Partners Rises to COVID-19 Challenge

Like every other business, Partners is dealing with the spread of COVID-19. While it has affected the way we work, I am pleased to say we are actively meeting the needs of our clients.

How is this happening?

As you may understand, Partners is a safety net provider with several thousand frail, elderly or medically complex and disabled people under our care. For these people we provide long term services and support (LTSS) care coordination to assure that they remain safe.

Since we are considered an essential service provider, it is necessary for us to keep our offices open on a limited basis, while at the same time honoring the need for social distancing that allows staff to shelter in place.

As we began our planning for the transition to working outside our offices, the Executive Team and I established three goals: to maintain essential organization functions, keep staff and all clients safe through remote work, and make sure that all are treated equitably in the process.

We were able to rapidly set up all our staff so they could “telecommute” and handle client management services telephonically. Within a day all 175 staff were dispersed to home, with arrangements for a core staff to rotate through the office and handle essential duties.

Fortunately, we were granted regulatory relief to use telephonic services in place of our usual face-to-face visits. This allows us to provide services to our clients, thus limiting their personal contacts and those of our staff. The result is both parties stay safe from infection.

One priority during the transition has been to ensure that staff connect regularly with the individuals in their care. During these telephonic visits staff are checking on what specific needs or problems exist that they then help resolve, such as delivering emergency food, ordering meds, or other, related concerns.

At an administrative level we are working closely with our funders to ensure the safety net stays as strong and are working to expand it in every way possible.

We are committed to ensuring continuity for the entire Partners Family – Staff, Board, Volunteers, and Clients. People are counting on us at every level. Based on what we have observed so far, I am confident we will meet – if not exceed – expectations.

Be safe,

June Simmons, President & CEO
and the Executive Team
Partners Forms Board of Councilors

On January 30, 2020, past honorees of Partners’ prestigious Vision & Excellence in Healthcare Leadership Award and other respected leaders gathered at the Jonathan Club in Downtown Los Angeles for the launch of Partners’ Board of Councilors.

This select group of top healthcare leaders, led by founding co-chairs Robert Lundy, Esq. and Lloyd Bookman, Esq. will serve as a high-level think-tank providing strategic review of Partners’ initiatives focused on the social determinants of health (SDOH) and insight as to how emerging areas may affect those initiatives. Topics of concern will focus on emerging issues that involve the delivery of care to individuals in the home or community such as artificial intelligence, emerging technology and platforms, and financing options.

Former Partners’ Board Member, Ted Schwab, led this meeting’s presentation titled “The Current and Future State of Affairs with Artificial Intelligence in Healthcare.” For the last two years, Schwab has led the introduction of Babylon Health into the United States. Babylon Health is the most successful artificial intelligence health care application in the world, operating in 23 countries, delivering medical advice to nearly 30 million people.

As founding members of this new and important group of highly placed advisors, the Board of Councilors will help shape the transformation of healthcare through a focus on the SDOH and offer advice in identifying individuals worthy of nomination to receive Partners’ Vision & Excellence in Healthcare Leadership Award.

From left to right: Robert Margolis, MD; Don Crane; June Simmons, MSW; Robert Tranquada, MD; Elaine Batchlor, MD, MPH; Cástulo de la Rocha; Allen Mathies, MD; Thomas Jackiewicz; Robert Lundy, Esq.; J. Mario Molina, MD; Steve Valentine; Paul Viviano
Meet the Partners in Care Team

For more than 20 years, Partners has been a significant change agent in the social determinants of health arena. We have been called a “powerful innovator,” a “leader of change” and a “source of charity for those most in need of help.” Our success is due to people who are passionate about making things happen and have the skills to bring ideas to fruition. Each issue we introduce staff and Board members who have helped shape Partners success.

Amanda Flaum
Senior Operations Executive
Partners in Care Foundation Board Member since June 2019

During her 20+ years in the health insurance industry, Amanda has consolidated large enterprise groups, turned around the performance of organizations lacking direction and focus, and delivered tens of millions of dollars in cost savings and efficiencies. Her expertise in strengthening organizational capabilities and influencing senior business leaders is invaluable to the C-suite, with these and her other leadership attributes serving as the driving force that has moved mission-critical strategic imperatives forward. As Vice President and Chief Operating Officer of Blue Shield of California’s Care1st Health Plan, she stabilized Care1st’s multibillion-dollar operations by introducing rigor, discipline, and structure to a business with few professional and sustainable operational systems and processes. Amanda earned master’s and undergraduate degrees from California State University, Northridge. She is a 2018 Women’s Leadership Forum graduate from Harvard Business School’s Executive Education Program.

