KC CARE Community Health Workers

No one turned away. Whether or not they can pay.
KC CARE Community Health Workers

AGENDA

- Intro to Community Health Workers (CHW)
- KC Care Clinic CHW Origins
- Care Coordination for Improved Care Delivery
- Outcomes
- Sustainability
- Empowering KC Care CHW’s via Care Navigator™
History of CHWs at KC CARE Clinic

- Over decade of CHWs in HIV services
  - HIV Peer Program
  - HIV outreach staff hired from specific target communities

- Decades of case management services mostly conducted by social work model
 CHW Care Coordinators

- Started in 2010 with two CHWs working in “afterhours” of KC area safety net clinics

- 2016: Regional “hub” of 20 CHWs partner with
  - Four Hospital systems
    - St. Luke’s Health System, KU Medical Center, Research Medical Center, North KC Hospital
  - Seven Safety Net Clinics
  - CBOs – domestic violence shelters, etc.
  - Faith based organizations
Care Delivery Team Members

- CHWs embedded in care teams at hospitals and clinics
  - Each CHW is onsite in either Emergency Department or Primary Care clinic several days per week
    - Spend balance of time in community, home visits, etc
  - Document in Electronic Health Record of Hospital or Clinic
  - Referrals from nurses, social work and providers
Care Coordination Role

- Individualized assessment and care plan developed
- CHWs function as a medical tour guide for patients: walking side-by-side they teach patients to navigate the health care and social service systems
  - Navigate access to primary care and specialty care
  - CHW Attendance at appointments
  - Home/Community visits
- Motivational interviewing techniques
Care Coordination Tasks

- Assist with navigating health care services
  - Coordinating appointments: primary, specialty care
  - Accessing medications

- Benefits enrollment
  - Medicaid, Medicare, Marketplace, Disability, etc

- Social services referrals and navigation
  - Basic supports: Food, housing, etc.
Patient Engagement

- **Patient Education**
  - Wellness and disease specific education
  - Patient Notebook

- **Self management capacity building**
  - Ask me three
  - Pre-appointment planning
  - Post-appointment review

- **Operationalizing the care team plan**
  - Ex: Home visits or trips to the grocery store
HOW is this different? What Value?

- **CHWs are:**
  - Cultural and Linguistic liaisons
    - This is a peer model intervention. CHWs have a shared lived experience with their clients and connect in ways that the “professionals” in health care team do not
    - Teach patient to work with care team
  - Care Team extenders
    - CHWs extend the work of care team and RN and SW case managers into the community, home, and beyond
    - Provide feedback to care team with information otherwise unknown
Training

- Minimum education is high school diploma or equivalent
- Community Health Workers are trained with Metropolitan Community Colleges of KC curriculum
  - 100 classroom hours
  - 60 service learning hours
- By KC CARE
  - Orientation with extensive shadowing time
  - Job specific training – diabetes self management course, medical interpretation course, community resources, HIPAA, documentation & technology training (EHR, CHW database, etc.)
Supervision and Support

- KC CARE recruits, hires, trains, supervises and supports CHW team
  - Supervision by people who only supervise CHWs
    - Helps support the work of this unique health care professional
  - Low CHW to supervisor ratio
    - Goal is 6 to 1
Outcomes

- 91% of patients achieve CHW care plan goals
- 58% of patients report an improvement in their overall health during time working with a CHW
- 82% of patients working with a CHW did not return to the ED within 90 days
- 65% overall reduction in patient use of ED

Source: KC Care Clinic Internal Metrics
Empowering CHWs thru Technology

Next Level:

- KC CARE is launching new CHW database and workflow tool: Care Navigator™
- Will increase CHW efficiency and reduce current documentation burden
- Improve care planning process
- Improve supervisor tools for KC CARE
Automating KC CARE CHWs

Care Navigator™ Hub

- Mobile apps
- Windows 8
- Windows 8 Desktop App
- "My Care Navigator" Member & Caregiver Website*
- Physician Desktop Ribbon
- MS Outlook and Office integration

CARE NAVIGATOR
powered by Blueprint Healthcare IT

KC CARE Clinic
Partnering with Care Navigator™

- Create patient record
- Start care navigation
- Answer questionnaire
- New disease type
- Critical result value
- Hospital admission/discharge
- Decline or delay task
- Data analytics

TRIGGERS ➔ RULES ENGINE ➔ ACTIONS

Task overdue indication
Provide assistance with scheduling trans...
Sandy Smith, CHW
06/14/15

On screen alerts
Alert
Edwin Gonzalez had an ED Visit!

Calendar reminders
Medication
Today at 10:00 am (2:00 pm GMT)
Options

Email notifications
BluePrint: Care Navigator
Schedule transportation for Edwin Gonzalez
********** This is an automated email. Please do not
Hub Features

CRM
Task Management
Workflow
Hub Features

General Population Dashboards
Thank you!

Questions???

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