Whole Person Care Collaborative

December 7, 2020
Introduction

Welcome

Introductions

Consent Agenda

November Minutes

December Agenda
Announcements/Updates
Partner Updates

• Managed Care Organizations

• Community Based Organizations

• Clinical Partners
Announcements

• Population Health LAN – tomorrow, Dec. 8th 12-1pm
• December QI Affinity Group – cancelled
• January WPCC Meeting – cancelled
Announcements

• 2021 WPCC Presentations

• Improvement Charter

• Monthly reporting: due 1st Wednesday of the month (Jan 6)

• Pay for Performance – received the 2019 results which will be compared to 2017 baseline to determine our P4P earnings
Announcements

Bree Collaborative

Value-Based Care Summit:
www.youtube.com/watch?v=-_F2e4jdDp8&feature=youtu.be

WA Health Alliance
One year extension and amendment

The Health Care Authority (HCA) invites you to provide public comment on our draft application for an amendment and one-year extension of our Medicaid Transformation Project (MTP). MTP is a five-year Section 1115 demonstration from the Centers for Medicare & Medicaid Services (CMS).

HCA is seeking CMS approval to amend our existing waiver to:

- Provide flexibility related to long-term services and supports (LTSS).
- Align the value-based payment (VBP) target for year 5 of MTP because of state adjustments due to COVID-19.

HCA is also seeking CMS approval to extend for one year to create a sixth year for MTP.

HCA has revised the draft extension and amendment proposal posted Monday, November 2, to provide additional clarity on certain programmatic aspects, such as quality assurance, evaluation, and fiscal estimates. The public comment period will be extended to Sunday, December 13, 2020, to allow 30 days to comment on the updated information.

https://www.hca.wa.gov/about-hca/healthier-washington/one-year-extension-and-amendment
Cascade Medical Center

Karen Robles
What is COVID-19?

- A novel coronavirus is a new coronavirus that has not been previously identified.
- There are many types of human coronaviruses including some that commonly cause mild upper-respiratory tract illnesses.
- COVID-19 is caused by a coronavirus called SARS-CoV2.
SARS-CoV2 (COVID-19) VIRUS
Symptoms

CDC recognized symptoms:

- FEVER
- COUGH
- SHORTNESS OF BREATH or DIFFICULTY BREATHING
- CHILLS
- FATIGUE
- MUSCLE PAIN
- HEADACHE
- SORE THROAT
- NEW LOSS OF TASTE and/or SMELL
- DIARRHEA, NAUSEA, VOMITING
- CONGESTION or RUNNY NOSE

EMERGENCY WARNING SIGNS

- TROUBLE BREATHING
- PERSISTENT PAIN or PRESSURE IN THE CHEST
- NEW CONFUSION
- INABILITY TO WAKE or STAY AWAKE
- BLUISH LIPS or FACE
Employee Screening

• At every entry there are screening stations with surgical mask, temporal thermometers, hand sanitizer and sanitation cloths for employees.
  • Employees are required to wear a surgical mask and switch halfway throughout shift or if soiled
  • Employees are required to check their temperature prior to arriving at their work station
  • Employees are required to submit COVID-19 Health Screening as soon as they arrive to their desktop

• Once the employee completes the COVID-19 questionnaire, if requirements are not met, they are to meet Samantha Jerome, Employee Health Nurse to be cleared
• If employees are not feeling well they are to stay home and contact our Employee Health Nurse, Samantha Jerome. Employees are to also notify Director on duty
COVID-19 HEALTH QUESTIONS

• In the last five days have you gathered indoors with people who do not live in your home, pursuant to Governor Inslee order?

• Have you had any of the following conditions within the past 72 hours?
  • Chills, Cough, Fever, Headache, Repeated Shaking with Chills, New Loss of Taste or Smell, Sore Throat, Shortness of Breath or Difficulty Breathing, Nausea or vomiting, Diarrhea, Fatigue, Congestion or runny nose or body aches?

