

CollN to Advance Care for Children with Medical Complexity

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CoIN to Advance Care for Children with Medical Complexity

CMC CoIN State Team Webinar #15 –
Real-world Strategies to Support Interprofessional Collaboration in the CMC CoIN
Featuring: Family Voices National; NAC members Garey Noritz and Renee Turchi;
Teams CO & TX; Steve Fitton; IP Team
Monday, March 2, 2020 12:30pm to 2:00pm ET

Boston University School of Social Work
Center for Innovation in Social Work & Health

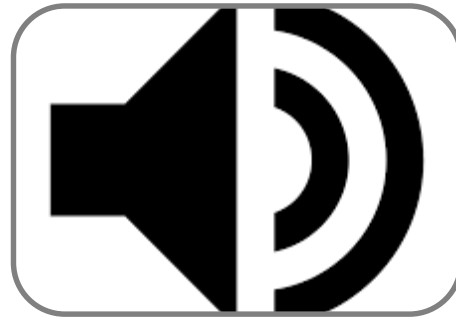
This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number #UJ6MC31113: *Health Care Delivery System Innovations for Children with Medical Complexity* (\$2,700,000 annually). This information or content 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



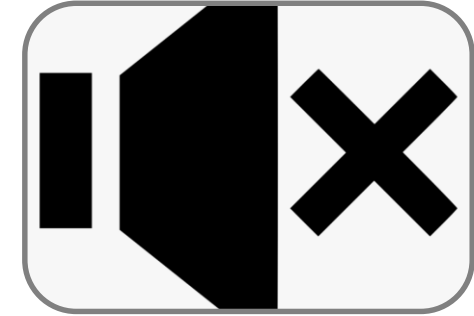
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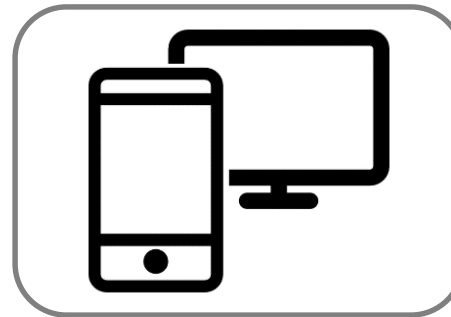
Mute your phone when not speaking - Press the "mute" button on your handheld or press *6 to mute and *6 again to unmute



