Health Share of Oregon

Name of Project	ED GUIDES	STANDARD TRANSITIONS	INTERDISCIPLINARY COMMUNITY CARE TEAM
Stage of Project Development	Implementation and Evaluation	Implementation and Evaluation	Implementation and Evaluation
Identification What is your target population and how did you identify them?	 Low-acuity patients in the emergency department who need ongoing care. All payer types. 	Patients discharging from in-patient or out-patient hospital visit.	 Adults with 6 or more ED visits or one non-obstetric in-patient hospital admission in a year. Avoidable admits that may have been initiated by care coordination and/or community support
Intervention Which intervention(s) do you plan to use?	A team of guides educates patients about follow-up care and help with getting appointments at appropriate locations.	 Standardized discharge summary. Clinic staff call discharged patients within 24 hours. Medication reconciliation with discharged patients. Patients are scheduled to meet their PCP within 72 hours of discharge. 	 Non-traditional health care workers: Health Resilience specialists in local clinics New Directions, social workers in OHSU ED CHIPs (Central City Concern Old Town Clinic and Recovery Center) outreach workers, QMHP, and RN work together Peer Wellness Specialists (Cascadia Behavioral Health) provide peer support.
Implementation How do you plan to implement these interventions?	 Providence program manager is responsible for implementation and maintenance, w/ help from steering committee. ED sites include: Providence Portland Medical Center Providence Milwaukie Hospital Providence St. Vincent Medical Center 	Intervention developed and implemented by: • Program director • Project manager • Partner hospital • Clinic staff • Steering committee Sites include: • Legacy, Providence and OHSU Hospitals • Legacy, Providence, OHSU and Multnomah County clinics	Sites include: • CareOregon • Central City Concern • OHSU Hospital • Cascadia Behavioral Health
Workforce Who in your organization will be implementing the work?	Main program staff: • Program manager • 9 ED guides	Main program staff: • Program manager • 9 ED guides • Hospital and clinic staff	Main program staff: • Program director • Program managers • RNs • Social workers • Others
Evaluation How will you be evaluating this work?	Community-wide quality monitoring and reporting system Aims: • Reduce cost/utilization • Improve experience Evaluation relies on: • Operational program data • Medical claims • Patient surveys • Qualitative interviews	Evaluate number comparisons for: • High emergency room utilizers • High cost medications • High overall cost	Evaluation relies on: Operational program data Medical claims Patient surveys Qualitative interviews Total costs of care Hospital and ED utilization Experience of care
Resources How are you funding this work?	 Health Commons Grant funded by CMMI In-kind support from Health Commons partners 	 Health Commons Grant funded by CMMI In-kind support from Health Commons partners 	 Health Commons Grant funded by CMMI In-kind support from Health Commons partners
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