



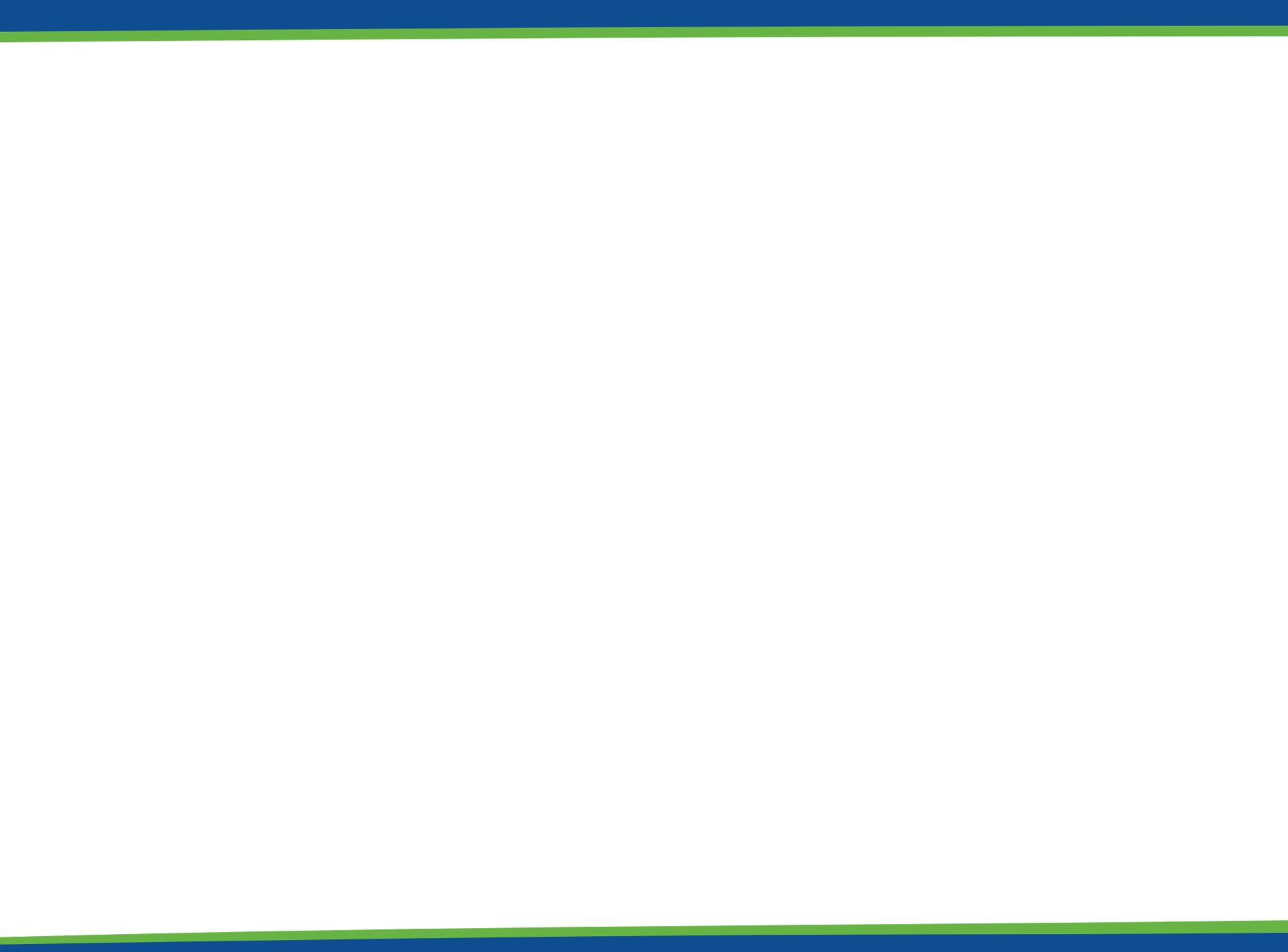
71st Annual OPHA
Conference & Meeting

Corvallis, Oregon

October 12, 2015

Assessing the impact of community-based interprofessional student teams on health outcomes & healthcare costs.

Katherine Bradley, PhD, RN; Peggy Wros, PhD, RN; Nic Bookman, MPH



1 | PROJECT OVERVIEW

1 | PROJECT OVERVIEW

2 | DEFINING THE POPULATION

- 1 | PROJECT OVERVIEW**
- 2 | DEFINING THE POPULATION**
- 3 | OUTCOME MEASURES**

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- 4 | DEFINING COST**

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- 6 | Q & A**

1 | **PROJECT OVERVIEW**

2 | DEFINING THE POPULATION

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I-CAN Priorities

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Expand partnerships between OHSU, neighborhood clinics, and community service agencies.

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Create a collaborative model for clinical practice and interprofessional education.

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Improve access to local health care services for the uninsured, isolated, or medically vulnerable.

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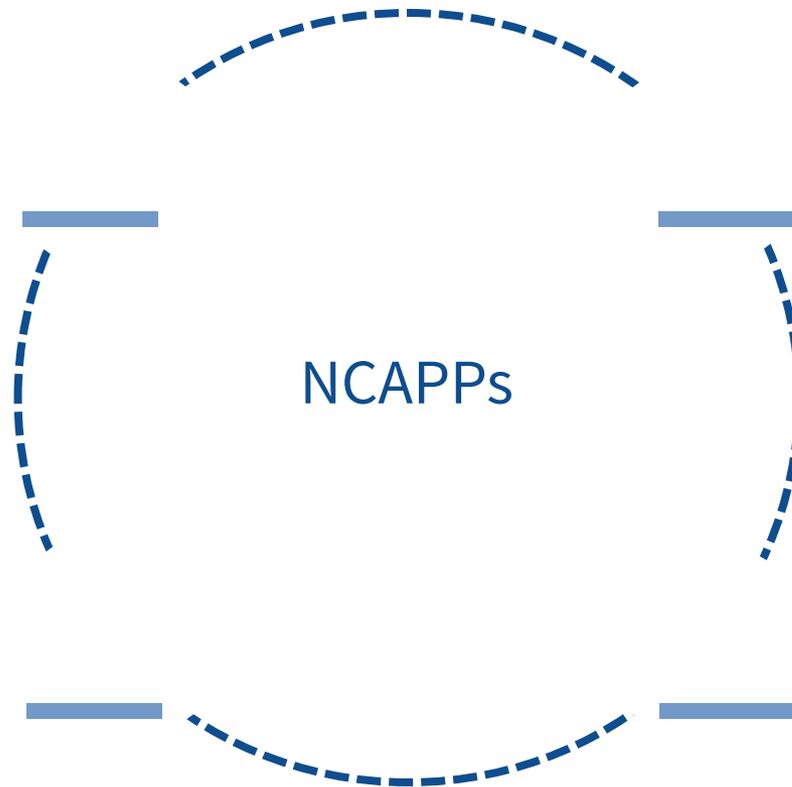
Improve access to local health care services for the uninsured, isolated, or medically vulnerable.



Address the Triple Aim goals of increasing satisfaction with the healthcare experience, improving population health outcomes, and reducing or containing per capita costs.