Participation is essential

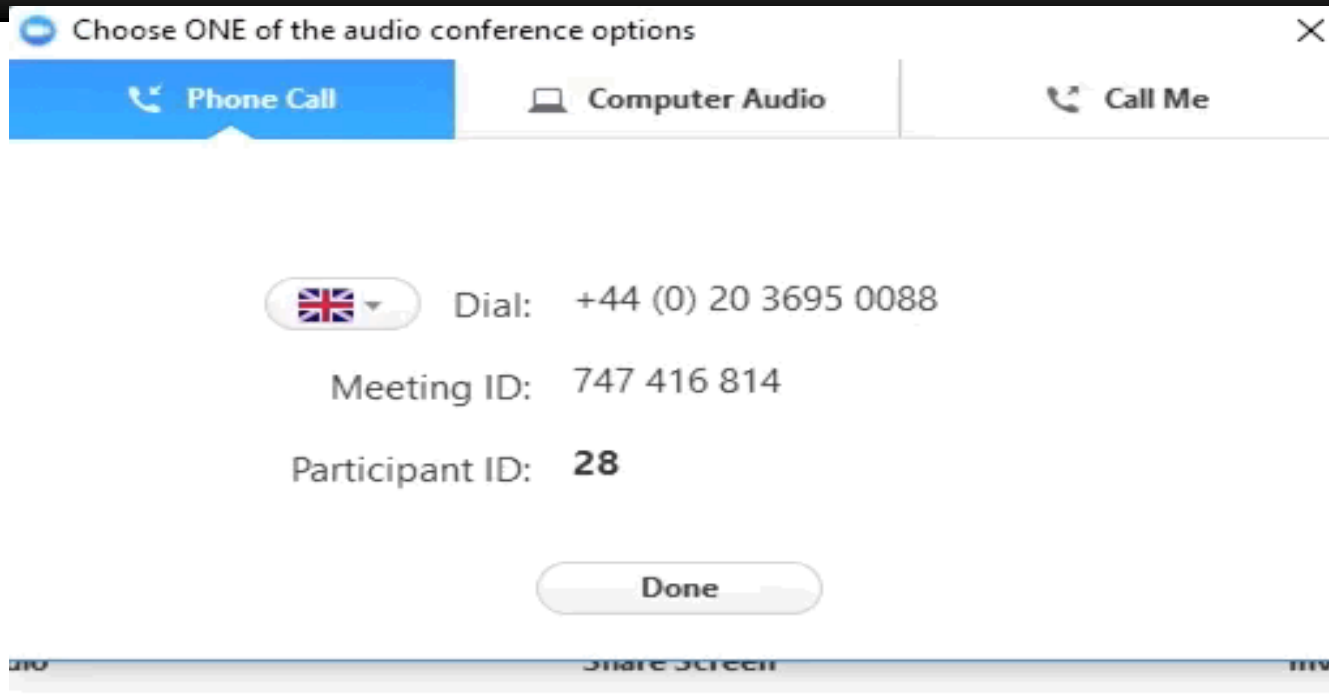


Send tech issues to Libbi via chat box and content questions to the whole group



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Agenda

**Intro & Types of
Interprofessional
Collaboration in
the CMC CoIIN**

Meg and Bethlyn

**FESAT
Highlights from
CMC CoIIN**

*Cara and
Mary Jo*

**FESAT Team CO
Share Out &
Group
Share/Feedback**

Team Colorado

**Interprofessional
Collaboration
Team TX Share
Out & Group
Share/Feedback**

Team Texas

**Real-World
Strategies for
Progress**

*Renee, Garey,
Steve*

**Wrap-Up and
Next Steps**

Meg and Bethlyn



Project Updates

Getting the Word Out!

- AMCHP Conference is March 21st – 24th – many state teams and CoIIN faculty presenting about CoIIN work

Y2 Carryover & Y3 Funds

- Carryover has been approved, will be processed by BU
- Last round of the Y3 subcontracts are being processed

2020 Consultation Visits

- Consultation visits start in May for some states
- Your IP coach will be working with you soon to start planning for these visits



Interprofessional Collaboration: Families as Practitioners

FESAT Highlights from the CMC CoIIN

Cara Coleman, Mary Jo Paladino – Family Voices National



Themes Across the CMC CoIIN: 1st FESAT Assessment

Commitment

- Written policy of family engagement

Transparency

- Support to understand working together and partnership role
- Support and information to participate

Representation

- Recruiting/working with diverse (race, ethnicity, geo etc.) families

Impact

- Including family and family leader input



FESAT Action Planning Across the CMC CoIIN

Transparency

- Understand each other, work together and refocus/brand
 - Activities/tools to: coalesce around issues, foster relevant participation and doing work together, and co-create

Representation

- Working on Diversity
 - TA/Consult with Glenn Gabbard

Impact

- Evaluation and data
 - Activities around preparing families to work with data
 - Measuring progress- quantitative and qualitative



Coordination Plus

A collaborative project between Children's Hospital Colorado and the Colorado Department of Public Health and Environment to advance the care of children with medical complexity.
CollN (Collaborative Improvement and Innovation Network)



In collaboration with
Children's Hospital Colorado

The FESAT process: Family leader collaborative engagement within the Colorado CMC CollN

Team Colorado
March 2, 2020



Process

1

Action Team
Established

2

Action Team
meeting to
negotiate
FESAT score
& select
strategies.

