

#### CMC CollN State Team Webinar March 2021

# The Power of the Collaborative: A Deeper Dive into Crafting Your Individual Stories Together

Tuesday, March 23rd from 12:00pm – 1:30pm ET

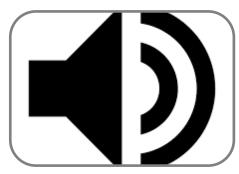
**Boston University** School of Social Work Center for Innovation in Social Work & Health This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number #UJ6MC32737: Health Care Delivery System Innovations for Children with Medical Complexity (\$2,700,000 annually). This information or content and conclusions are those of the authors and should not be construed as the official position or policy of, nor should any endorsement be inferred, by HRSA, HHS or the U.S. government. Anna Maria Padlan. HRSA/MCHB Project Officer



#### Welcome & Housekeeping



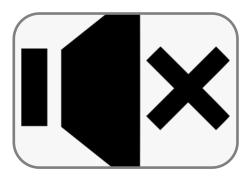
Webinar is being recorded



Please don't use speaker phone



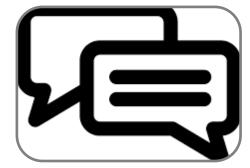
on hold



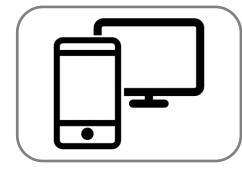
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Participation is essential



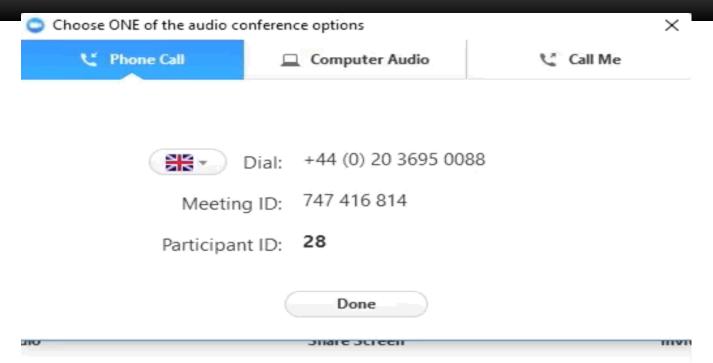
Send tech issues to Ben via chat box and content questions to the whole group



Link your phone with your computer

Mute your phone when not speaking -Press the "mute" button on your handheld or press \*6 to mute and \*6 again to unmute





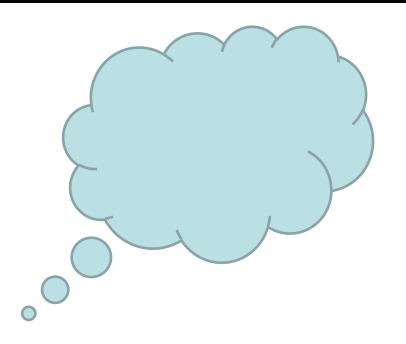
#### If you join by computer **AFTER** calling in via phone:

You can enter the Participant ID to bind your phone and computer session together by entering #Participant ID# on your phone.

Your participant ID usually pops up for easy access on the webinar platform, but you can find it under "join audio" if it does not.

# **Brief Check-In**

In chat:



What is one word to describe what you are excited about for spring?

#### Agenda

Collective
Crafting of Your
Impact
Statement

State Team Spotlight

Weaving Data Together to Make it POP! Overview of Remaining Grant Technical Assistance, Deadlines, and Deliverables





### Impact Statement Elements

- STATEMENT OF NEED
- Describe the issue or problem statement (relevance) in simple terms appropriate for your principal audience what were the aims of this project and how did you approach the problem?
  - Why did you choose to do this project?
    - What was the situation/problem in your state, and why was it a problem?
    - What needs were identified?
- PROJECT SUMMARY WHAT HAS BEEN DONE
- Provide an action statement (response).
  - What did you do?
  - What were the key elements?
  - Who was the target population?
  - What resources were required?
- IMPACT
- Describe the most significant impact(s) (results).
  - Consider the question "What is the payoff for CMC and their families, and the healthcare system?"