Jennifer Heenan
Consultant, Healthcare Services Practice, Spencer Stuart
Partners in Care Foundation Board Member since June 2019

Jennifer Heenan is a consultant in Spencer Stuart’s Los Angeles office and a member of the firm’s Healthcare Practice. With 20 years of healthcare consulting, strategic planning, business development and marketing experience, Jennifer works with healthcare institutions across the continuum. She is a recipient of the firm’s prestigious Lou Rieger Quality Award for high quality work on behalf of her clients. Prior to joining Spencer Stuart, Jennifer spent 10 years with AMC Strategies, a Los Angeles-based consulting firm specializing in strategic planning for some of the most prestigious academic medical centers and schools of medicine nationwide. Jennifer is a graduate of the UCLA Jonathan and Karin Fielding School of Public Health, where she earned a Master of Public Health degree from the Department of Health Policy and Management. She also holds a B.A. in urban studies and planning from the University of California, San Diego.
“Luciana” is an 84-year-old woman living independently in La Crescenta and been a patient at St. Joseph Hospital suffering from chemotherapy induced neutropenia. Unfortunately for her, this was just the latest in a series of medical conditions afflicting her senior years.

The list is lengthy, making every day a complex series of treatments addressing a UTI, ongoing sleep apnea, rheumatoid arthritis, ovarian and breast cancer, hypertension, hyperlipidemia, hydronephrosis, hemorrhoids, severe hearing loss, ear disorder, diabetes type 2, degenerative arthritis of spine, chronic constipation, cataracts, back pain, and alopecia. One of these conditions by itself would be a trial under any circumstance.

Luciana is blessed with three adult children – two boys and a daughter - though both sons live out of state. This means care responsibilities often fall to the daughter, augmented by some caregiver support. Following Luciana’s discharge from the hospital, Partners’ performed a home assessment visit. At that time, her daughter reported feeling burnt-out and overwhelmed from the duties in caring for her mom.

Delia was Partners’ Coach performing the home assessment visit. She identified the two most important issues facing the family were to prevent Luciana from being unnecessarily readmitted to the hospital and to assist her daughter in dealing with the demands of Luciana’s care. Delia also noted that Luciana was a strong candidate for long-term case management through the Multipurpose Senior Services Program (MSSP).

Fortunately, Luciana already had some caregiver support through IHSS benefits. Based on Delia’s assessment, though, these clearly weren’t enough. So, she went to work finding more help for Luciana. It wasn’t easy identifying resources to rescue the overburdened family and support its mom. More help through IHSS seemed to be the best approach.

Delia worked with Luciana’s daughter to request that IHSS re-evaluate Luciana’s circumstances. One of their social workers performed a home visit and agreed that Luciana’s hours should be increased. Not only did this get Luciana more help but will ease the circumstances causing her daughter to feel burnt-out and overwhelmed.

This further supported Delia’s assessment that Luciana would benefit from long-term case management, and a referral was made to Partners’ MSSP program.

Lastly, since both Luciana’s daughter and caregiver provide medical transportation, Delia worked with the daughter to complete a Department of Motor Vehicles (DMV) handicap placard application, which was approved by Luciana’s doctor. Since Luciana is able to walk, but challenged by distance, the handicap placard will allow them specialty parking to easily access appointments and outings.

These actions by a Partners’ coach have helped see Luciana pass the critical point following her hospital discharge when she might have needed readmission. It has also resulted in a lessening of pressure on Luciana’s daughter, which helps her provide her mom with better care. And, both mother and daughter deeply appreciate the help, support, and advice provided by Delia. A testimony to the success of Partners’ Care Transitions Choices program.
Can You Help?
Special Needs Fund

We invite your support of a vital and important Special Needs Fund which provides an optimal level of services and resources for fragile community members beyond what is covered through government contracts. Your gift will fund key essential resources for participants in four programs [Multipurpose Senior Services Program (MSSP), Home and Community-Based Alternatives Waiver Program (HCBA), Community Wellness Program (CWP), and Health Homes Program (HHP)] that each provide services to ensure people can live safely and independently at home in their warm familiar surroundings instead of in healthcare institutions. Community members are provided a “lifeline” as trained and compassionate staff members support them, guide them, and take on the role of their friend or relative substitute. For many in these programs, the appropriate community services help them prevent or delay placement in a nursing home, or, return safely home after a hospital or nursing home stay.

Please contact Karen Schneider, Vice President of Development, at kschneider@picf.org for further information.

Focus on Service
Partners Implements Health Homes Program

In 2018, the State of California began offering to Medi-Cal beneficiaries a new program called “Health Homes.” It provides a specific set of health care services at no cost to individuals with multiple chronic health conditions and/or serious mental illnesses.

To qualify for the program, an individual must be enrolled in a Medi-Cal Managed Care Health Plan, they have to be suffering from certain chronic medical conditions and meet at least one of four specific acuity or complexity criteria. In other words, these are people challenged by their health.

The program’s primary benefit for those participating is the coordination of a full-range of physical, health, behavioral health and community-based long-term services and supports (LTSS).

Partners helps these individuals connect to a medical home and then provide very active social care coordination. This is a difficult population, all on MediCal, hard to reach and hard to engage due to the severity of their life challenges.

The program was rolled out regionally across the state and became available in Los Angeles County during the summer of 2019. Recognizing the importance of the program to County residents, Partners offered to become one of the supporting agencies. In a very short time, Partners was serving participants through a number of health providers including Molina Health, L.A. Care, Blue Shield of California, Anthem Blue Cross, and Health Net.