3

Action Team
workgroup to
draft potential
activities &
action plan.

4

Action Team
workgroup to
draft potential
activities &
action plan.



DOMAIN 1: Commitment	SCORE	
The organization has a written policy that requires family engagement in systems-level initiatives.	3	<p><i>Commitment means that the organization routinely engages family leaders in all systems-level initiatives that affect the policies and programs that govern services for children, youth, and families</i></p>
The organization has one or more champions of family engagement.	3	
The organization reported how family leaders contributed to the work.	3	
The organization's budget includes funding for the family leaders' time or other costs they incur (for example, travel, childcare).	2	
The organization provides adequate time for staff to make changes that result from family engagement (for example, educating staff about new policies).	2	

**DOMAIN 3:
Representation**

SCORE

Family leaders who collaborated in the initiative were representative of races and ethnicities of the population served by the initiative.

2

Family leaders who collaborated in the initiative were representative of cultures of the population served by the initiative.

2

Family leaders who collaborated in the initiative were representative of languages spoken by the population served by the initiative.

2

Family leaders who collaborated in the initiative were representative of geographic area served by the initiative.

3

Representation occurs when family leaders reflect the diversity of the community served by the organization.



Action Plan

	Outcomes	Strategies	Target Dates	
2	A value statement regarding routinely and consistently engaging families in clinic design, change and improvement strategies is implemented in Special Care Clinic.	Communicate need for change to Special Care Clinic staff in order to create awareness of the benefits of family perspective and participation.	May 2020	
3		FESAT Action Team engages staff and families to develop value statement.	July 2020	
4			Demonstrate value and "what's in it for me" (WIIFM) and increase transparency by sharing data and strategies/interventions with Special Care Clinic staff & families.	ongoing
5		Increase knowledge of how to implement desired change		October 2020
6		Identify metrics to ensure and measure progress toward identified outcomes.		May 2020
7		Families and staff understand their roles and can participate fully.	Provide mentoring and skill-building opportunities for Special Care Clinic Staff	May 2021
8			Provide mentoring and skill-building opportunities for Special Care Clinic [cohort] families	May 2021
9	Disseminate Value Statement (internal/ external website)			October 2020
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Add 1000 more rows at bottom.