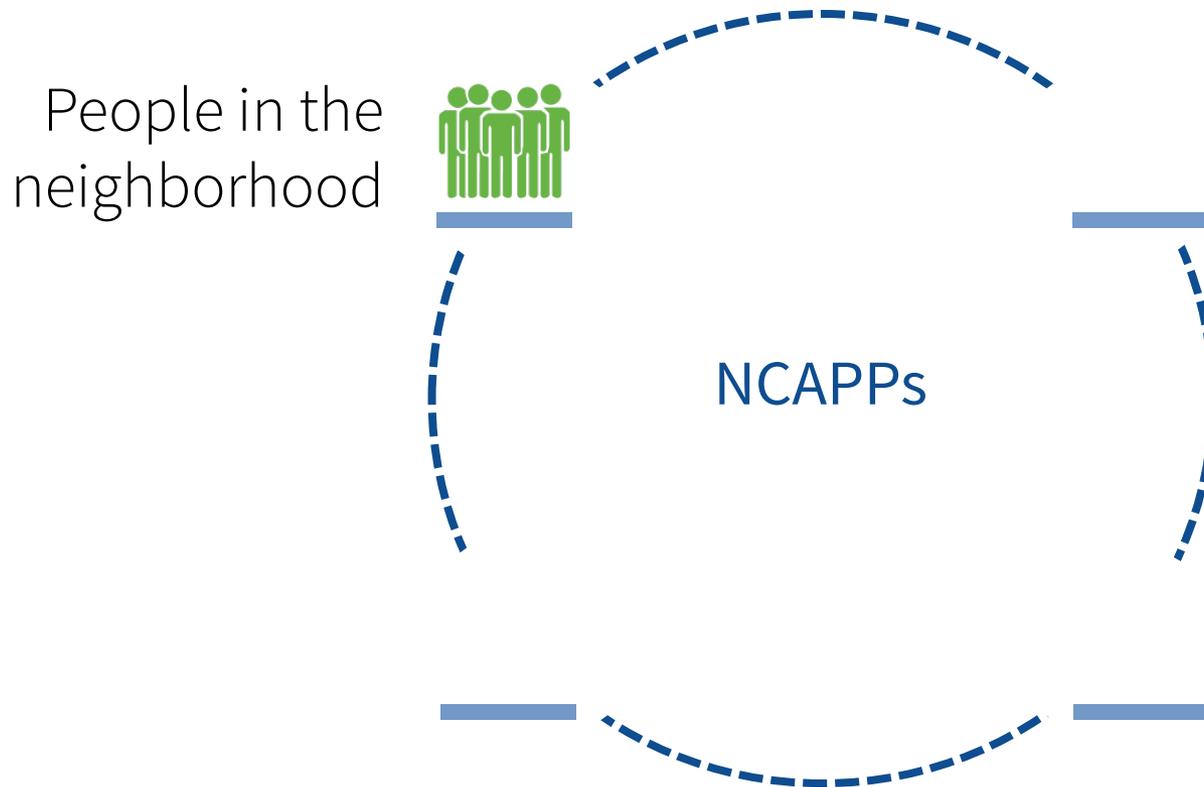
Formation of NCAPPs

Neighborhood Collaboratives for Academic-Practice Partnership



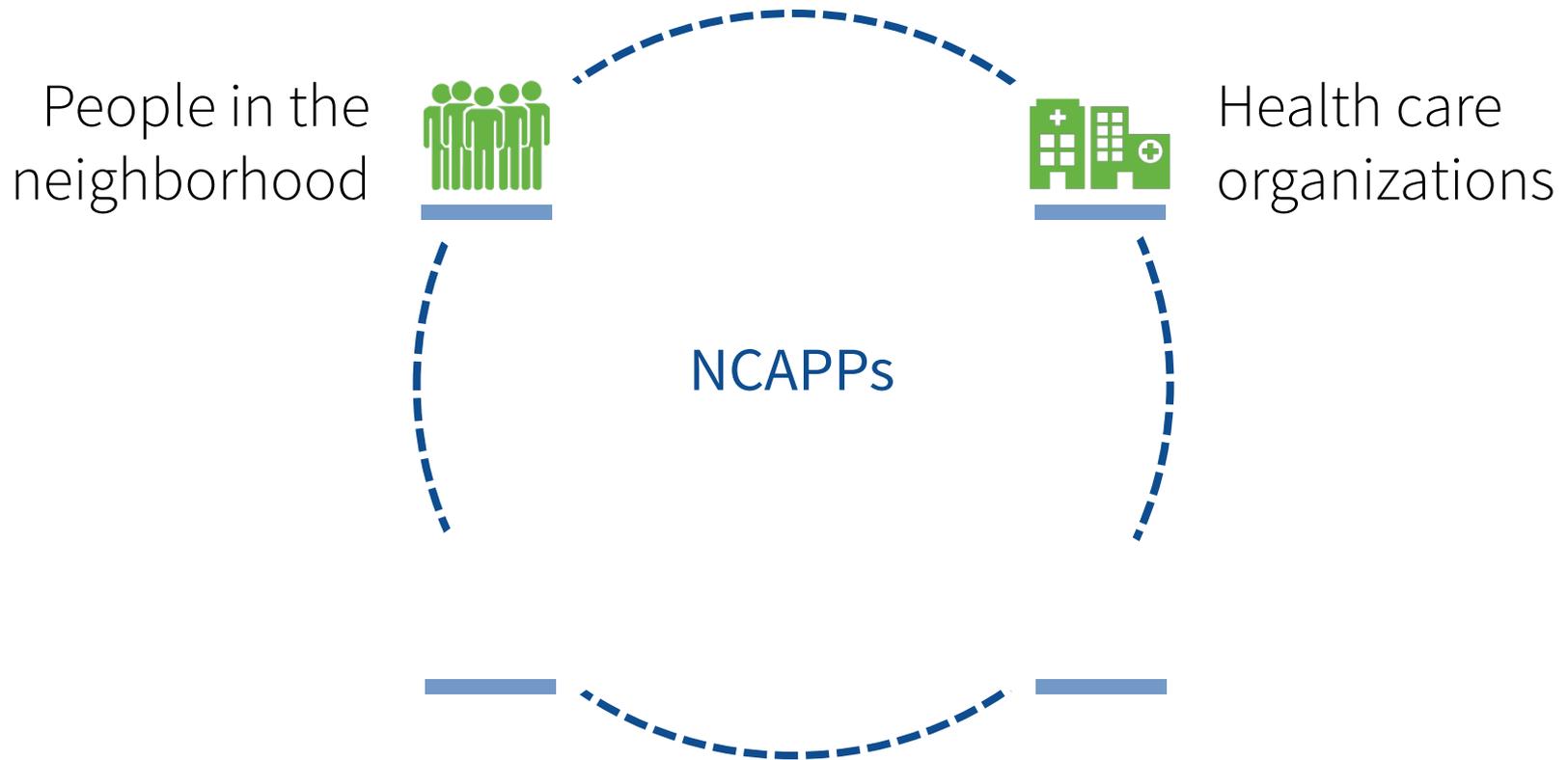
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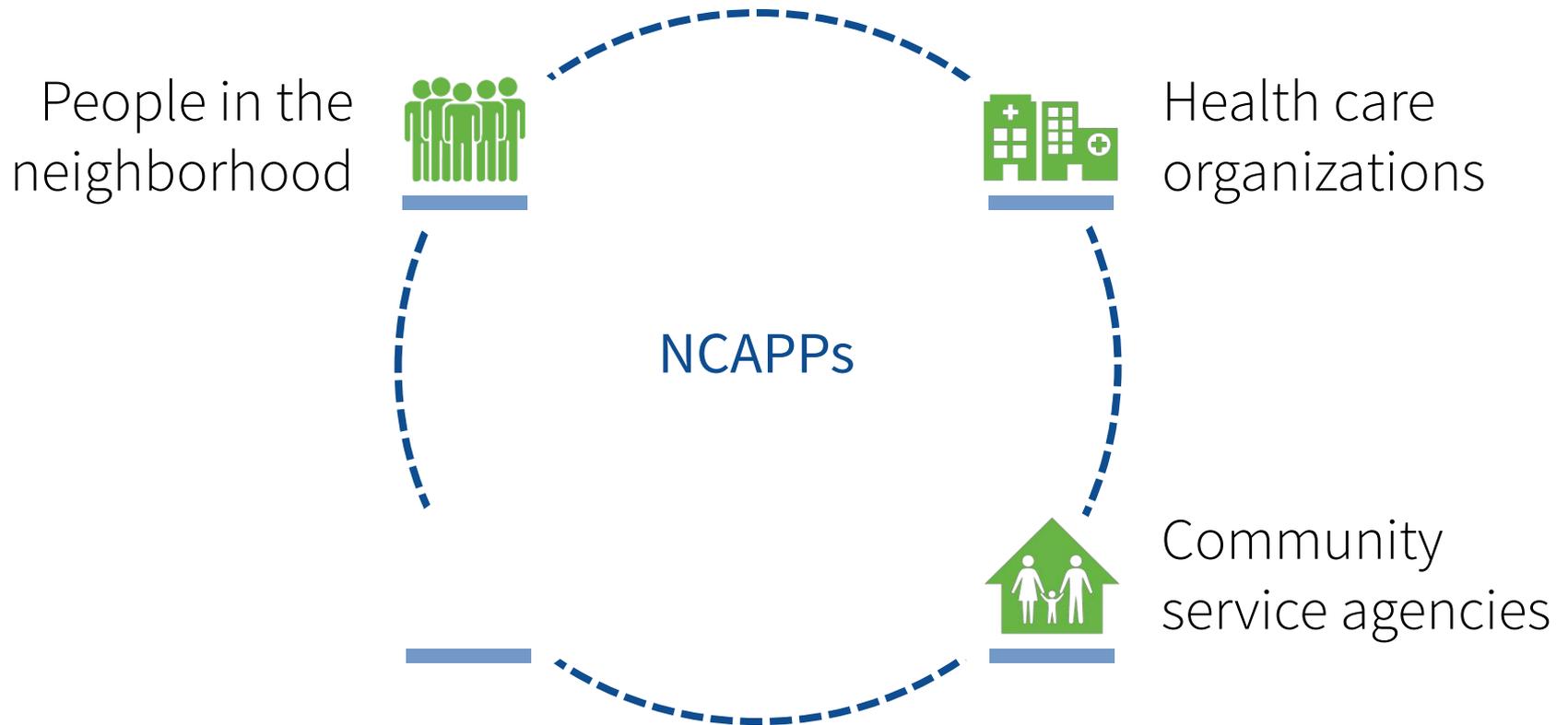
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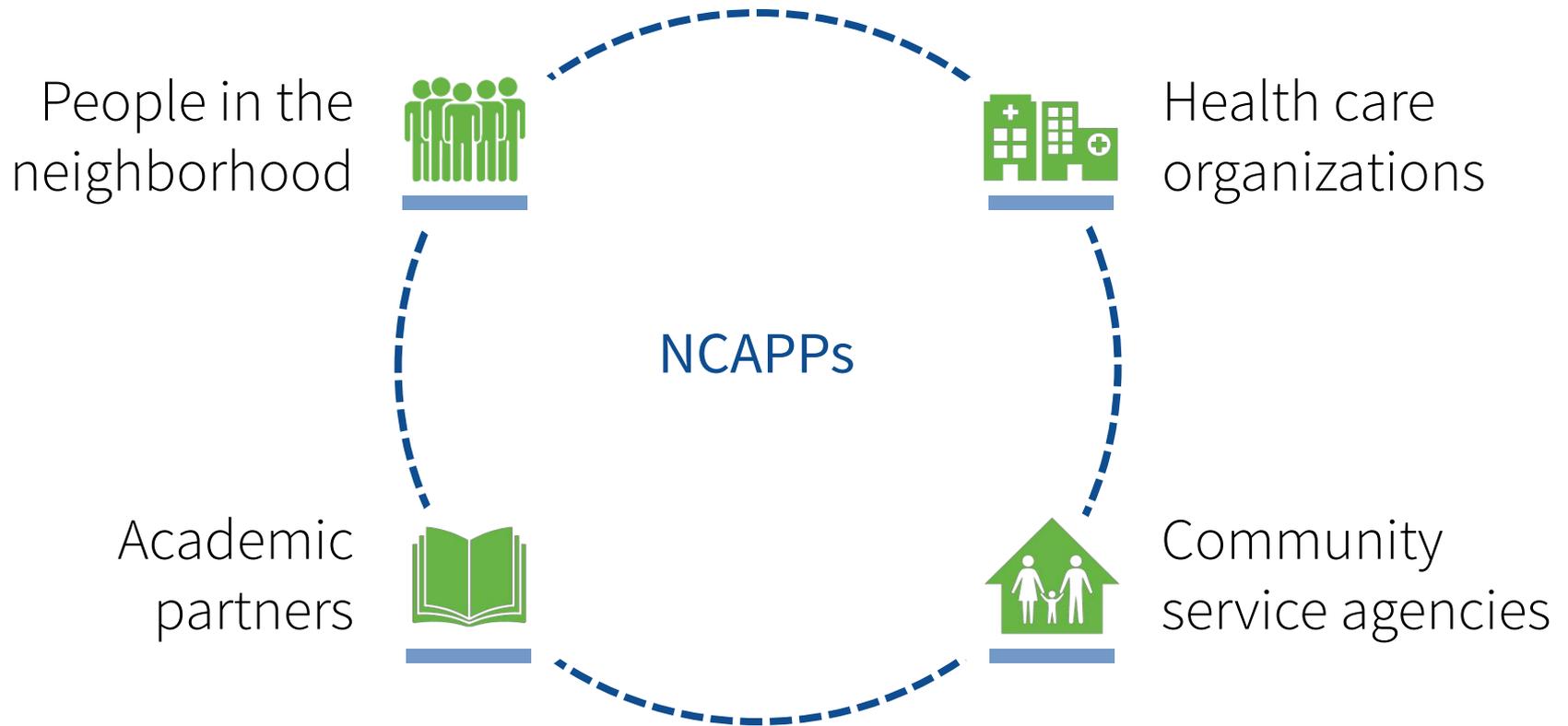
Formation of NCAPPs