• Have you had a known exposure to a COVID-19 positive person or a person with COVID-19 like symptoms in the last 14 days?
  • Chills, Cough, Fever, Headache, Repeated Shaking with Chills, New Loss of Taste or Smell, Sore Throat, Shortness of Breath or Difficulty Breathing, Nausea or vomiting, Diarrhea, Fatigue, Congestion or runny nose or body aches?

• Is anyone living in the same household currently being tested for COVID-19?

• Have you taken any fever reducing agents such as Advil, Ibuprofen, Motrin or Tylenol in the last 6 hours?

• What is your current temperature?
Patient Screening

- Patients are screened at entrance and provided with a surgical mask.
- Cascade Medical staff will take patients' temperature and ask if patient has been feeling any symptoms (fever, chills, cough, shortness of breath/difficulty breathing, fatigue, muscle aches/body aches, headache, recent loss of taste/smell, sore throat, congestion, nausea/vomiting or diarrhea).
- Patients are also asked if they have been tested for COVID-19 within the last 14 days or if they have been exposed to a positive case within the last 14 days.

* If a patient is feeling ill or has been exposed they are to be screened by triage nurse*

If it applies to the patient, support staff can schedule a telehealth/telephone appointment for patient to limit the number of bodies entering Cascade Medical.
The Respiratory Clinic was created in a separate area from our clinic to treat patients suspected of COVID-19 or symptoms related to COVID-19 meanwhile:

• Preventing further spread of the disease
• Ensure a safe environment for patients and staff at Cascade Medical

Patients are scheduled under Respiratory provider for that day from 1300-1700. Calls are received from PSR’s/Support staff/Triage Nurse/COVID coordinator to evaluate symptoms and determine the severity of the case.

Once patients arrive, they are instructed to park by the ED and call so we can check in remotely, keeping them outside our facility as much as we possibly can. Once support staff is ready to room the patient, the patient is instructed to walk to the ED door and support staff will meet, provide a surgical mask and guide the patient to the Respiratory clinic.

Respiratory clinic is kept sanitized and with proper air ventilation at all times.

A provider will attend to patient during visit to evaluate and treat.

• PPE is provided in the room prior to entering the Respiratory room
• Gown, N95 mask, face shield and gloves should be donned prior to entering the room
• No paperwork/laptop should enter the room. There is a computer specifically for the Respiratory room which remains in that room at all times
• Patient is tested for COVID-19 as a Rapid in-house test
• Provider will evaluate and treat, if patient is severely ill, patient can be treated in the Emergency Department
New Role: COVID Coordinator

DUTIES:

• Work along Samantha Jerome (Employee Health Nurse, RN) and Alex Riggs (Infectious Disease, RN)
• Keep track of Outpatient testing numbers via excel spreadsheet
• Schedule Outpatient COVID-19 testing
• Collect nasal samples from patients and transfer to the lab
• Call patients with COVID-19 results and provide education with both negative and positive results
• Contract Tracing with every positive COVID-19 case
• Answer questions patients may have in regards to COVID-19

With an increase in COVID-19 cases in our state and community, the role of the COVID coordinator is to help keep our patients safe and informed by testing for COVID-19 and by providing patient education.
COVID COORDINATOR WORKFLOW

Collect COVID report of patients tested of the previous day to update spreadsheet

Confirm with lab that numbers match (patients tested, # of Rapid/Quest and # of Positives/Negatives

Review pending results and call patients

Outpatient testing takes place from 1300-1430 Monday-Friday. Once patient’s arrive, they are checked in remotely

PSR’s/Triage Nurse/COVID Coordinator schedule patients accordingly on Outpatient COVID testing schedule

With Positive results, Contract Tracing is completed

Once lab processes results, call patients and provide instructions/education whether results are positive or negative

• During Clinic hours the triage nurse can determine if a patient with respiratory/COVID-19 symptoms or asymptomatic patients need a provider visit or outpatient COVID-19 test.
• During non-clinic hours patients will need to be seen in the ED if they are having respiratory/COVID-19 symptoms. The ED is not to be triaging patients over the phone as per their protocols.
COVID-19 Testing Criteria At Cascade Medical

Testing for Symptomatic and Exposed individuals including:
- Employee Health
- First Responders
- Cascade School District
- Mountain Meadows
- Respiratory Clinic
- Emergency Department
- Acute Care
- Endoscopy

* FOAM TIP SWAB FOR IN HOUSE RAPID MOLECULAR TESTING- CM ANTERIOR NARES COLLECTION DO NOT PUT IN VIRAL TRANSPORT MEDIA. PLACE BACK IN PAPER COVER AND LABEL.

