Community-Created Health Care Solutions

Oregon Health Policy Commission

January 19, 2006

Prepared by:

Local Delivery System Models Workgroup

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Overview

Local Delivery System Models Workgroup

✓ No single viable model for ensuring access to needed health services

✓ Delivery system must be responsive to its unique environment, populations, and infrastructure

Local Delivery System Models
Work Group Members

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Local Delivery System Models
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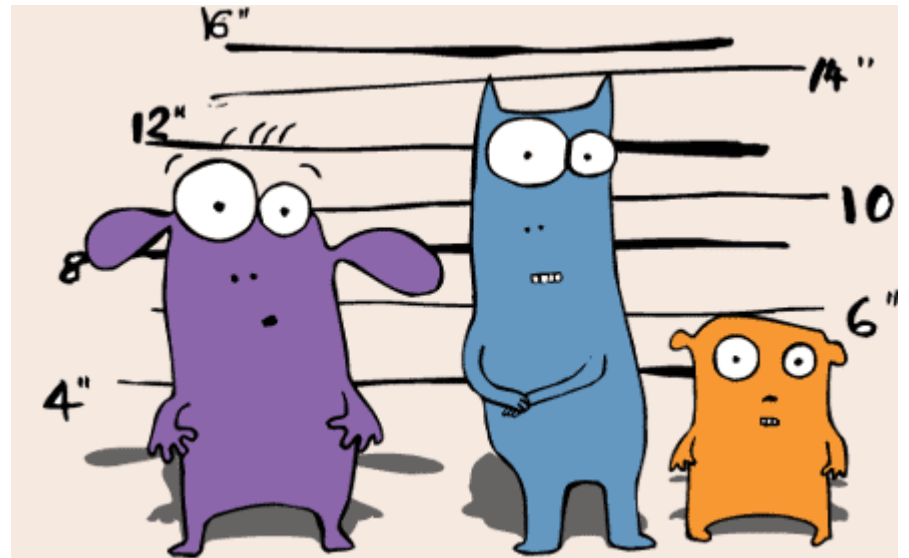Portland, Oregon

Dick Stenson
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Work Group Charge

✓ Identify local innovation

✓ Catalogue lessons learned

✓ Disseminate findings

Work Group Charge

- Policy changes

- Technical assistance needs

- State agency support

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Community-Created Solutions?

Ensure access

Improve health outcomes

Community-Created Solutions?

Involve sharing the risks and rewards across stakeholders

Community-Created Solutions?

Engage multiple, diverse
public & private
stakeholders

Community-Created Solutions?

Need community leaders
or "champions"

Community-Created Solutions?

Leverage financial commitments from stakeholders

Community-Created Solutions?

Coordinate the process of delivering comprehensive health services

Community-Created Solutions?

Offer significant stability to the local health care system

Community-Created Solutions?
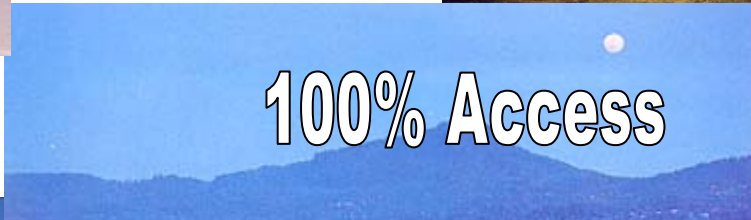
Politically challenging & time consuming

Who?

SNE

NEON

100% Access

SHS

COHCC

Community-Created Solutions

✓ Central Oregon Health Care Collaborative

✓ 100% Access Coalition

✓ Northeast Oregon Network

✓ Samaritan Health Services

✓ Tri-County Safety Net Enterprise

Community-Created Solutions

✓ 15 counties

✓ 34 key informants

✓ Public-private collaboration

✓ Innovation

✓ Geographic diversity

✓ Different stages of design and implementation

Lessons Learned

Community collaborative efforts require sharing risks and rewards

Risks

- ✓ Competition to consensus building
- ✓ Work collectively rather than autonomously
- ✓ Lack of success

Rewards

- ✓ Greater efficiency
- ✓ Cost-savings
- ✓ Improved access and health outcomes
- ✓ Greater influence with policy makers
- ✓ Leverage funding

Require the participation of diverse stakeholders

- ✓ Public and private partners

- ✓ Different disciplines

- ✓ Different sectors

Community leadership or "champions" are fundamental

✓ Share a vision of what change should look like

✓ Authority to make institutional changes and allocate resources

Stakeholders must be willing to make financial commitments to the effort

- ✓ Seed money

- ✓ Donated staff

- ✓ Donated facilities and technical equipment

Seek to provide coordinated, comprehensive health care services

✓ Build on the efforts of existing safety net

✓ Develop information system across institutions - interfacing

✓ Integrate services

Long-term goal of community-created solutions is to create stable, sustainable local health care systems

✓ Committed and trusted leadership

✓ Time

✓ Short- and long-term outcomes

✓ Shared vision and understanding

✓ Clear and ongoing relationships

Time-consuming and politically challenging

✓ Turf

✓ History

✓ Change

How Can the State Support?

View and recognize communities as equal and unique partners

✓ Recognize the important role of communities in improving the delivery of health care

✓ Learn from innovations at the local level

✓ Involve community stakeholders in a meaningful and on-going fashion

✓ "*One size doesn't fit all*"

✓ Actively support the development of community-created solutions

Support and strengthen the health care safety net

✓ Establish and support safety net policies, programs, and services

✓ Further strengthen infrastructure responsible for supporting Oregon's safety net

✓ Devote adequate funding and staffing for efforts that support safety net development and involvement

✓ Encourage the growth of health care safety net providers

✓ Provide information, referral, and technical assistance

Provide the "connective tissue" between communities

✓ Share information and data relating to best practices

✓ Provide opportunities/venues for peer learning

Ensure technical assistance is offered to interested communities

✓ Help build an integrated information system

✓ Gather local/regional health data

✓ Help interpret data

✓ Assist w/ grants

✓ Assist with evaluation

✓ Provide consultation

✓ Support Office of Rural Health's CHIP

Create flexible and supportive policies

✓ Seek ways to individualize approaches and remove barriers

✓ Support local solutions to delivering and financing

✓ Ensure adequate supporting and funding for prevention/public health and chronic care management

Make financial investments in community innovation

✓ Stabilize publicly funded programs

✓ Provide "seed money"

✓ Target grant funding

Conclusion

- ✓ Delivery of services is local

- ✓ Communities recognize the need to do business differently

- ✓ Stakeholders are collaborating with unlikely partners

- ✓ One size doesn't fit all

- ✓ Supportive public policy is needed

- ✓ Government technical assistance is needed