





Community-Centered Health Homes: Moving from Conceptual Framework to Full Scale Implementation

COMMUNITIES JOINED IN ACTION 2015

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Learning Objectives

- A clear understanding of the Community-Centered Health Home Model
- A clear understanding of the CCHH Demonstration Project on the Gulf Coast
- Lessons learned on CCHH Implementation



A CLEAR UNDERSTANDING OF THE COMMUNITY-CENTERED HEALTH HOME MODEL

LEARNING OBJECTIVE I

















San Francisco Chronicle

"I diagnosed 'abdominal pain' when the real problem was hunger; I confused social issues with medical problems in other patients, too.

...I had neither the skills nor the resources for treating them, I ignored the social context of disease altogether."

- Laura Gottlieb, MD "Funding healthy society helps cure health care" August 23, 2010



Community-Centered Health Homes

Community-Centered Health Homes

Bridging the gap between health services and community prevention

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Prevention

Prevention institute is a nonprofit, national center dedicated to improving community health and well-being by building momentum for effective primary prevention. Primary revention means taking action to build resiliance and to prevent problems before they occur. The institution work is characterized by a strong commitment to community participation and promotion of equitable health outcomes among all social and economic groups. Since its founding in 1997, the organization has trocused on injury and violence prevention, traffic safety, health dispatches, nutrition and physical activity, and youth development. This, and other Prevention institute documents, are available at no cost on our website.



Community-Oriented Primary Care







"The last time we looked in the book, the specific therapy for malnutrition was food."

- Jack Geiger, MD





Community-Centered Health Home

Patient-Centered Medical Home

Medical Home





The defining attribute of a Community-Centered Health Home is active involvement in community advocacy and systems change. A CCHH not only acknowledges that factors outside the health care system affect patient health outcomes, but also actively participates in improving them.



INQUIRY

Collect data on social, economic & community conditions

Aggregate prevalence data

ANALYSIS

Review health & safety trends

Identify priorities & strategies with community partners

ACTION

Coordinate activity with community partners

Advocate for community health

Mobilize patient populations

Strengthen Partnerships

Establish model organizational practices

Capacities Needed for Implementation

Partnerships

Innovative Leadership

Dedicated & Diverse Team

Staff Training & Continuing Education





"You can do more than bail out these medical disasters after they have occurred... go upstream from medical care to forge instruments of social change that will prevent such disasters from occurring in the first place."

- Jack Geiger, MD



A CLEAR UNDERSTANDING OF THE CCHH DEMONSTRATION PROJECT ON THE GULF COAST

LEARNING OBJECTIVE II



GRHOP PCCP

Focal Funding

Systems Investments

15 Clinics across Louisiana, Mississippi. Alabama and Florida

CCHH Demo

GNOPQii

Emergency Management

HIE Investments



LPHI & PI PARTNERSHIP



Partnership History

Prevention Institute-CCHH Framework Community PCCP-Clinics LPHI

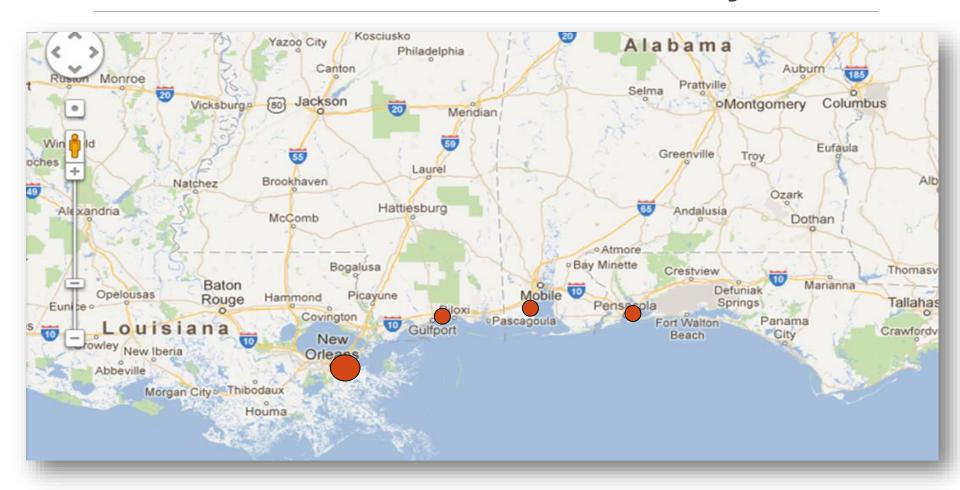


Relationship Success Factors

- ✓ Similar Organizational Goals
- **✓**Shared Metrics
- ✓ Clear Objectives
- **✓**Specific Roles



CCHH Demonstration Project





LESSONS LEARNED ON CCHH IMPLEMENTATION

LEARNING OBJECTIVE III



QUALITY IMPROVEMENT V. CCHH

LESSON I







Application Review

- Nine applications from great organizations
- State specific review panels
 - Internal Staff and External Partners
 - Qualitative and Quantitative Scoring mechanisms.
 - Review was conducted independently and as a group.
 - Two Thresholds
- Needed more CCHH to complement QI approaches



Clinical Quality Initiative vs CCHH

CLINICAL QUALITY

- Focus is on patients
- Clinic sets priorities
- Clinic decides strategies
- Clinic directs inquiry, analytics and action
- Action more limited to <u>services</u> only
- Partners generally <u>clinical and social</u> <u>services</u> roles chosen by clinic
- Clinic quality initiatives can be directly aligned with/adjunctive to community agenda