Under the leadership of Anwar Zoueiهد, Partners’ VP of Long-Term Services and Supports, and his managers Aloyce Rachal, Senior Director and Patricia DeCamp, LTSS Operations Manager, his team addresses six core Health Homes services:

- Comprehensive care management
- Care coordination (physical health, behavioral health, community-based LTSS)
- Health promotion
- Comprehensive transitional care
- Individual and family support
- Referral to community and social support services, including housing

(continued)
According to Zoueihid, one of the most challenging aspects of working in the program is that “many of the individuals we are working with are either homeless or on the cusp of becoming homeless.”

The Partners Team is currently working to engage approximately 30,000 individuals from this program into our care management services. Of that number we have are now actively serving 1600+ individuals.

Most of the people in this program are between the ages of 40 and 65. Typically, they are already in crisis when the referral to Partners is made, requiring our staff to work intensively with them to quickly arrange the help they need.

When asked for an example of the type of service the Partners staff provide, they relayed the following story illustrating the variety of issues their work touches on in a single Health Homes case.

Fred is poor and faces health challenges from chronic diabetes, severe arthritis, a profound hearing loss and morbid obesity. His Partners Case Coordinator helped him a number of ways, including scheduling his healthcare appointments due to his hearing loss and arranging transportation. She also identified other important resources and helped him qualify for food stamps through Cal Fresh.

Fred had been sleeping on an air mattress. Although he pumped it up every night, by morning, it was deflated. He wasn’t getting a good night’s sleep, could not easily visit the restroom in the night and his health was suffering. His health conditions led to additional physical issues as he struggled to get up from the mattress.

Government resources would not pay for a bed, yet a better mattress was crucial to addressing his health issues. His Partners Case Coordinator located a queen-sized bed for sale through a local on-line marketing site, contacted the seller, told him about Fred and the seller graciously donated the bed. It had never been used and was still in the plastic! Partners staff delivered the bed and helped Fred set it up in his mobile home.

With this new mattress, Fred can easily get on and off the bed unassisted, his circulation issues related to diabetes have resolved and something as simple as a new elevated bed has dramatically changed his quality of life and improved his health.

GSWEC
Geriatric Social Work Education Consortium

GSWEC Graduates 2020 Class

We are proud to recognize the upcoming graduation of 57 second-year MSW students with advanced specialty skills in caring for older populations and their families. This brings to a total of 750 students graduated through GSWEC during the past 20 years.

What is GSWEC? It stands for the Geriatric Social Work Consortium, and is focused on Southern California. Its goal is to improve geriatric social work education and provide students with field training in order to increase the number of social workers with skills focused on the needs of older individuals.

Currently there are eight different university schools of social work participating in the program, aided by twelve organizations providing field placements.
# Recent Grants

Individual, corporate, and foundation support make much of our work possible. Here are the most recent contributions towards the *Partners* Mission:

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<tr>
<th>Amount</th>
<th>Organization</th>
<th>Description</th>
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<tr>
<td>$60,000</td>
<td><strong>The LA Care Health Plan</strong></td>
<td>helped make possible a successful first year in California’s Health Home’s Program (HHP). Their generous gift enabled <em>Partners</em> to develop a care team, modify our IT systems, and train the 10 staff needed to serve over 100 HHP patients in Los Angeles County.</td>
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<tr>
<td>$41,250</td>
<td><strong>The Corporation for Supportive Housing (CSH)</strong></td>
<td>allowed us to establish partnerships with local homeless service providers county-wide to ensure that homeless patients will be provided with intensive housing navigation and tenancy stabilization services.</td>
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<tr>
<td>$25,000</td>
<td><strong>Los Angeles County Board of Supervisor, Mark Ridley-Thomas, Second District</strong></td>
<td>supported our Home and Community Based Alternatives Waiver (HCBA) Program by establishing a fund to provide services to those on the waiting list before full enrollment is completed. For individuals already enrolled, the same fund would serve to pay for uncovered items like air conditioners or heaters. It will also bring critical new resources to the most ill and disabled low-income individuals to make it possible for them to live in the community.</td>
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<tr>
<td>$20,000</td>
<td><strong>The Ruby Family Foundation</strong></td>
<td>provided us with a generous year-end donation to help us build a safety net to assist our most vulnerable population with managing their health challenges.</td>
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<td>$10,000</td>
<td><strong>Los Angeles County Board of Supervisor, Sheila Kuehl, Third District</strong></td>
<td>granted us funds to assist with the purchase of 24 Lenovo touch screen laptops and cases for the Home and Community Based Alternatives Waiver Program. This will help local disabled and chronically ill people so they may avoid living in institutional settings such as hospitals and nursing homes.</td>
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We are still planning to hold the Tribute Dinner on Monday, June 8th, honoring Paul Viviano, President & CEO of Children’s Hospital Los Angeles.

Our Planning Committee meets on April 7th and will decide at that time whether to move forward with the event’s current date or postpone until fall.

We do have a postponement date on hold at the Beverly Hilton should that be necessary. Our whole team appreciates the enthusiasm and support shown for our Tribute Dinner and we look forward to celebrating many more such events in the future.

Our organization remains committed to maintaining essential functions while keeping staff and clients safe. Working together, our communities will get through this.