- What are the 2-3 most important things that happened as a result of the work described?
- Consider the following as you identify the top key impacts:
  - What knowledge was gained (e.g., lessons learned)?
  - What skills were increased?
  - What practices/behavior changed? How many people changed?
  - How much money was saved or reallocated more effectively (if able to estimate in some capacity directly or indirectly)?
  - Were policies changed as a result?
- How was evidence collected to document the impacts (surveys, observation, etc.)?
  - What were the most significant end results (quantitative and/or qualitative)?
- What was the scope of the impact (hospital, regional, statewide, etc.)?
  - How are you spreading impact and learnings to others?
- Make sure to include key accomplishments from all points of view in this section – clinical staff, Title V, state officials, family leaders and families, administrators, etc.
- COLLABORATORS AND FUNDING SOURCE(S)



## Workshopping Your Impact Statement

- What is the top message you are trying to convey in your impact statement and to whom?
- How can you make your impact statement "POP" (e.g., stand out, make an impression)?
- What are your current sticking points and related questions for the group?
- What other lingering questions do you have about crafting the impact statement?





**Building Better Healthcare Outcomes** 

## **Meet the Team**

Dr. Pat Purcell, Medical Director

Sondra Gilbert, F2F Leader

Ivy Alexander, Executive Director

Jonathan Borden, Procedures Development Specialist II

Zecheriah Stone, Project Coordinator



## **Office Locations**



CMC COIIN VIRTUAL SITE VISIT AUGUST 26, 2020



VCTC MODEL, huh?

Skeptical ...

THAS HELPED

ACCOMPLISHMENTS

EVERAGING TECH COLLABORA

PRE COORDINATION

We've been doing this for OVER 100 YEARS!

EXPANDING REACH

PARTNERSHIPS

WHY US?

INFANT COMPLEX CARE



We've made PROGRESS in:

· COORDINATION

· TELEHEALTH

CAN HELP SOME KIDS GRAN OM 4 (MPLEXITY!

plan of

ACCESS +

CONNECTIVITY

Communicating

+ engaging

during the

TANDEMIC

CHALLENGES

INCLUSIVENESS of Patient/ family

MENTAL

HEALTH

ISOLATI &

FAMILY

ENGAGEMENT

IN TELEHEAUTH

IMPLICIT

BIAS S

#### DEFINING CMC

- · Multiple Systems
- · Multiple Specialists
- · Technology needed
- · Often higher cost

What about SOCIAL MENTAL HEALTH?

WHEN is it BETTER for FAMILIES? WHEN do they NEED + (OME IN?



SOME PARENTS LIKE the WAITING ROOM TIME - SOGAL

HOME can build EMPATHY

DEFINING CARE of PATIENT in-person vs. remote

Illustrated by Conversketch.com

PRIORITY: WELL-BEING + OUR FAMILIES

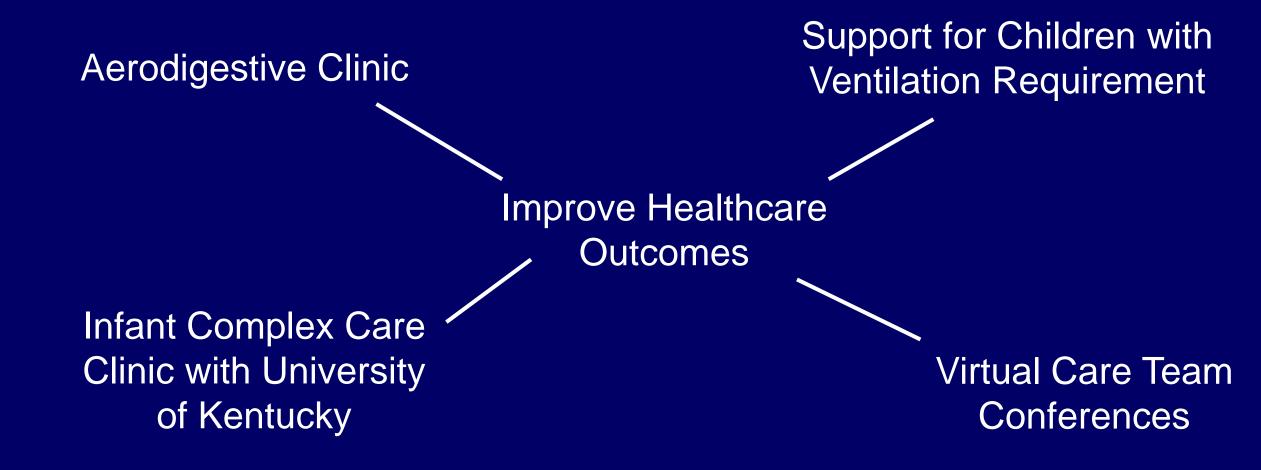
ELEHEAUTH



WINDOW into their

(OR SHAME)

# QI Project



# **Biggest Accomplishment**



Our ability to improve on various initiatives centered on telehealth

## Question 1 – Message and Audience

- Our project goal was to improve healthcare outcomes for children with complex medical needs.
- The targeted audience will consist of OCSHCN and other state leadership.