Neighborhood Collaboratives for Academic-Practice Partnership



Formation of NCAPPs

Neighborhood Collaboratives for Academic-Practice Partnership



Academic Partners within OHSU

I-CAN brings together students and faculty from the:

Academic Partners within OHSU

I-CAN brings together students and faculty from the:



School of Nursing

3rd and 4th Year Students

Academic Partners within OHSU

I-CAN brings together students and faculty from the:



School of Nursing

3rd and 4th Year Students



School of Medicine

2nd and 3rd Year Students

Academic Partners within OHSU

I-CAN brings together students and faculty from the:



School of Nursing

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School of Dentistry

4th Year Students



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School of Nursing

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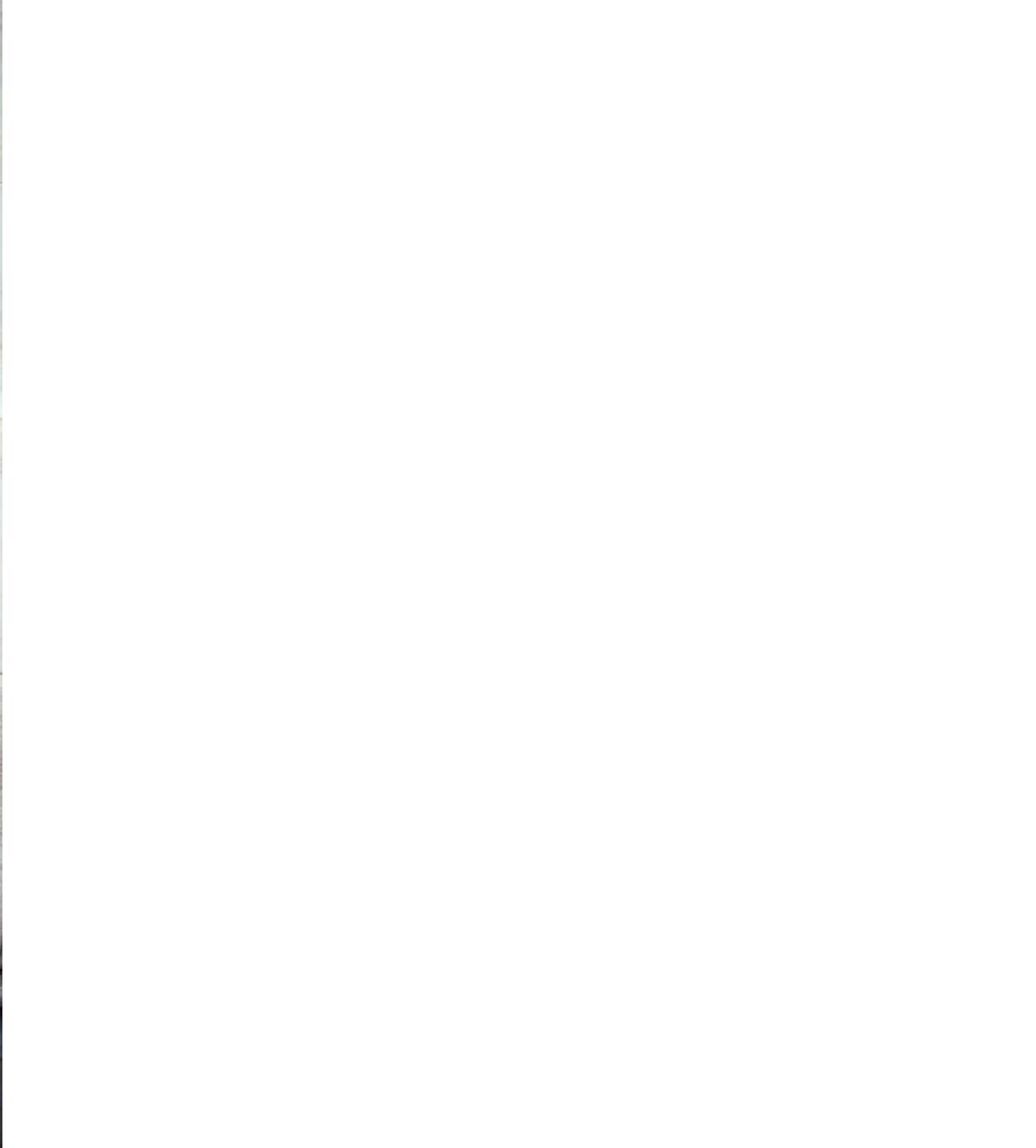
College of Pharmacy

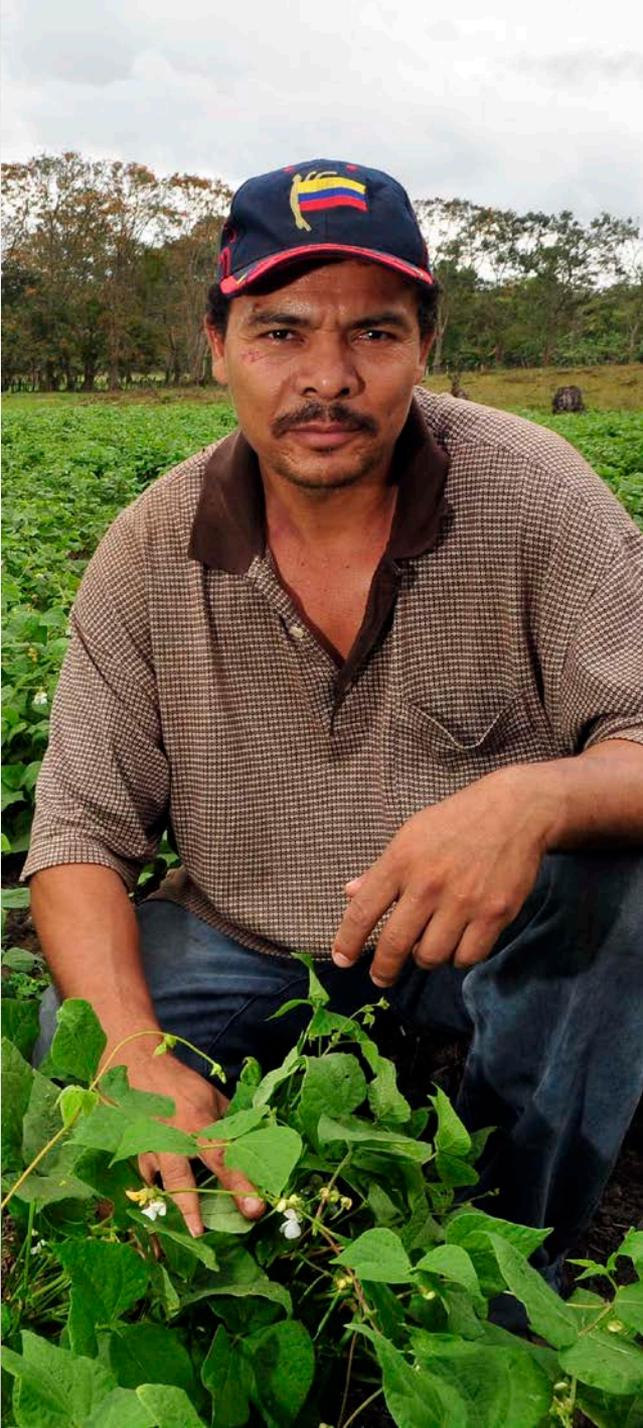
4th Year Students

3

SITES

POPULATIONS







Care Coordination Process

Neighborhood Collaboratives for Academic-Practice Partnership



People in the neighborhood



Health care organization



Community service agency



Community service agency



Dental clinic (standalone)