CCHH

- Focus on <u>residents</u>
- Community sets priorities
- Community decides strategies
- Clinic <u>supports</u> community throughout inquiry, analytics and action
- Action emphasizes <u>systems</u>, <u>policy and</u> <u>environmental change</u>
- Community vets partners assuring responsible inquiry, analytics and action (policy and environmental change)
- Partners are civic engagement organizations or support them
- Clinic role in CCHH can be directly aligned with/ adjunctive to clinic quality initiatives



PDSA APPROACH

LESSON II



Application Review





Two Phase Approach to Clinic Success

Phase I

- Process the Model
- Develop Work Plan
- Build Relationships

Phase II

- Implement Work Plan
- Identify trends through Inquiry and Analysis
- Continued Community Partnership



Technical Assistance





STANDARD V. CUSTOM OFFERINGS

LESSON III



Technical Assistance

INDIVIDUAL OPPORTUNITIES

GROUP OPPORTUNITIES

- ✓ Weekly Coaching Calls
- ✓ Individual Assignments
- ✓ Site Visits

- ✓ In Person Meetings
- ✓ Virtual Webinars
- ✓ Conferences

Clinic Phase I Measures of Success

Self- Assessment Participation

"Two Steps"
Understanding

Organizational Culture Development

Authentic Community Engagement

QI Exploration

Develop CCHH Work Plan



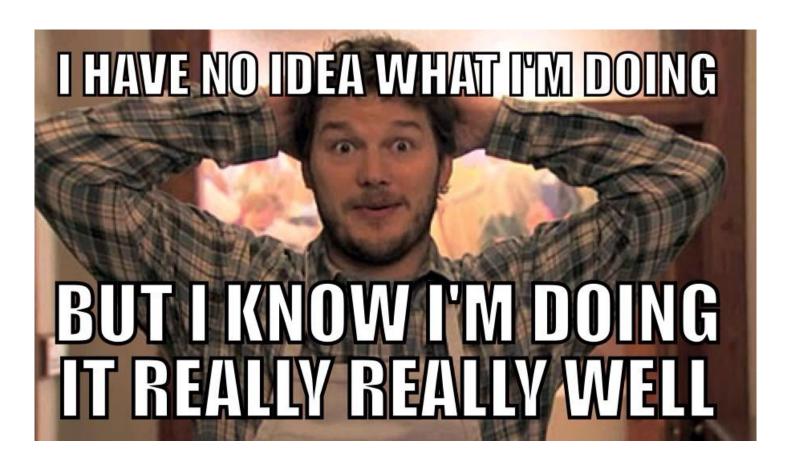
DEFINING SUCCESS

LESSON IV

Demonstration Project Success

- Success for CCHH will be determined by how the clinic has transformed its processes to be in better relationship with the community and support the needs of the community.
- LPHI should be able to answer the question "Have PCCP investments contributed to health centers' increased adoption and implementation of inquiry, analysis, and action elements of CCHH?

Measuring Success





Clinic Phase I Themes

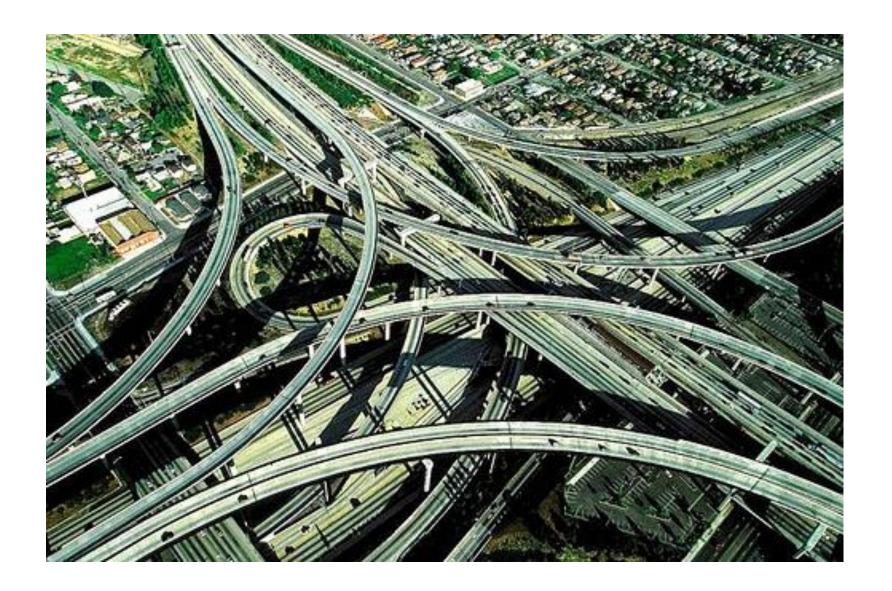
- Linkage between problem and partners is till not clear.
- The understanding of what inquiry and analysis look like internally are unclear.
- Development of organizational culture around CCHH adoption.
- •The development of a core team to champion implementation



CCHH IS NOT LINEAR

LESSON V







What's Next for LPHI

Phase II of the Demonstration Project

- Clinics are identifying how the model will change their organizational practices
- Providing continued technical assistance to clinics
- Synthesizing lessons learned and packaging Technical Assistance

Development of Technical Assistance Offerings

- Identifying Group and Individual Learning Opportunities for grantees
- Packaging original content for future projects

Identifying Additional Opportunities for Model Advancement

- Opportunities to continue supporting the current grantees
- Opportunities and resources to support new sites



What's Next for Pl

Refining the Model

- Continuing to partner with LPHI and others to support current grantees
- Synthesizing lessons learned about implementation of the model

Catalyze Further Testing of the Model

- Working in other regions to inform funder support of the CCHH model
- Synthesizing lessons learned about supporting the model

Advance Broader Systems Change

- Examine potential financing options, such as Accountable Communities for Health, Wellness Trusts, etc.
- Identifying policy levers



Questions?





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