All Outpatient testing including Symptomatic and Asymptomatic Patients
- Due to high demand and strain on resources we are not currently testing for travel or gatherings.
- FOAM TIP ANTERIOR NARES COLLECTION- PUT IN VIRAL TRANSPORT MEDIA SEND VIA QUEST

CONSIDERATIONS:
- Test 5-7 days after initial exposure to a positive individual but not after 14 days

Testing Information:
- Collect all Anterior nares swabs in PPE and N95 mask
- Make sure patient is masked and have them keep their mouth covered during collection.
- Using gentle rotation, push the swab until resistance is met at the level of the turbinates (less than one inch into the nostril). Rotate the swab several times against the nasal wall then slowly remove from the nostril. Using the same swab, repeat collection in the other nostril.
Local healthcare agencies are being asked to assist with a portion of follow up for their patients who are testing positive for COVID-19. Below is the adapted version specific to the Cascade Medical COVID department workflows.

Overview of Workflow:

The staff designated as the interviewer will contact the patient (also referred to as the “case”) who has tested positive within 24 hours of returned results. The interviewer will provide the following to the patient, using the COVID-19 Positive Result Data Collection form to document responses:

1. Verify patient symptoms and provide care options and education
2. Educate patient about COVID-19 and need to isolate
3. Gather epidemiology data
4. Educate patient about illness course and instruct patient to inform possible exposed persons of their COVID-19 risk
5. Conclude by providing referral information as needed to assist case in maintaining health/safety and receive follow up medical treatment
Contract Tracing (continued)

Workflow for COVID-19 Resulting Interviews:

- Initiation of Phone call with Case (Patient)
- Notify patient of results
- Education patient on Incubation and Infection Periods
- Get information about patient’s work situation
- Education patient about close contacts
- Provide case management if needed
- Conclude Interview
Frequently Asked Questions

I WAS RECENTLY EXPOSED TO A POSITIVE CASE. WHAT DO I DO NOW?

• Advise the patient that if you know you spent a total of 15 minutes over the course of 24 hours (or multiple exposures totaling 15 minutes over the course of a 24-hour period, both count), with/without a face mask and less than six feet away from a positive case, you must quarantine yourself for 14 days from your last exposure, regardless of your test result.
• Recommend testing 5-7 days after exposure to detect viral load unless patient is symptomatic.

WHAT DO I DO WHILE I’M WAITING FOR MY RESULTS?

• Please remain in self-isolation at least until you have your results back. If your results are negative and you have no symptoms you no longer need to self-isolate, but please continue to do the following to protect yourself and others:
  1.) Practice Social Distancing
  2.) Wear a face mask
  3.) Wash your hands
  4.) Avoid touching your face
  5.) Avoid traveling when possible

*If you begin to develop symptoms, please immediately self-isolate.

I HAVE A COUGH, SHOULD I GET TESTED?

• It is important to know if there has been an exposure or if there are any other symptoms the patient has been feeling to evaluate if patient meets testing criteria.

HOW WILL I KNOW WHAT MY RESULTS ARE?