I-CAN student teams

Care Coordination Process

Neighborhood Collaboratives for Academic-Practice Partnership



Care Coordination Process

Neighborhood Collaboratives for Academic-Practice Partnership



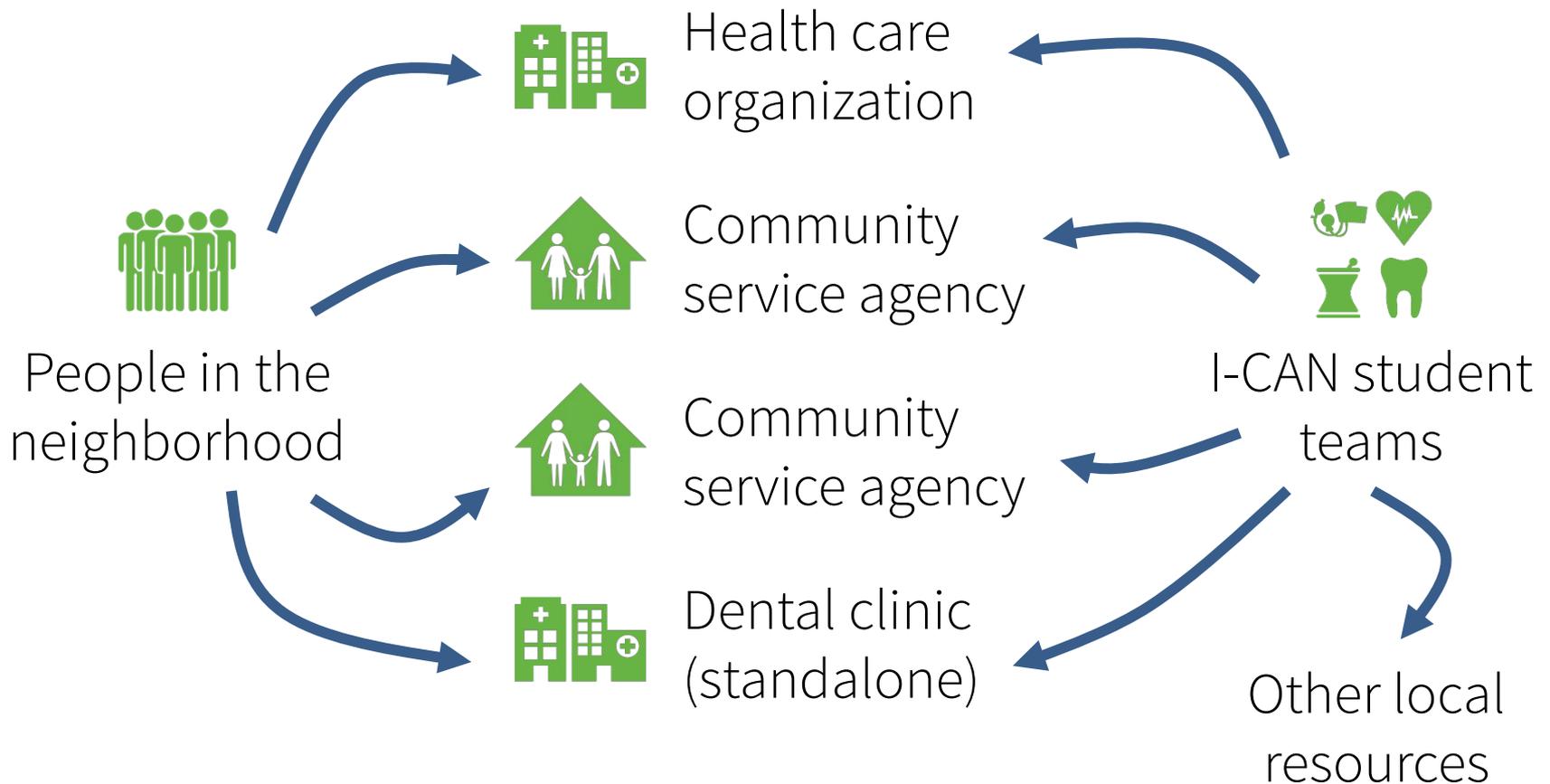
Care Coordination Process

Neighborhood Collaboratives for Academic-Practice Partnership



Care Coordination Process

Neighborhood Collaboratives for Academic-Practice Partnership





Agencies Refer Clients with Need



**Interprofessional Student Teams
Meet Weekly with Clients**



**Students Work Under Licensed
Faculty-in-Residence**

1 | PROJECT OVERVIEW

2 | DEFINING THE POPULATION

3 | OUTCOME MEASURES

4 | DEFINING COST

5 | CONCLUSIONS

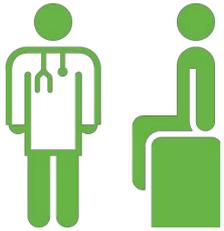
6 | Q & A

Primary Care, Housing, & Insurance

At the point when clients start working with I-CAN:

Primary Care, Housing, & Insurance

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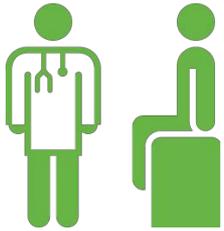


37%

Of clients lack a
primary care
home

Primary Care, Housing, & Insurance

At the point when clients start working with I-CAN:



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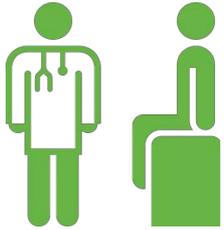


23%

Of clients lack
stable housing

Primary Care, Housing, & Insurance

At the point when clients start working with I-CAN:



37%

Of clients lack a
primary care
home



23%

Of clients lack
stable housing



20%

Of clients lack
health insurance

High Utilization of Healthcare

In the six-month period prior to working with I-CAN:

High Utilization of Healthcare

In the six-month period prior to working with I-CAN:



48%

of clients visited the
emergency department
at least once

High Utilization of Healthcare

In the six-month period prior to working with I-CAN:



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24%

of clients who visited the
ED visited **three or more
times** in six months

High Utilization of Healthcare

In the six-month period prior to working with I-CAN:



48%

of clients visited the **emergency department** at least once



33%

of clients were admitted to the **hospital** at least once



24%

of clients who visited the ED visited **three or more times** in six months

High Utilization of Healthcare

In the six-month period prior to working with I-CAN:



48%

of clients visited the **emergency department** at least once



33%

of clients were admitted to the **hospital** at least once



24%

of clients who visited the ED visited **three or more times** in six months



33%

of clients called **emergency medical services** at least once

Health Literacy & Daily Activities

At the time of initial assessment:

Health Literacy & Daily Activities

At the time of initial assessment:



Clients are unable to identify the name or purpose of **25-50%** of their medications.

Health Literacy & Daily Activities

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Clients are unable to identify the name or purpose of **25-50%** of their medications.

On a scale of 0-100, clients rate their overall quality of life at



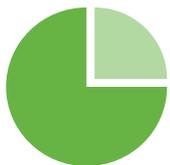
Health Literacy & Daily Activities

At the time of initial assessment:



Clients are unable to identify the name or purpose of **25-50%** of their medications.

On a scale of 0-100, clients rate their overall quality of life at



Three-quarters of clients report problems with pain, mobility, and performing their daily activities.

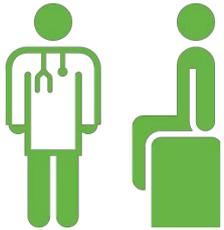
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Achieving Client Goals

First-year data from April 1, 2013 through May 15, 2014.

Achieving Client Goals

First-year data from April 1, 2013 through May 15, 2014.



63% ↑

Increase in clients
with access to
primary care
(N = 30)

Achieving Client Goals

First-year data from April 1, 2013 through May 15, 2014.



63% ↑

Increase in clients
with access to
primary care
(N = 30)



39% ↑

Increase in
clients living in
stable housing
(N = 19)

Achieving Client Goals

First-year data from April 1, 2013 through May 15, 2014.



63% ↑

Increase in clients
with access to
primary care
(N = 30)



39% ↑

Increase in
clients living in
stable housing
(N = 19)



53% ↑

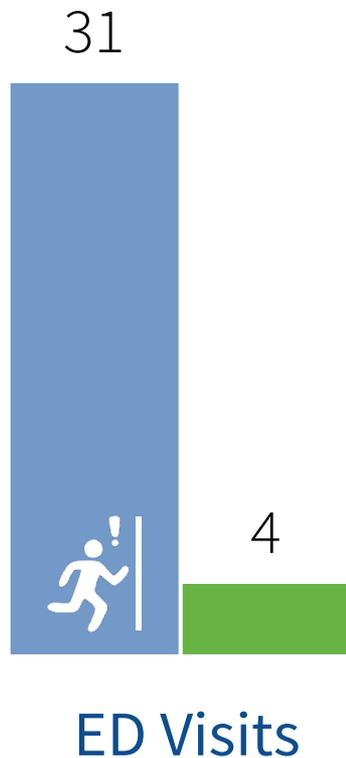
Increase in clients
with access to
health insurance
(N = 30)

Reducing Resource Demand (N = 15)

Healthcare utilization decreased significantly **after twelve I-CAN visits** when compared to the **six month period prior to I-CAN**.