Next Steps

Outcomes	Strategic	Activities (potential)	Metric	Person(s) Responsible (primary coordinator of work)	Who can help?	Timeline	Complete by	Document Links (Folder)	Resource	Notes	
A value statement regarding equity and consistency engaging families in clinic design, change and improvement strategies is implemented in Special Care Clinic.	Communicable need for change to Special Care Clinic staff in order to create awareness of the benefits of family perspective and participation.	* get on agenda		Ellen Sublett	Jocita Davidson	Apr 2020	May 2021			*where and how are system-level initiatives (organically formed)	
		* work with family leaders to develop talking points		Shawanna Parker	Angie Goodger	March 2, 2020					
		* identify and share relevant resources		Angie Goodger	Ellen Sublett/ Lisa Franklin/ Mary Jo Paladino	April 2020					
		* develop communication plan		Angie Goodger	FESAT Team	May 2020					
		* Action Team drafts value statement		Angie Goodger	Ellen Sublett/ Shawanna Parker	June 2020					
		* gain feedback from families on value statement		Shawanna Parker	Ellen Sublett	1. March - May 2. April, June					
		* share & solicit feedback on draft value statement		Ellen Sublett	David Fox						
		* work with SPOC leadership & providers to gain buy-in		David Fox	Ellen Sublett						
		* identify training topics and opportunities		Angie Goodger	Mary Jo Paladino/ Shawanna Parker						
		* develop menu of family engagement strategies to select from when working on initiatives (ie create a mechanism to solicit family feedback on system-level initiatives)		Angie Goodger	Lisa Franklin/ Mary Jo Paladino/ Shawanna Parker						
Families and staff understand their roles and can participate fully.	Demonstrate value and "what's in it for me" (WIIFM) and increase transparency by sharing data and strategies/interventions with Special Care Clinic staff & families.	* provide guidance on how to best engage families in initiatives (ie utilizing family advisory council, partnering with community leaders, utilizing care coordinators and navigators to identify families)		Lisa Franklin	Mary Jo Paladino/ Shawanna Parker	1-2. Exploration by April 1 3. mid-summer	ongoing			* how did they start it, how do they run it, how do they reach families for engagement	
		* identify training topics and opportunities		Angie Goodger	Lisa Franklin/ Mary Jo Paladino/ Shawanna Parker	ongoing					* add question to wrap-up time of focus groups
		* provide training		Angie Goodger							
		* mapping existing and future opportunities to engage families in clinic decisions		David Fox	Jocita Davidson						
		* identify behavior change management barriers & solutions (PCSA)		Angie Goodger							
		* share family / provider survey results (NEW)		Ellen Sublett	Volunteer Family Member						
		* provide training		Angie Goodger							
		* mapping existing and future opportunities to engage families in clinic decisions		David Fox	Jocita Davidson						
		* identify behavior change management barriers & solutions (PCSA)		Angie Goodger							
		* share family / provider survey results (NEW)		Ellen Sublett	Volunteer Family Member						
Families and staff understand their roles and can participate fully.	Increase knowledge of how to implement desired change	* identify and recruit family leaders that represent the diversity (race/ethnicity/ language/geographic) of the clinic		Ellen Sublett	Bobbie Hepp		October 2020				
		* create and implement family communication plan (ie email, newsletters, focus groups)		Shawanna Parker	Angie Goodger/ Ellen Sublett	April 2020					
		* evaluate and update communication plan		Ellen Sublett	FESAT Team						
		* posters in clinic		Ellen Sublett	Artonia Sainza						
		* internal/external website		Ellen Sublett							
		* identify activities to celebrate		Angie Goodger							
		* provide training		Angie Goodger							
		* mapping existing and future opportunities to engage families in clinic decisions		David Fox	Jocita Davidson						
		* identify behavior change management barriers & solutions (PCSA)		Angie Goodger							
		* share family / provider survey results (NEW)		Ellen Sublett	Volunteer Family Member						
Families and staff understand their roles and can participate fully.	FESAT Action Team engages staff and families to develop value statement.	* provide training		Angie Goodger			July 2020			* look at potential focus group topics	
		* mapping existing and future opportunities to engage families in clinic decisions		David Fox	Jocita Davidson						* Showina heads email list from Ellen - what are our guidelines
		* identify behavior change management barriers & solutions (PCSA)		Angie Goodger							
		* share family / provider survey results (NEW)		Ellen Sublett	Volunteer Family Member						
		* provide training		Angie Goodger							
		* mapping existing and future opportunities to engage families in clinic decisions		David Fox	Jocita Davidson						
		* identify behavior change management barriers & solutions (PCSA)		Angie Goodger							
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Families and staff understand their roles and can participate fully.	Disseminate Value Statement (internal/external website)	* provide training		Angie Goodger			October 2020				
		* mapping existing and future opportunities to engage families in clinic decisions		David Fox	Jocita Davidson						
		* identify behavior change management barriers & solutions (PCSA)		Angie Goodger							
		* share family / provider survey results (NEW)		Ellen Sublett	Volunteer Family Member						
		* provide training		Angie Goodger							
		* mapping existing and future opportunities to engage families in clinic decisions		David Fox	Jocita Davidson						
		* identify behavior change management barriers & solutions (PCSA)		Angie Goodger							
		* share family / provider survey results (NEW)		Ellen Sublett	Volunteer Family Member						
		* provide training		Angie Goodger							
		* mapping existing and future opportunities to engage families in clinic decisions		David Fox	Jocita Davidson						

- Draft -



Question - group feedback

- 1. It's easy to continue to identify new projects - how does your team quickly evaluate and prioritize. How do you keep your focus?*
- 2. There's a temptation to wait for perfection and complete buy-in before trying something new. How do you encourage your teams to "just do it"?*



State Team Pre-Work Questions

What has been your team's journey to date with recruiting and building interprofessional partners?