# **Question 2 – Pop Appeal**



- Visuals
- Data
- Concise Presentation
- Tailor to the audience with a fluid mindset

## Strength in Numbers – Easy of Use

In general, the technology has been easy to use for my telehealth visit(s)

Response	Count	Percent
Strongly Agree	44	60
Agree	23	32
Undecided	4	5
Disagree	1	1
I Don't Know	1	1
Total	73	≈ 100

## Strength in Numbers – Value Driven

As clinics reopen for in-person visits, how valuable would it be to have the option of doing telehealth visits with your child's provider(s)?

Response	Count	Percent
Very Valuable	39	52
Somewhat Valuable	16	21
Mostly Valuable	10	13
A Bit Valuable	5	7
Not At All Valuable	3	4
Not Sure	2	3
Total	75	100





# **Question 3 – Sticking Points**

- Will leadership continue to invest and maintain program development?
- Did we create an unmet medical need?
- Are we relevant?



# **Question 4 – Lingering Questions**



- 1. Did our project succeed?
- 2. What lasting impacts did we make?
- 3. Is our team better set up for future success?

# Lessons Learned – Key Takeaways

- Be prepared to PIVOT from antiquated ways of thinking
- Look for opportunities to build valuable partnerships
- Develop resources that support all parties
- Tell a story with your data that resonates with your audience





Weaving Data Together to Make it POP!

#### The Power of Data and Visuals

How do you get the right people paying attention and wanting to know more?

For messages to stick with policy/decision makers, it needs to hit both the brain and the heart

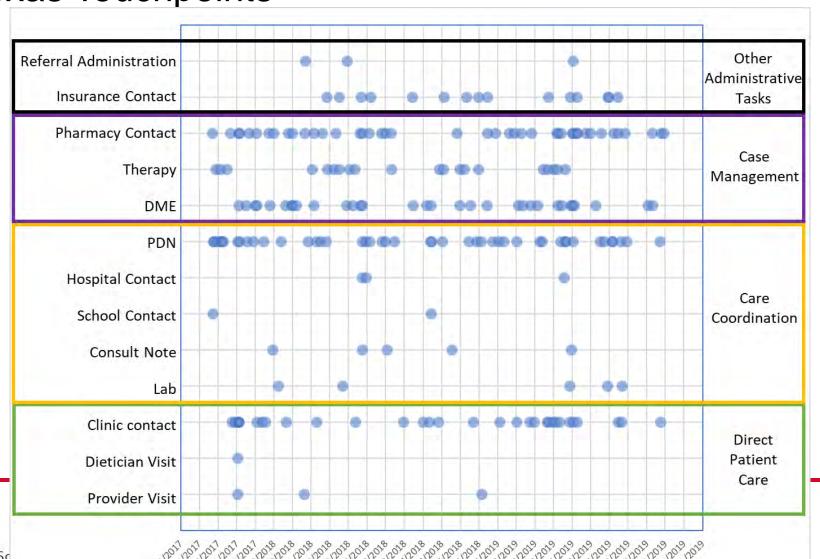
- Mixes data and stories
- Teams' QI models give policy makers the means to act upon the heart of it