• We will give you a call once we receive results. Due to high demand in testing results can take 48-72 hours to finalize.
  * Rapid tests- Same day results
• This pandemic has changed the way we live in many ways. It not only has affected our state, it is a worldwide issue.
• Cascade Medical is taking every precaution to keep our patients and community safe.
• Adding Respiratory Clinic and a COVID coordinator has helped alleviate the ongoing issues with our current pandemic.
• We understand the current situation can cause stress and/or anxiety. Along with patient education, we also offer help, so patients know they are not alone.
  • Aisha Houghton, MSW, LSWAA is our Clinical Social Worker
  • Maxwell Moholy, PhD is our Behavioral Health Consultant

Cascade Medical is working closely with the Chelan-Douglas Health District and State Department of Health in response to the threat of 2019 Novel Coronavirus (COVID-19)
• While this is a new virus, our response is well-practiced. Our staff train year-round to respond to infectious diseases safely, with protocols in place to utilize specialized equipment, protective gear and spaces designed for infection control. We are staying current on best-practice guidelines from the CDC and our local health district, with daily briefings from state and federal partners.
Action Health Partners

Kaitlin Quirk & Paige Bartholomew
BUILDING BRIDGES TO OPTIMAL HEALTH
INTEGRITY • EMPATHY • EMPOWERMENT

CDSME Program to Date
Overview

• What is CDSME
• Program Information
• Workshop Data
• Participant Demographics
• Opportunities
What is CDSME

• Stanford Evidence Based Program
• Self-Management Resource Center (SMRC)
• Goal to improve health status, self-management skills and self-efficacy
• Target Population of those with Chronic Conditions and their caregivers
What is CDSME (con.)

- Small group workshops
- Lay Lead
- Highly interactive, focuses on building skills, sharing experiences and peer support
- 6-week workshop, meet once a week for 2.5 hours
Evidence-Based Programs and Workshops in NCW

Family Health Centers – Okanogan
- Chronic Pain Self-Management Program (CPSMP)
- Diabetes Self-Management Program (DSMP)
- Program de Manejo Personal de la Diabetes

Action Health Partners – Wenatchee
- Chronic Disease Self-Management Program (CDSMP)
- CPSMP
- DSMP
- Program de Manejo Personal de la Diabetes
- Tomando Control de su Salud

Moses Lake Community Health Center – Moses Lake
- CDSMP
- Tomando Control de su Salud

Source: Evidence-Based Leadership Council, Map of Programs
http://www.eblcprograms.org/evidence-based/map-of-programs/
From 2013-2019

• **61** workshops have been offered in *English* and *Spanish*
  • 12 CDSMP
  • 15 CPSMP
  • 34 DSMP

• For a total of **504** participants
Location of CDSME Workshops, 2013-2019

- Chelan-Douglas Counties: 72%
- Okanogan County: 28%
• 77% Graduation Rate (N=33)
• Average number of workshops held per year is 8 (2013-2019)
• 20 active Lay Leaders
  • 25% first being participants in the program
  • **ALL** having lived experience with a chronic condition or as a caregiver
  • 3 Master Trainers in NCW
Continuing Education

- Action Health Partners is contracted with DSHS to provide caregiver CEU's
- AHP provides the CEU's for **FREE**
- 12 CEU's awarded if all 6 sessions are attended
- 10 CEU's awarded if 5 sessions are attended
- Average in person CEU course can cost $20 - $85 per hour

<table>
<thead>
<tr>
<th>Number of People Receiving CEU's</th>
<th>Number of CEU Hours</th>
<th>Estimated Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>35</td>
<td>420</td>
<td>$8,400 – $35,700</td>
</tr>
</tbody>
</table>
Workshop Data
Pre & Post RAND Survey Scores, 2018-2019
Answered: 42  Skipped: 26

- Increase: 71%
- Decrease: 26%
- Same: 2%
## DSMP Pre & Post Test

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Increase</th>
<th>Decrease</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diabetes Knowledge</td>
<td>17%</td>
<td></td>
</tr>
<tr>
<td>Stress Management Knowledge</td>
<td>42%</td>
<td></td>
</tr>
<tr>
<td>Confidence</td>
<td>10%</td>
<td></td>
</tr>
<tr>
<td>Behavior</td>
<td>42%</td>
<td></td>
</tr>
<tr>
<td>Feeling Overwhelmed</td>
<td></td>
<td>17%</td>
</tr>
</tbody>
</table>
DSMP Post Test - Behavior