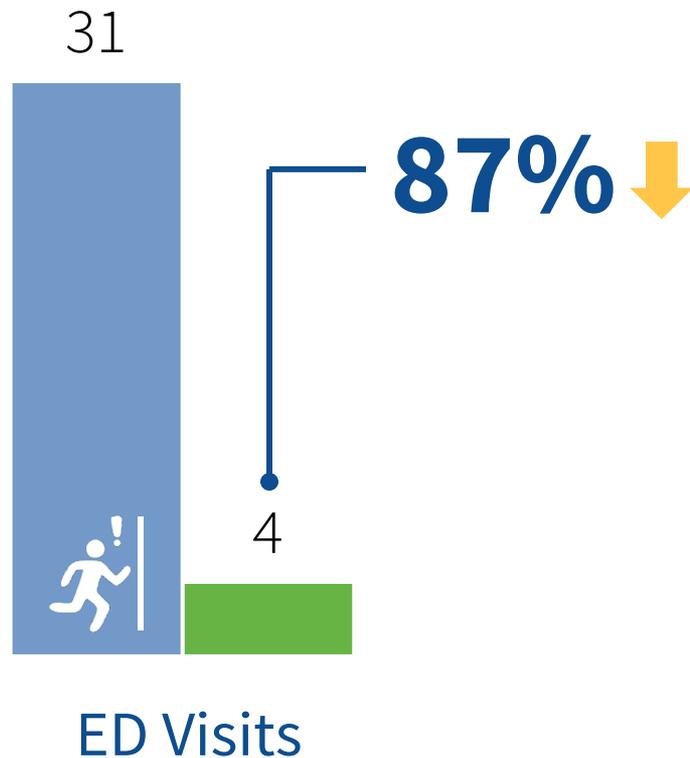
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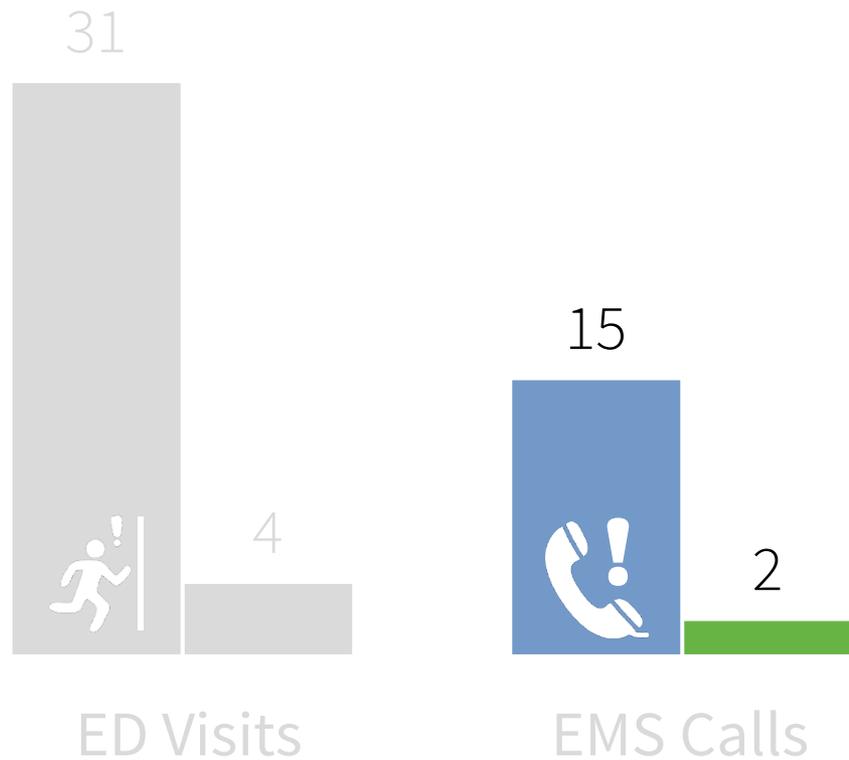
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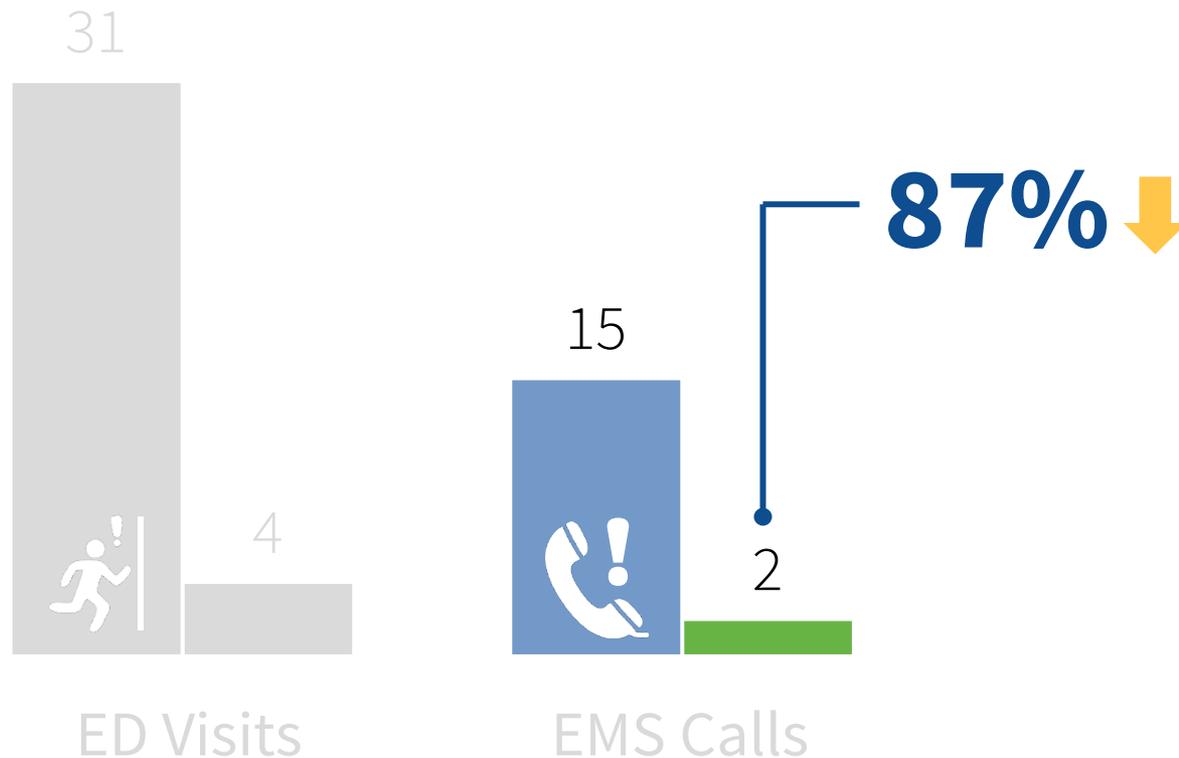
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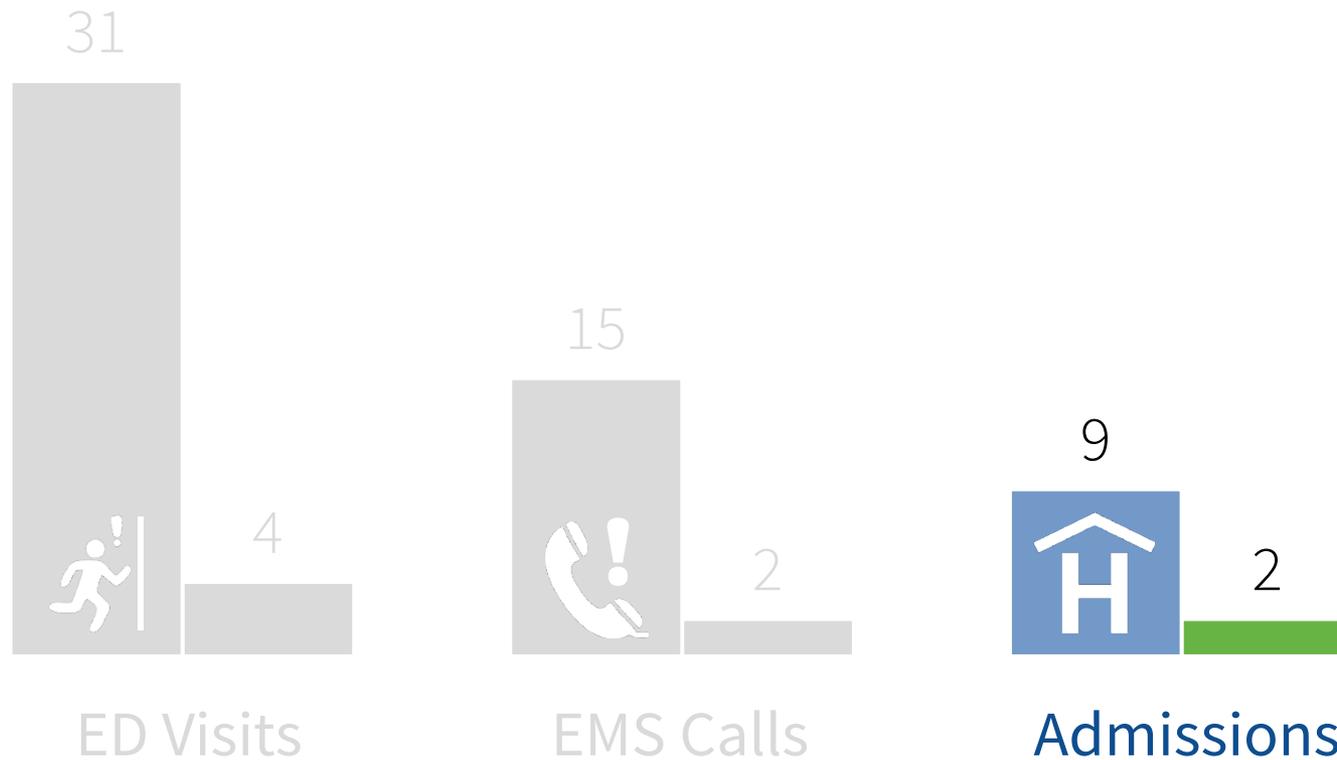
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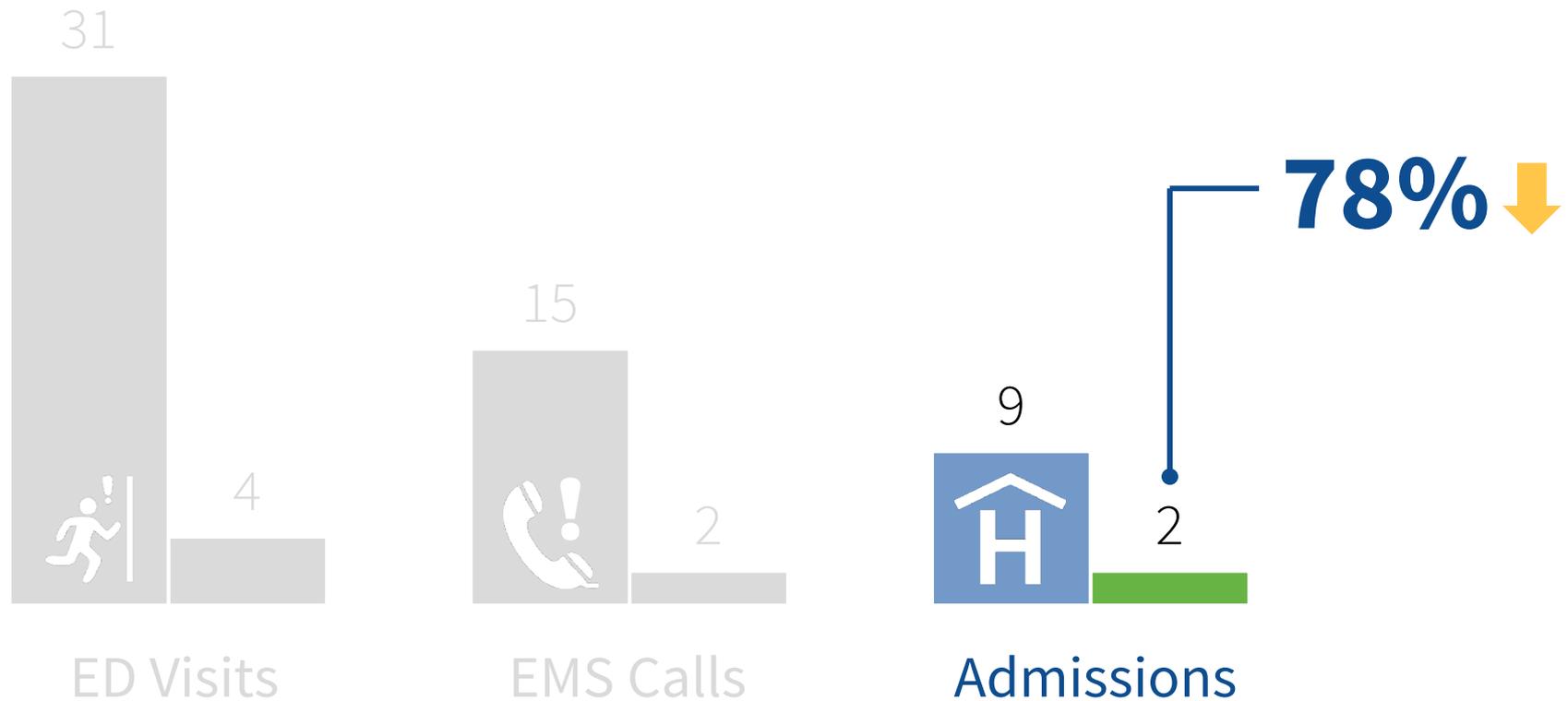