Lead with the most dramatic and important point to capture attention



#### **Team Texas Touchpoints**

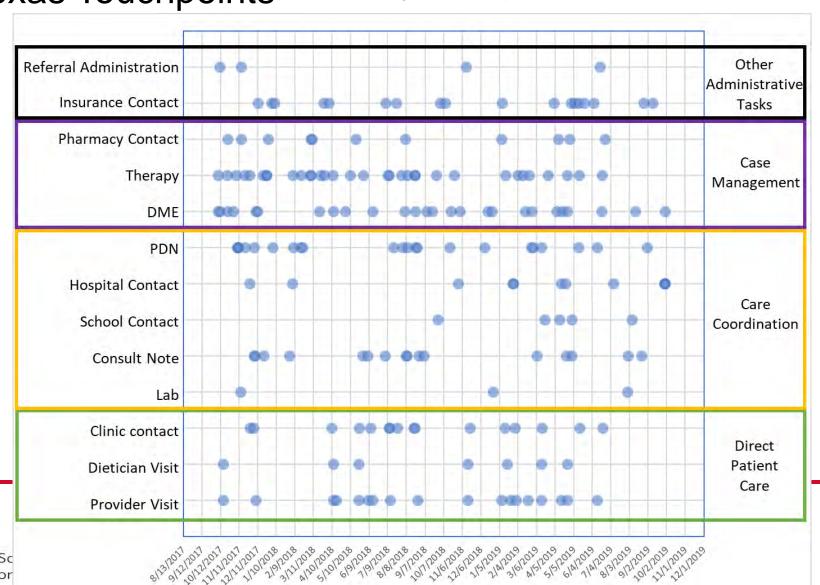
Patient 1: 16-year-old female with spastic quadriplegia, scoliosis, acute on chronic respiratory insufficiency on BIPap at night, seizures, dysphagia, gastrostomy dependent





### **Team Texas Touchpoints**

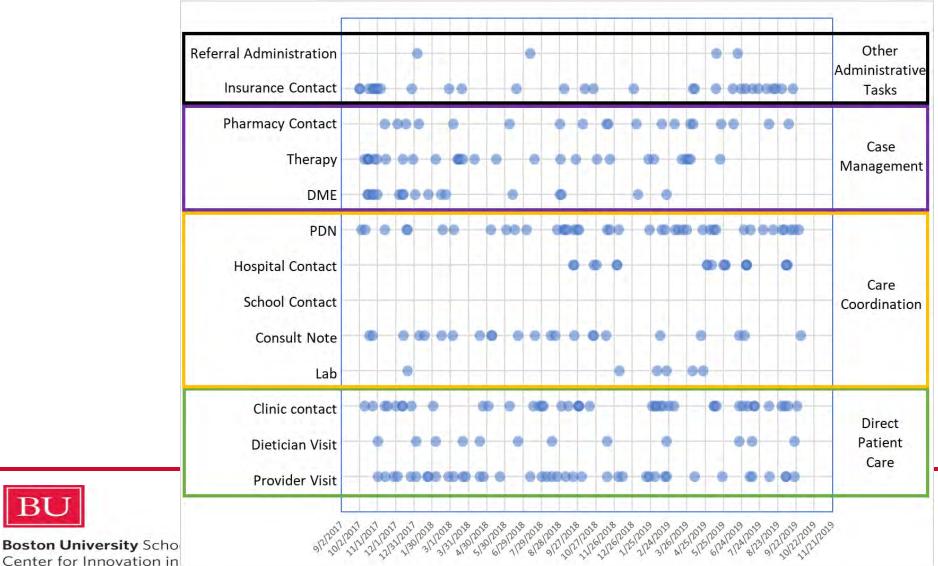
Patient 2: 4-year-old male born with an obstructive craniopharyngioma, tracheostomy and ventilator dependent, gastrostomy dependent.





## **Team Texas Touchpoints**

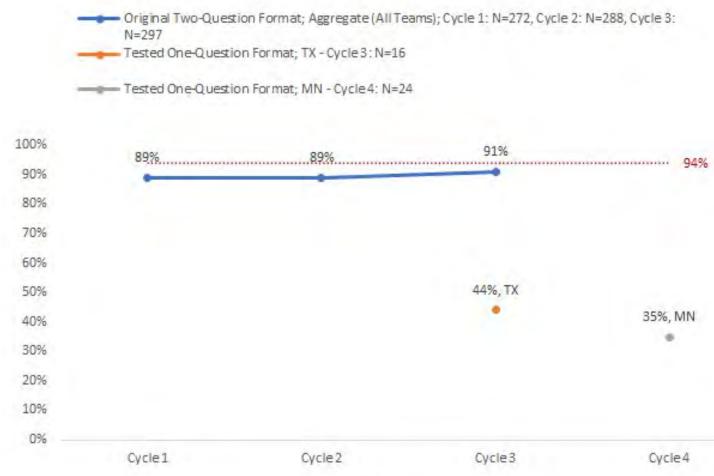
Patient 3: 3-year-old male with Spina Bifida, neurogenic bowel, gastrostomy dependent, neurogenic bladder, catheterization dependent, hydrocephalus with a ventriculo-peritoneal shunt, Obstructive Sleep Apnea, Tracheostomy dependent.