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>Behavior</td>
<td>42%</td>
</tr>
</tbody>
</table>

98% of participants self-identified continuing using self-management skills.
After taking this workshop, I am more confident that I can manage my chronic condition(s), 2018-2019

Answered: 40  Skipped: 32

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>Confidence</td>
<td>10%</td>
</tr>
</tbody>
</table>

85% of participants selected a confidence score of 8 or more
Participant Demographics
Gender of Participants, 2018-2019
Answered: 125  Skipped: 15

- Female: 78%
- Male: 22%
Age of Participants, 2018-2019

Answered: 123  Skipped: 17

- 0-19: 1%
- 20-39: 18%
- 40-59: 32%
- 60-79: 45%
- 80+: 5%
Race & Ethnicity

Race of Participants, 2018-2019
Answered: 115  Skipped: 25

- American Indian or Alaska Native: 3%
- Native Hawaiian or other Pacific Islander: 1%
- Asian: 80%
- Black or African American: 2%
- Multiple Races: 15%

Ethnicity of Participants, 2018-2019
Answered: 122  Skipped: 18

- Hispanic or Latino: 27%
- Not Hispanic or Latino: 73%
Highest Level of Education Completed, 2018-2019

Answered: 117  Skipped: 23

- 8th Grade or Less: 9%
- Some High School: 3%
- High School Diploma: 12%
- Some College or Technical School: 38%
- College Degree: 23%
- Graduate or Professional Degree: 15%
Health Insurance of Participants, 2018-2019

- Private Insurance: 43%
- Medicare: 36%
- Medicaid: 21%
- Medicare Advantage: 10%
- I don't have insurance: 5%
- I don't know: 5%
- Other: 0%
Survey Question: Which health condition(s) do you have?

- 19 options
- 14% None
- 38% of participants identify as caregivers

<table>
<thead>
<tr>
<th>Number of Health Conditions</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>102</td>
<td>86%</td>
</tr>
<tr>
<td>2</td>
<td>84</td>
<td>71%</td>
</tr>
<tr>
<td>3</td>
<td>62</td>
<td>52%</td>
</tr>
<tr>
<td>4</td>
<td>47</td>
<td>39%</td>
</tr>
<tr>
<td>5</td>
<td>27</td>
<td>23%</td>
</tr>
<tr>
<td>6</td>
<td>14</td>
<td>12%</td>
</tr>
<tr>
<td>7</td>
<td>10</td>
<td>8%</td>
</tr>
<tr>
<td>8</td>
<td>5</td>
<td>4%</td>
</tr>
</tbody>
</table>
### Top 10 Health Conditions of Participants, 2018-2019

<table>
<thead>
<tr>
<th>Condition</th>
<th>Answered: 119</th>
<th>Skipped: 21</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depression or Anxiety Disorders</td>
<td>37%</td>
<td></td>
</tr>
<tr>
<td>Chronic Pain</td>
<td>33%</td>
<td></td>
</tr>
<tr>
<td>Hypertension (High Blood Pressure)</td>
<td>32%</td>
<td></td>
</tr>
<tr>
<td>High Cholesterol</td>
<td>31%</td>
<td></td>
</tr>
<tr>
<td>Arthritis/Rheumatic Disease</td>
<td>29%</td>
<td></td>
</tr>
<tr>
<td>Diabetes</td>
<td>29%</td>
<td></td>
</tr>
<tr>
<td>Other Chronic Conditions</td>
<td>23%</td>
<td></td>
</tr>
<tr>
<td>Obesity</td>
<td>20%</td>
<td></td>
</tr>
<tr>
<td>Asthma/Emphysema/Other Chronic Breathing or Lung...</td>
<td>15%</td>
<td></td>
</tr>
<tr>
<td>Osteoporosis (Low Bone Density)</td>
<td>12%</td>
<td></td>
</tr>
</tbody>
</table>
Have You Ever Taken a Course or Class in How to Manage Your Diabetes?