What challenges is your team currently grappling with in this regard?

What, if any, new partners or new level of partnership does your team need to engage for sustainability purposes?

What are your burning questions/challenges/dilemmas that you'd like to consider with the group to help move your work forward in a tangible way?



State Team Share Out



Diverse Interprofessional Collaborations

Towards Sustainability in the CMC CoIIN



Team Texas

Interprofessional

Collaboration Experience

Rahel Berhane



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State Team Share Out



Real-world Strategies for Progress

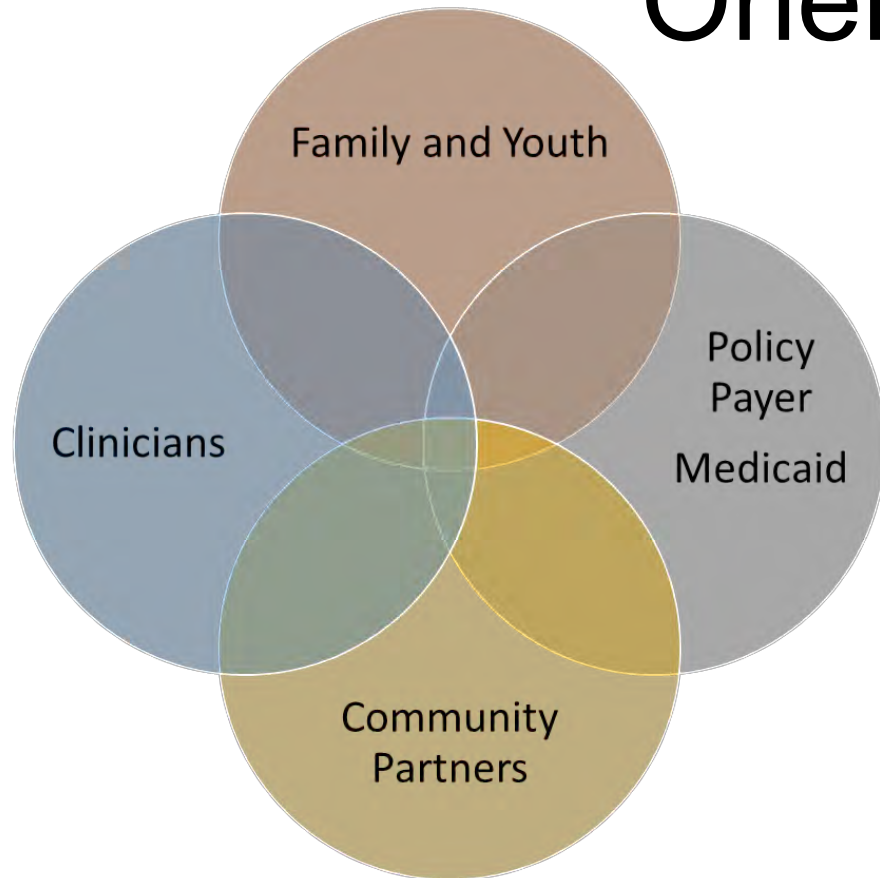
Renee Turchi, NAC Member

Garey Noritz, NAC Member

Steve Fitton, Medicaid Expert Consultant



Partnership in PA: Transition in Adult Oriented Systems



- Transition Policy Managed Care Operations Memorandum
- Inspired by family suggestion and experience
- Lasting policy change