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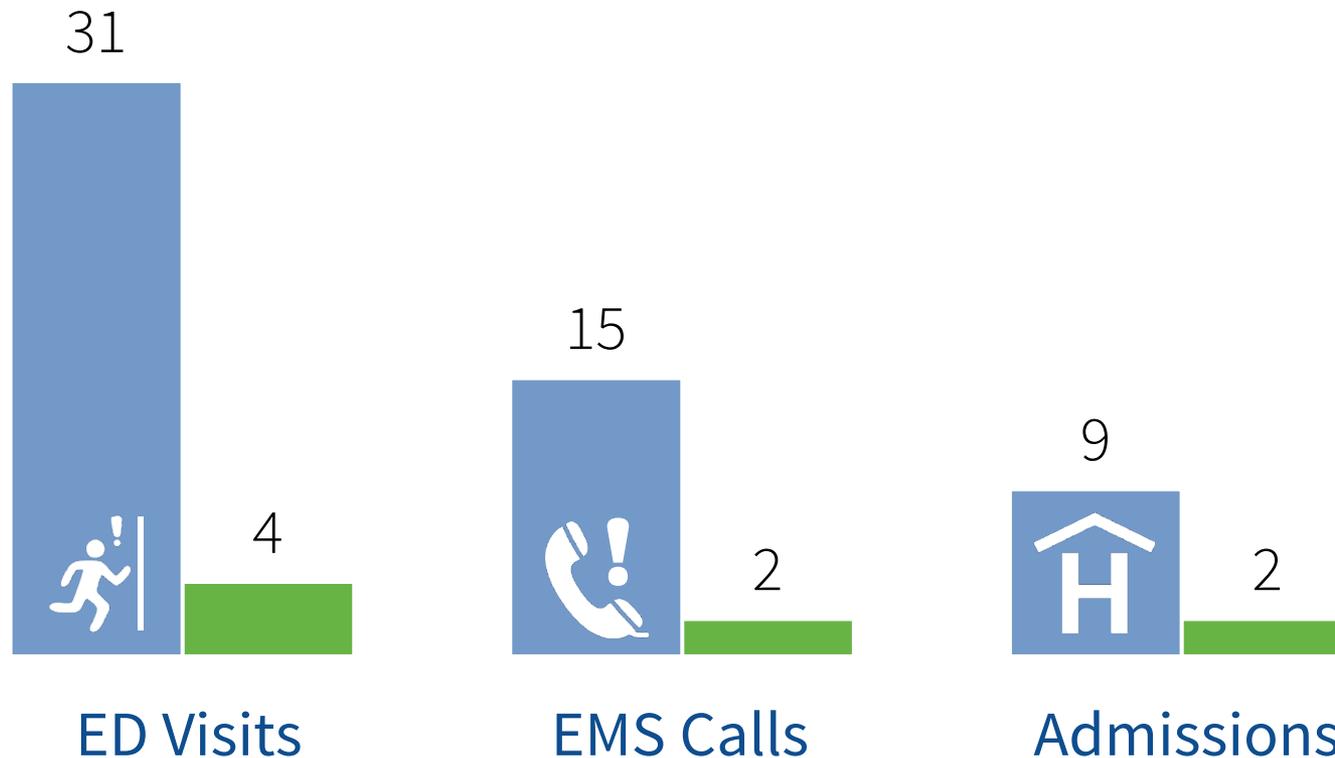
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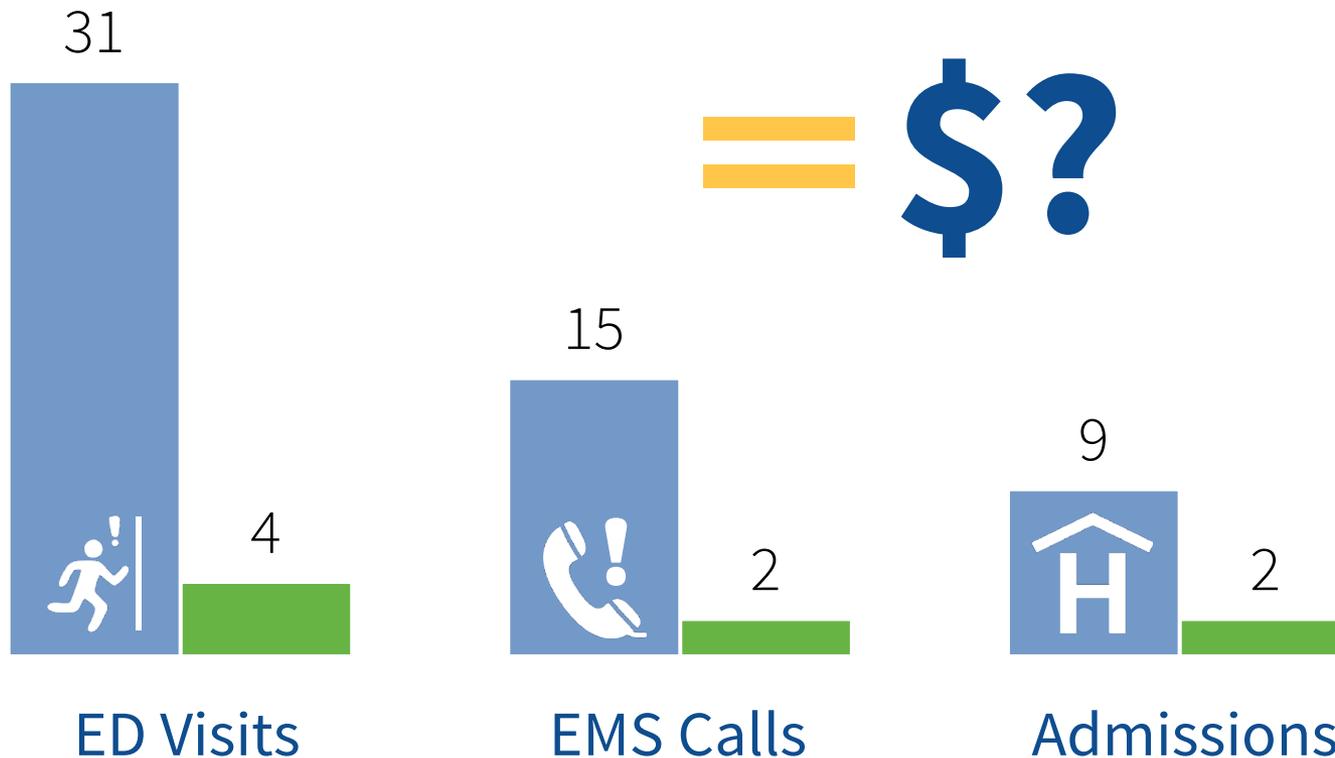
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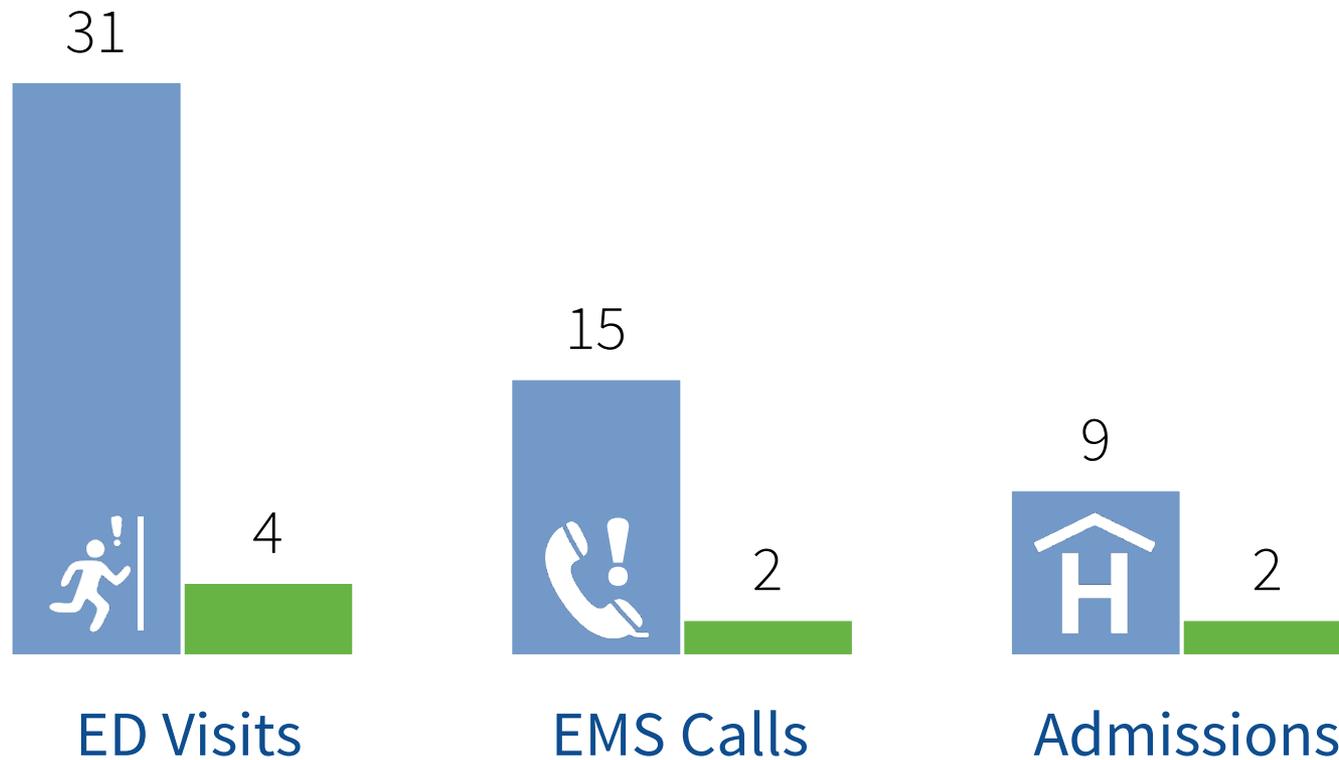
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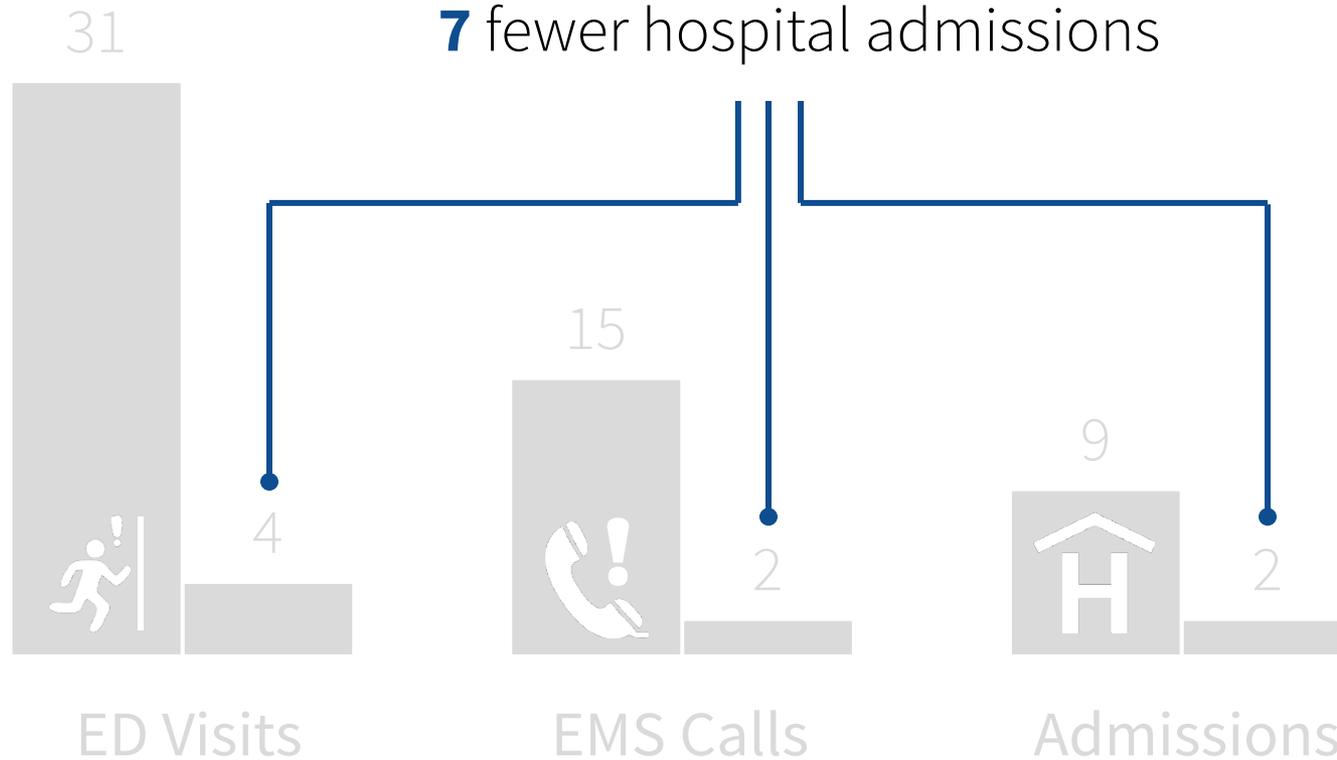
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Assessing Costs (N = 15)