All Participants, 2018-2019
Answered: 51  Skipped: 21

- Yes: 18%
- No: 80%
- Don't know or not sure: 2%

Participants with Pre-Diabetes, Type 1 or Type 2 Diabetes, 2018-2019
Answered: 26  Skipped: 3

- Yes: 81%
- No: 19%
Opportunities
Implementing Virtual Workshops

• Zoom Platform workshops
• Will not be safe for groups of participants with multiple chronic conditions
• Improve reach of workshops targeting rural participants
• Improve availability of workshops by being able to use Lay Leaders/CHWs who may not live-in same county/area
• Computer check out to improve equity for Lay Leaders and Participants
Increase the Lay Leader/CHW Workforce

Mastery of Self → Mastery of Relationship → Mastery of Environment → Mastery of Change

CDSME Participant → CDSME Lay Leader/CHW → CDSME Master Trainer

Adapted from Communities Joined in Action's (CJA) Culture of Health Leader Evaluation
# Partnerships

<table>
<thead>
<tr>
<th>Previous</th>
<th>Current</th>
<th>Future</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Health Center</td>
<td>Catholic Charities</td>
<td>Additional Health Systems</td>
</tr>
<tr>
<td></td>
<td>Confluence Stroke Program</td>
<td>Colville Confederated Tribes – Wisdom Warriors</td>
</tr>
<tr>
<td></td>
<td>Comagine CDSME HUB Workgroup</td>
<td>Managed Care Organizations</td>
</tr>
<tr>
<td></td>
<td>Columbia Basin Hospital</td>
<td>More Culturally Appropriate Outreach</td>
</tr>
<tr>
<td></td>
<td>Samaritan Hospital</td>
<td></td>
</tr>
</tbody>
</table>
Opportunities Summary

• Provides an opportunity to partner to address the selected MTP project of Chronic Condition Management

<table>
<thead>
<tr>
<th>Behavior Change</th>
<th>Increased Confidence</th>
<th>Increased Quality of Life</th>
</tr>
</thead>
<tbody>
<tr>
<td>42%</td>
<td>45%</td>
<td>71%</td>
</tr>
</tbody>
</table>
Upcoming Virtual Workshop

Zero Session – January 7th
1:30PM

Thursdays, January 14th – February 18th
1:30-4:00PM

Virtual Living Well with Chronic Disease

Join us through Zoom to learn TOOLS during this FREE workshop and take CONTROL of your CHRONIC DISEASE. These tools will empower you to improve your quality of life! The first session is an introduction to Zoom and what to expect.

Some tools include:

- Planning
- Problem Solving
- Decision Making
- Effective Communicating
- Sleeping Strategies
- Medication Management
- Safe Physical Exercises
- Breathing Techniques

Workshops are once a week for 6 weeks. Materials are FREE and mailed to your home! 12 Continuing Education (CE) Credits are available.

Upcoming Sessions:
Thursdays, January 14th - February 18th
1:30-4pm
Zero Session/Zoom Intro Jan 7th
1:30pm
To Register:
Kaitlin Quirk at (509) 630-5592 or kaitlin.quirk@cc-ahep.com
Resources


• National Council on Aging, Improving Quality of Life and Health Care Outcomes Through CDSME Programs, [https://www.ncoa.org/healthy-aging/chronic-disease/](https://www.ncoa.org/healthy-aging/chronic-disease/)

• National Council on Aging, Wisdom Warriors Program Description, [https://www.ncoa.org/resources/wisdom-warriors-program-description/](https://www.ncoa.org/resources/wisdom-warriors-program-description/)

• Self-Management Resource Center, [https://www.selfmanagementresource.com/](https://www.selfmanagementresource.com/)
Resources (con.)


Questions
Thank You

Kaitlin Quirk kaitlin.quirk@cc-ahp.com
Discussion
2021 Lookback: How has 2020 challenged or changed you?
Next meeting: February 1, 2021

No January meeting