SUSTAINABILITY

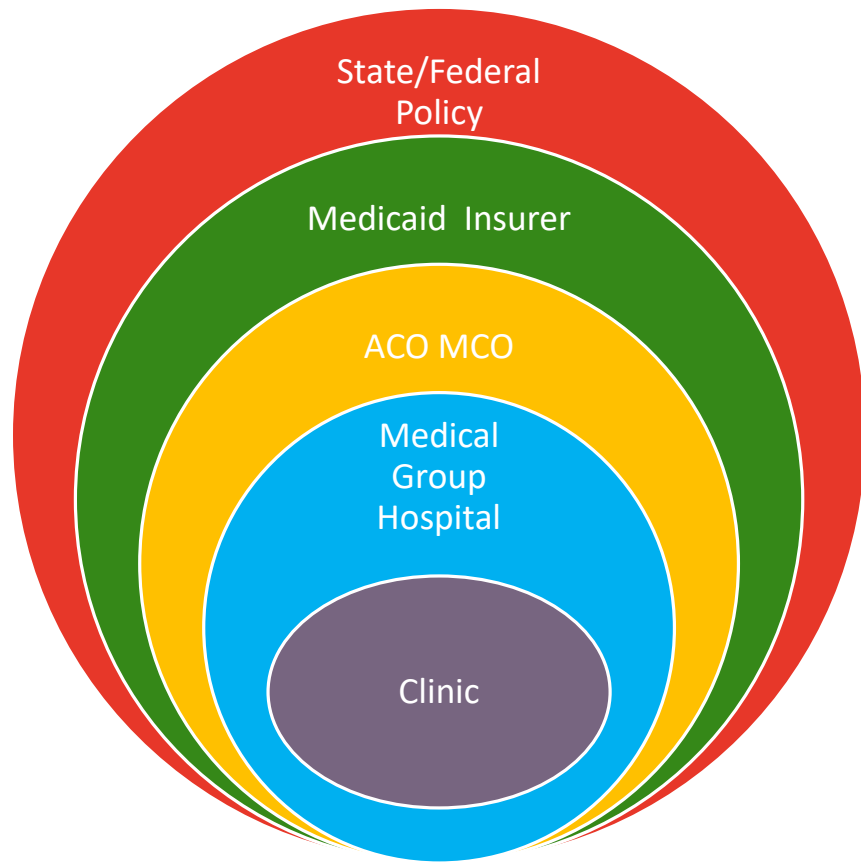
WHY IS IT SO HARD?

ESPECIALLY FOR SUCH IMPORTANT AND EFFECTIVE SERVICES FOR A VERY
SPECIAL POPULATION OF CHILDREN AND THEIR FAMILIES

CLARITY

- 1. Children with medical complexity does not have a standard definition**
- 2. These new “models of service delivery” are unique and evolving**
- 3. It is difficult to differentiate the care coordination, plans of care, and medical homes that are a part of the CMC intervention models from those that are in the general domain**

