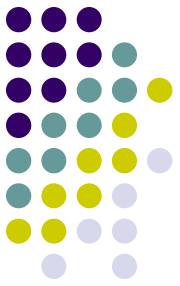
How to Engage the Health Care Sector



- Work through associations – product champions
- Partner with organizations who have established relationships with health care professionals (such as CAPG)
- Connect with office staff and other partnering professionals
- Have implementation tools in place (such as referral and feedback forms)
- Do not rely solely on physicians



Models of Implementation



- External model (partnership with community)
 - Orient health care professionals and other staff to program
 - Establish clear patient-selection protocols
 - Set up easy link for identified patients
 - Staff refer patients to program offered at community-based host sites
 - Must build network of host sites to offer program on a regular basis



Models of Implementation



- Internal model (hosted within organization)
 - Orient health care professionals and other staff to program
 - Establish clear patient criteria for program referral
 - Staff refer patients to program offered on-site
 - Can incorporate into health education, case management, etc.



External Model



- Advantages
 - Wider reach and impact due to involvement of community organizations
 - Ability to serve several health care organizations simultaneously
- Challenges
 - Need to engage several collaborative partners
 - Must ensure program is offered on a regular basis to meet referral demands
 - Increased complexity to manage ongoing process

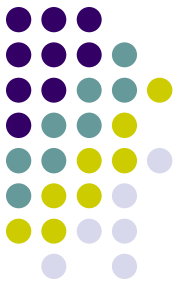


Internal Model

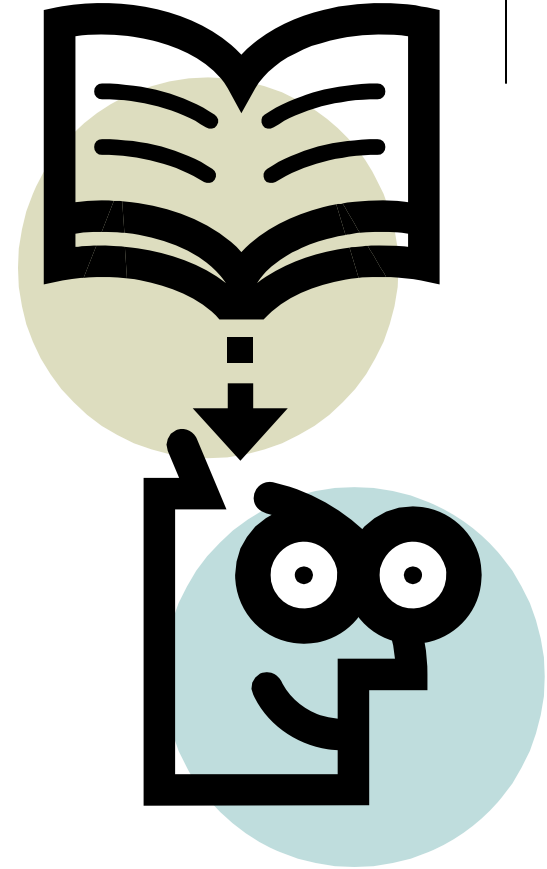


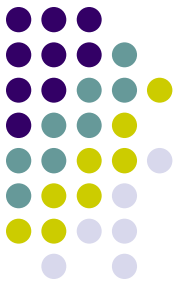
- Advantages
 - Program costs largely covered by adopting organization
 - Greater commitment from organization likely means a greater likelihood of program sustainability
- Challenges
 - Program may not be available to outside community members
 - Staff roles may change and program is no longer a priority





Best Practices



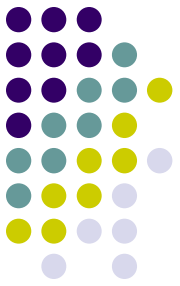


Kaiser Permanente

- Nation's largest non-profit health plan
- Participated in original research with Stanford University
- Offers CDSMP as a covered benefit for members
- Provides in-kind support via leader trainings and purchase of participant materials



Catholic Healthcare West



- Largest hospital system in California
 - CDSMP offered within eight of their hospitals
- Awarded grant funding to community-based organizations to expand program reach



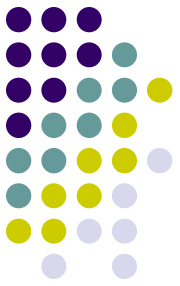
Facey Medical Group



- Serves over 100,000 members throughout the greater Los Angeles area
- Hired a part-time staff person dedicated to CDSMP
- Targeting patients diagnosed with depression and at least one other chronic health condition
- Exploring other collaborative community partnerships to enhance patient care



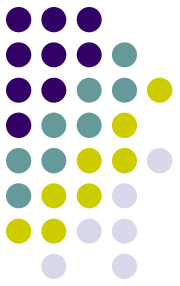
AltaMed Health Services



- FQHC serving over 48,000 families at 17 locations throughout Los Angeles County
- Care managers refer high-risk clients to CDSMP
- Workshops facilitated by community-based promotoras



Interest Among Health Plans



- Exploring pilots to determine and test how to build health plan/medical group partnerships
- Evaluation of results important
 - Impact on health measures such as heart disease and diabetes
- CA Department of Managed Health Care interested in advancing clinical outcomes

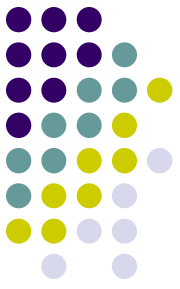


Activity Among Health Plans



- Kaiser Permanente
- National Health Service (United Kingdom)
- Group Health Cooperative of Puget Sound
- Cigna (Arizona)
- Santa Clara Family Health Plan
- L.A. Care Health Plan



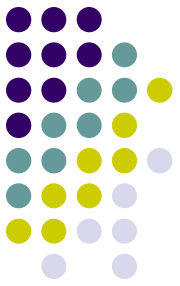


Must Seize the Opportunity

- Time of potential transformation
- Must rise to the occasion
- Going to scale is key
- Will take more time than we planned
- Need commitment at all levels
- Well worth the journey



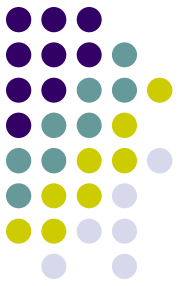
Health Promotion Movement



Health Care Reform: Change is on the Horizon!



Transforming Health Care



- Individual and organizational investment in self-empowerment to avoid/manage chronic health conditions
- Mainstreaming access to health promotion tools
- Building a platform to disseminate programs that transform health and quality of life
- This is a **MISSION** not a **PROJECT**



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