## Using Data to Tell Your Story: How You Ask Matters

F - Measure 1 - No Unmet Needs

DURING THE PAST 12
MONTHS, what, if any,
types of care did your
child need, but not
receive? Please select all
that apply AND describe
what kind of care was not
received in free text box
associated with each
category of need.

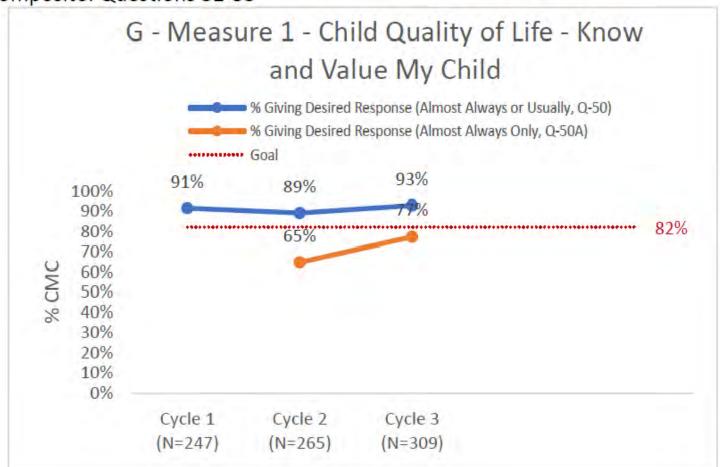




## Using Data to Tell Your Story: Choosing Your Message

#### G - Measure 1 - Child Quality of Life - Know and Value My Child

Composite: Questions 32-33

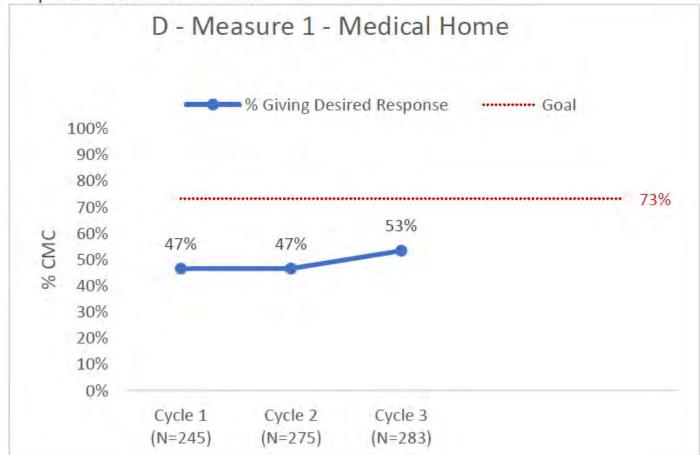




## Using Data to Tell Your Story: Improvement Despite the Pandemic

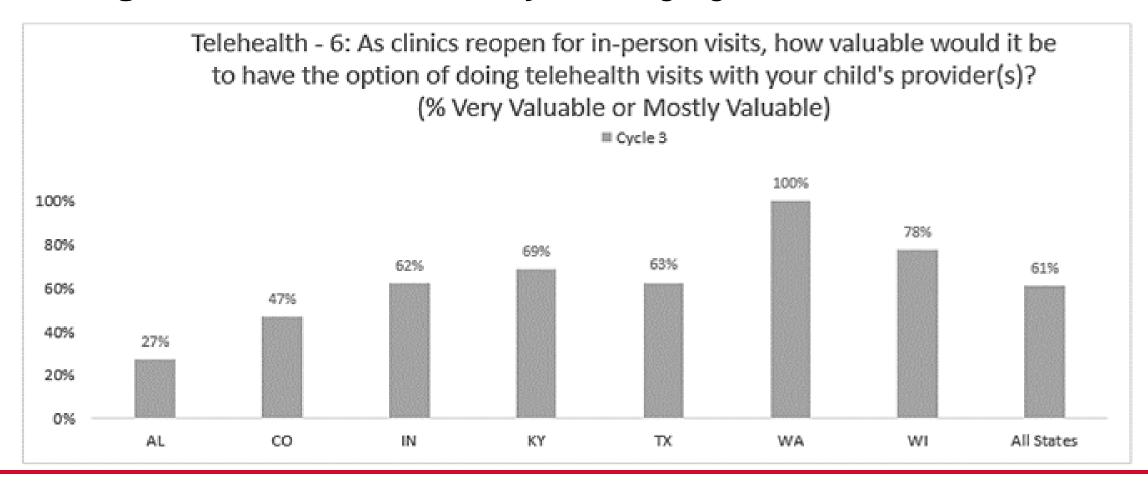
#### D - Measure 1 - Medical Home

Composite: Questions 14-20





## Using Data to Tell Your Story: Emerging data on telehealth





## The Universe of Data is Yours – Tips on How to OWN IT!

Utility of CoIIN aggregate is for teams to consider themselves against the aggregate

• Powerful story where teams' aggregate data align on improvement

Don't limit to our CollN data sources – use all you've got

Combine qualitative and quantitative data with families' individual stories

• Combine statistical data and experiential knowledge

"QI isn't QI if it doesn't stick. Then it's just having fun."