PROXIMITY TO POWER



HRSA/CYSHCN



CMS/CMCS

STATE CYSHCN



STATE MEDICAID AGENCY

AAP



AMA

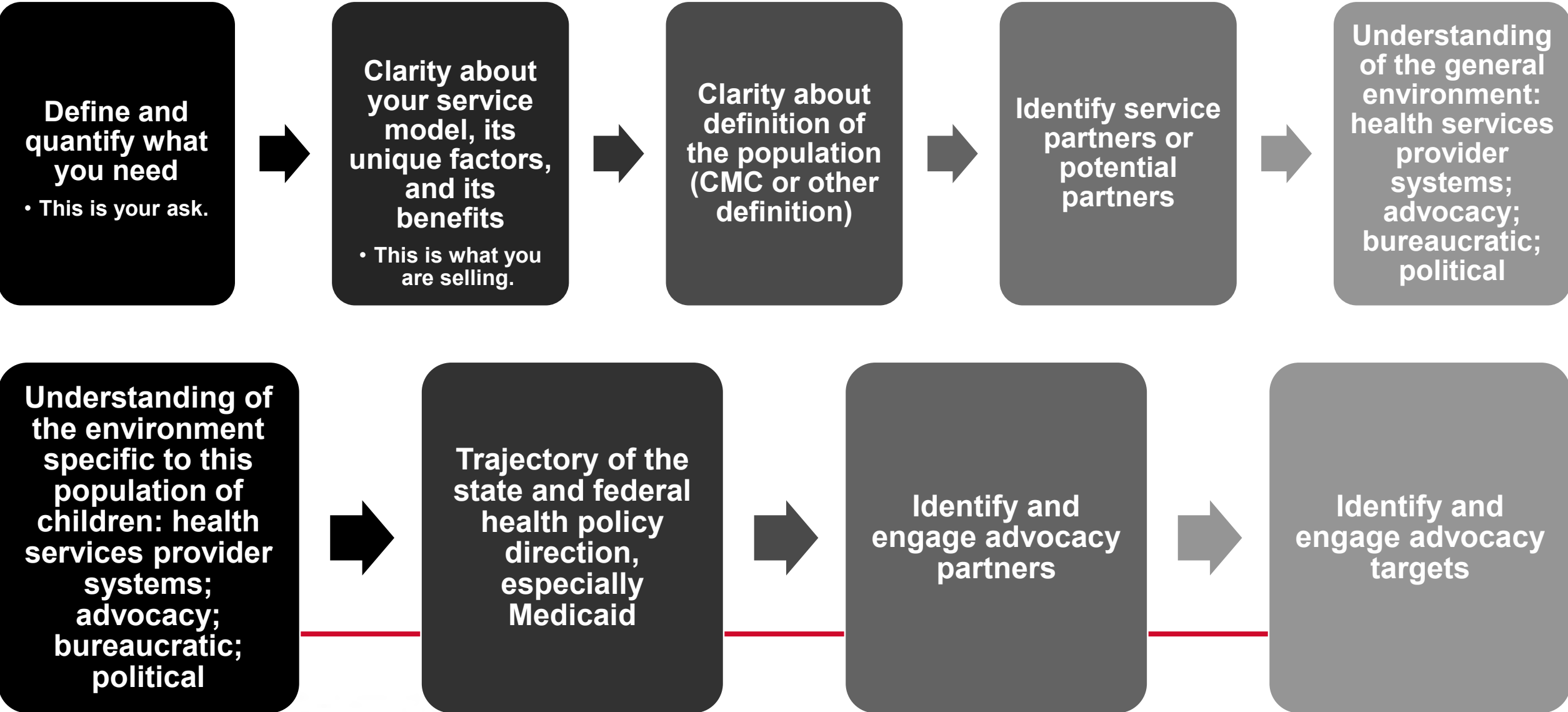
COSTS DOMINATE NATIONAL HEALTHCARE POLICY

- 1. National healthcare costs are nearly double those of other developed countries and have made health insurance a substantial financial burden for individuals and families.**
- 2. National policy is focused on healthcare costs so it is a lens through which initiatives and innovations are viewed and shaped.**
- 3. There is limited evidence of improved outcomes and positive return on investment for new models of service delivery to children with medical complexity.**

DIFFICULTY IN FINDING EFFECTIVE PARTNERS

- 1. There are few similar “models of service delivery” to those developed by the CoIIN projects and other highly specialized clinics and other providers.**
- 2. The institutions (e.g., hospitals) that are natural professional allies may have other priorities and baggage with key policy-makers.**
- 3. Connection with potentially very effective advocates like Family Voices and other consumer organizations is not a typical partnership in approaching policymakers.**

Conceptual Framework for Sustainability and Replication



DISCUSSION



Wrap-Up & Next Steps



Next Steps



Reach out with any further questions!



RSVP via email to Libbi by 3/13 for the 3/23
lunch at AMCHP



Evaluation

<https://www.surveymonkey.com/r/TTLVNJY>