Assessing Costs (N = 15)

27 fewer ED visits
13 fewer EMS calls
7 fewer hospital admissions



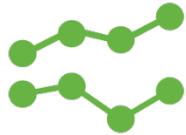
Healthcare Cost Measures

Cost Effectiveness

Cost Avoidance

Cost Savings

Healthcare Cost Measures

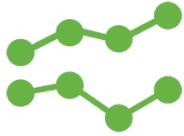


Cost Effectiveness

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Healthcare Cost Measures



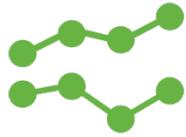
Cost Effectiveness



Cost Avoidance

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Healthcare Cost Measures



Cost Effectiveness



Cost Avoidance



Cost Savings

Measuring ED and Inpatient Admissions

Measuring ED and Inpatient Admissions



CMS Medicare Fee Schedule

Measuring ED and Inpatient Admissions



CMS Medicare Fee Schedule



**CMS Medicare Fee Schedule
+ Medicaid conversion factor**

Measuring ED and Inpatient Admissions



CMS Medicare Fee Schedule



**CMS Medicare Fee Schedule
+ Medicaid conversion factor**



**AHRQ Medicare Expenditure
Panel Survey (MEPS)**

I-CAN Cost Indicators

I-CAN Cost Indicators



Admissions

\$18,012

AHRQ MEPS

I-CAN Cost Indicators



Admissions

\$18,012

AHRQ MEPS



ED Visits

\$1,390

AHRQ MEPS

I-CAN Cost Indicators



Admissions

\$18,012

AHRQ MEPS



ED Visits

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AHRQ MEPS



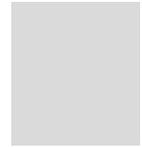
EMS Calls

\$1,500

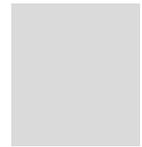
Jonathan Jiu, MD,
OHSU Department of
Emergency Medicine