• Show how your QI makes a long-term difference

Keep your audience in mind

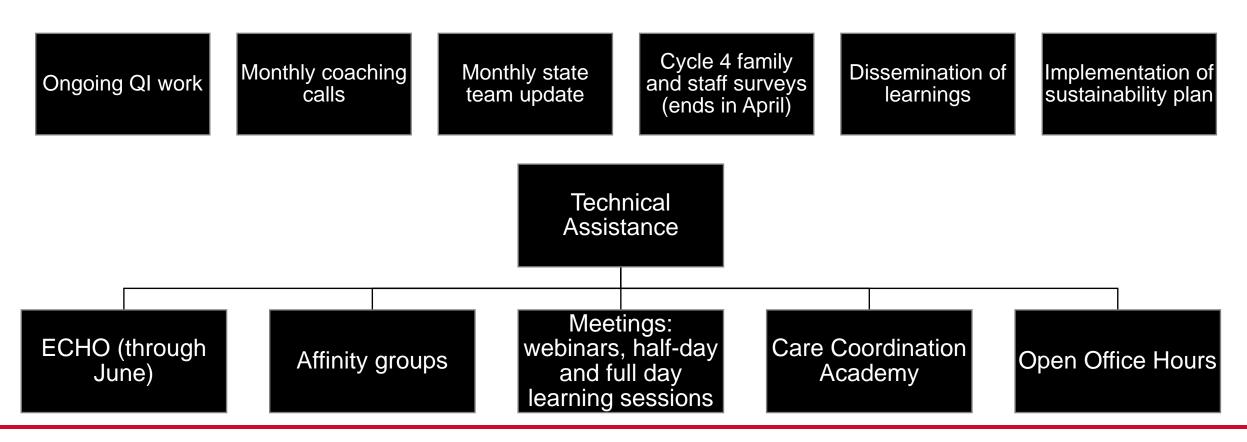
• Tell them why they should care and how that fits into their interests



Reference – Dancing with Data: Using data to support your message

# Overview of Remaining Grant Technical Assistance, Deadlines, and Deliverables

## **Ongoing Activities**





### Upcoming Deliverables and Activities

#### March

 Key Informant Interviews

#### April

- End of Final Data
   Cycle (#4 Nov
   1, 2020 April
   30, 2021)
  - CollN data collection ends

#### May

- Cycle #4 Staff and Family Surveys Data Due
  - Fri, 5/17

#### June

- Due 6/30
  - 3rd Round of FESAT and Action Plan Due
  - 3rd Round of Family Focus Groups Due
  - Draft State
     Team Chapter
     Due for Review
     (Including
     Impact
     Statement)

#### July

- Finalized State Team Chapter Due (Including Impact Statement)
  - Fri, 7/30



#### CollN to Advance Care for Children with Medical Complexity



Wrap-Up & Next Steps

# Ad-Hoc Open Office Hours

3/26 @ 12pm ET 4/9 @ 2pm ET



#### Wrap Up & Next Steps

## **Next Steps**



Refine your impact statement

Reach out with questions!



#### Wrap Up & Next Steps

## Please complete the evaluation for this webinar!

https://www.surveymonkey.com/r/3WPLTYY



