IMPROVING PATIENT OUTCOMES THROUGH COLLABORATION:

The Public Health Nurse Liaison and Team-Based Care

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Who’s on the team?
Public Health Nurse Liaison
McLeod County Public Health

Mission

To protect the health of the community, promote a healthy community for future generations and to provide public health nursing services in accordance with the highest standards of professional practice.
History of McLeod County Public Health

☐ Established 1973

☐ Now provides broad range of services for entire community
The Public Health System

- Schools
- Civic Groups
- Nursing Homes
- Community Centers
- Non-Profit Organizations
- Home Health
- Foundations
- Mental Health
- Fire
- Transit
- Hospitals
- Doctors
- CHCs
- Public Health Agency
- Drug Treatment
- Law
- Enforcement
- Tribal Health
- Employers
- Corrections
- Elected Officials
Public Health Interventions

The 17 Public Health Interventions

- Advocacy
- Social Marketing
- Policy Development & Enforcement
- Surveillance
- Disease & Health Event Investigation
- Quarantine
- Screening
- Immunization
- Community-Based
- Individual-Focused
- Community-Focused
- Systems-Focused
- Case Finding
- Case Management
- Consultation
- Evaluation
- Health Care
Hutchinson Health Team Based Care Model
Beginning Steps

June 2014
First meeting between
Hutchinson Health and
McLeod County Public Health

August 2014
PrimeWest Reinvestment
Grant open for applications
PrimeWest Reinvestment Grant

www.primewest.org

Goals of Grant Proposal

- Public Health Nurse Liaison Position
- Allina Care Copilot program
- Improve exchange of information between Hutchinson Health and Public Health
- Meeting the Triple Aim for PrimeWest members
September 2014 PrimeWest Reinvestment Grant submitted

Partial funding awarded and Public Health Nurse Liaison position established
Role

☐ Daily hospital rounds
☐ Present new resources
☐ Physician assistance requests
☐ Case Manager assistance requests
☐ Promote public health programs
☐ Monitor daily Urgent care, ED, and hospital censuses to identify patients Case Managed by Public Health
Providers
Role

- Often first point of contact
- Administer comprehensive, evidence-based, and personalized health care with continuity through all stages of life
- Coordinate care with other medical professionals
1957
Hutchinson Medical Center Established

1995
Hutchinson Area Health Care purchased Dassel Clinic

2013
Merge to become Hutchinson HEALTH
Hutchinson Health Mission

Advancing Health With Our Community
Health Care Home
## Criteria for Certification

<table>
<thead>
<tr>
<th>Step 1 Eligibility</th>
<th>Step 6 Assessment</th>
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<tr>
<td>See if you are eligible.</td>
<td>Meet HCH Standards and Criteria.</td>
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<tr>
<th>Step 2 Guides &amp; Tools</th>
<th>Step 7 Site Visit</th>
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<tr>
<td>Read guides to process.</td>
<td>On Site Visits</td>
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<th>Step 3 Request Access</th>
<th>Step 8 MDH Notification</th>
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<tr>
<td>Request initial access to Portal.</td>
<td>MDH Completes Review.</td>
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<th>Step 4 Letter of Intent</th>
<th>Optional Step</th>
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<td>Formal notification.</td>
<td>Variance and Appeals</td>
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<th>Step 5 Application</th>
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<td>Submit Application by clinic.</td>
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April 2016
MDH site visit

May 18 2016
Official certification
The IHI Triple Aim

Population Health

Experience of Care
Per Capita Cost
Hutchinson Health HAS it!

Our goal is to:

H – Improve the Health of our patients
A – Increase the Affordability of care
S – Provide the patient with Safe, Superior Care which in turn will increase patient Satisfaction by providing the ideal experience.
Hutchinson Health Team Based Care Model

Diagram:
- Patient
- Primary Care Provider and Coordinator
- Public Health Nurse Liaison
- Specialty Care
- Behavioral Health
- Lab, Radiology, Pharmacy
- Hospital
- Nurse Educators
- Care Guides
- RN Care Coordinator
Role

- Lead achievement of Health Care Home certification
- Lead development of team-based care
- Coordinate integration of McLeod County Public Health Nurse liaison into Health Care Home team
- Help position Hutchinson Health to pursue at-risk, total cost of care contracts with multiple payers, while ensuring optimal patient well-being
Care Guides
Role

- Central facilitator and advocate for assigned patients
- Identify and facilitate resolution of barriers to quality care
- Support patients and providers in achieving patient health care goals
- Case Management Support
Patients
Role

- Be familiar with patient rights and responsibilities
- Communicate openly
- Participate in decisions
- Cooperate in carrying out treatment program
Who’s a good fit?

- multiple chronic conditions
- barriers to optimal care
- need help organizing care
- need help achieving health care / personal goals
- high healthcare costs
- PrimeWest Health insurance
Success Stories
54 year old female with COPD
Healthy veteran, caregiver for wife with deficits after stroke
27 year old pregnant female with asthma
Young mother of 4 mo baby with Congenital Adrenal Hyperplasia
Successes

- Communication
- Utilization of community and state resources
- Transportation to appointments
- Financial assistance for families in need
- Coaching and encouragement for patients
- Patient appreciation
- Hospital Admissions
Opportunities

☐ Further define roles and division of labor
☐ Gather support for patient programs
☐ Navigate privacy regulations/ release of information
☐ Further educate providers on eligibility criteria
☐ Refine billing process
☐ Begin working on re-certification
Coming Soon!
Hutchinson Health Team Based Care Model

Patient and Family Advisory Council
Summary

- Health care home ensures patient centered primary care
- Public health nurse liaison is an innovative addition to the health care home model
- Our unique Health Care Home team allows for improved coordination of patient healthcare and community services
- Continue growing enrollment and improving processes
Questions
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