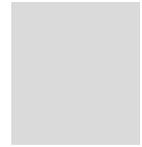
PROJECT OVERVIEW



DEFINING THE POPULATION



OUTCOME MEASURES



DEFINING COST

5 |

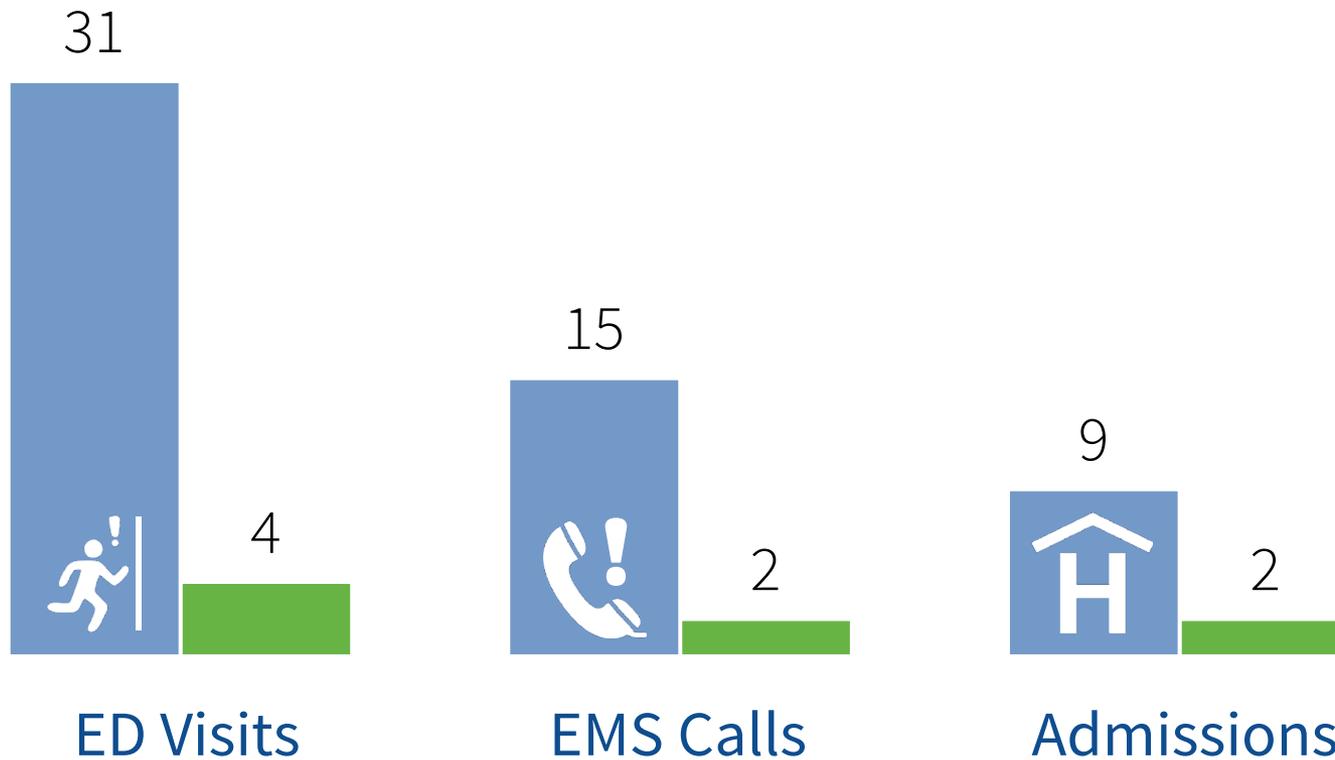
CONCLUSIONS



Q & A

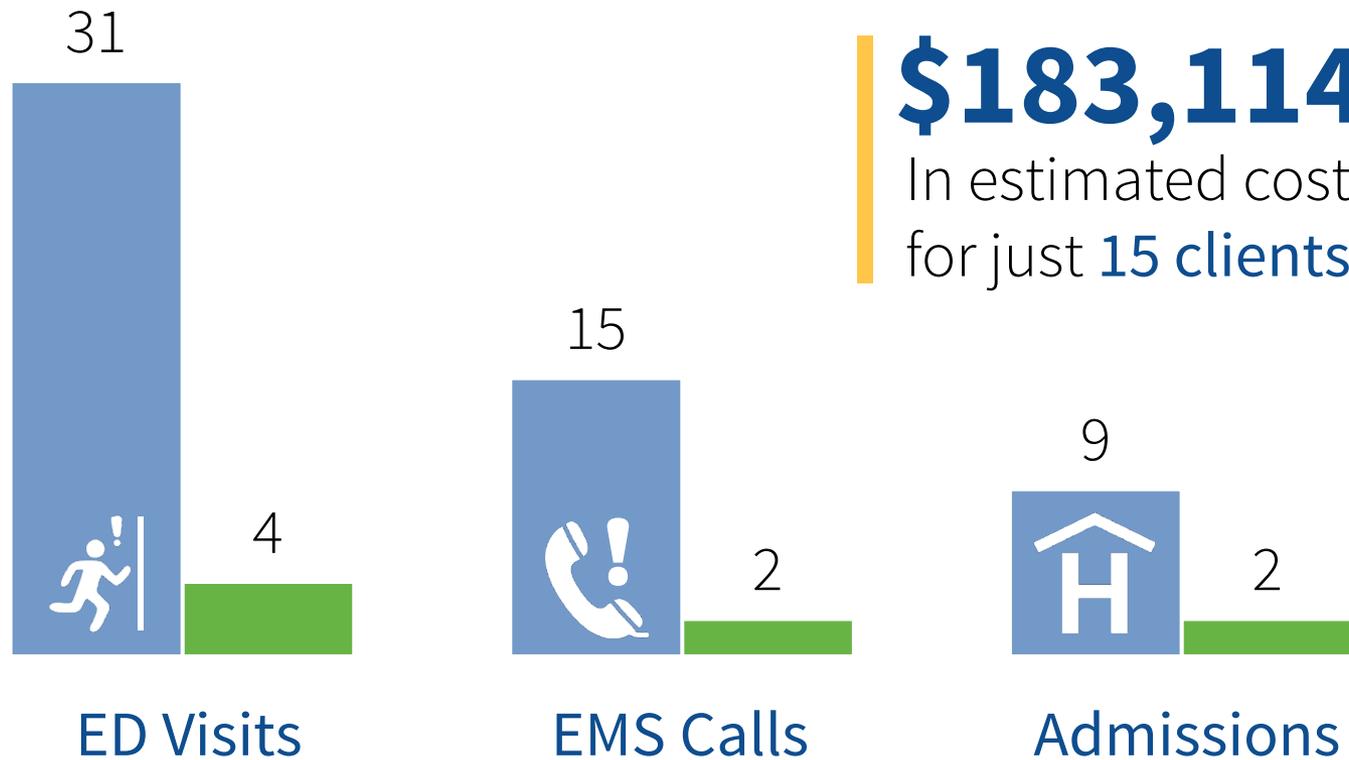
Reducing System Costs (N = 15)

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Additional Measures

Additional Measures



Stable Housing

Additional Measures



Stable Housing



Medication Management

Additional Measures



Stable Housing



Medication Management



Primary Care Home

Additional Measures



Stable Housing



Medication Management



Primary Care Home



Student Extension of Workforce

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Burning Questions or Recommendations



HRSA Funded

Disclaimer

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 UD7HP25057 and title “Interprofessional Care Access Network” for \$1,485,394. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.

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Liaison to School of Medicine	Molly Osborne, MD, PhD
Liaison to School of Dentistry	Jill Mason, MPH, RDH, EPP
Liaison to College of Pharmacy	Juancho Ramirez, PharmD
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Faculty in Residence – Medford	Fran Voss, MSN, RN
Faculty in Residence - Southeast	Kristen Beiers-Jones, MN, RN

Community Partner Liaisons

Central City Concern	Chuck Sve, LAc
Macdonald Center	Kristrun Grondal
Neighborhood House	Janice Jones
La Clinica	Alma Elder, RN
Family Nurturing Center	Beth Jaffee-Stafford
St. Vincent de Paul	Berry Birmingham
Family Medicine at Richmond	Erin Kirk
Asian Health & Service Center	Christine Lau
Lutheran Community Services NW	Jacinda Paschoal
Russell Street Dental	Alisha Brazzle



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Thank You!



www.ohsu.edu/i-can



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