



Breaking the Silo: Empowering Clinicians to Leverage Community Connections

Jessica Alward and Nicole Seymour

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Centre
for Effective
Practice



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Today's Facilitators

Disclosures

Nicole Seymour

Relationships with commercial interests:

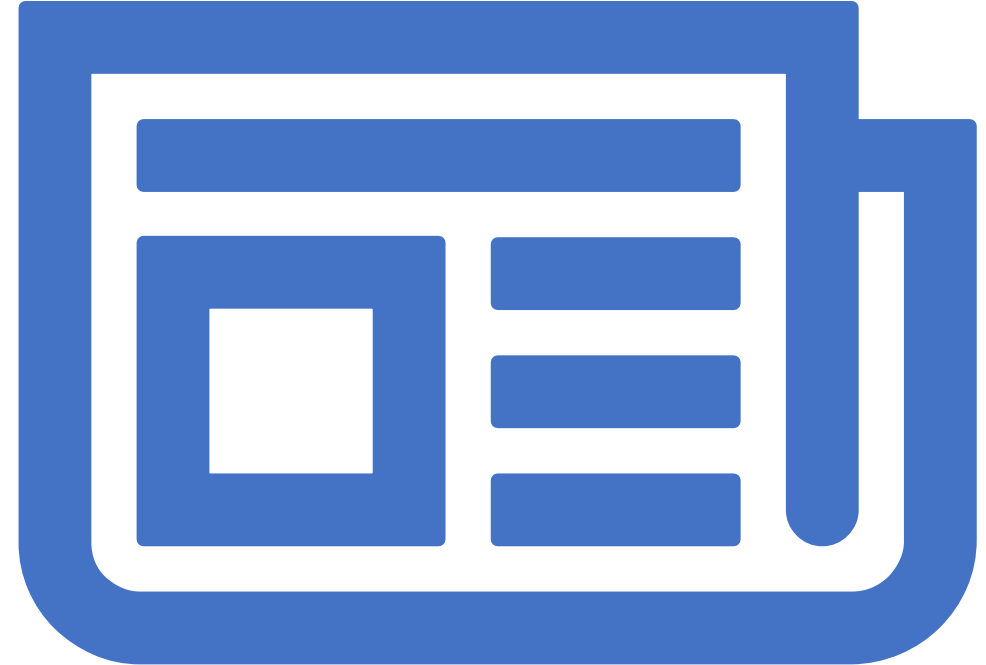
- Employee of the Centre for Effective Practice (CEP)
- CEP's academic detailing service is funded by the Ontario Ministry of Health & Long-Term Care
- Employee of St. Thomas Elgin General Hospital, NaRCAD and RxFiles
- No other conflicts of interest

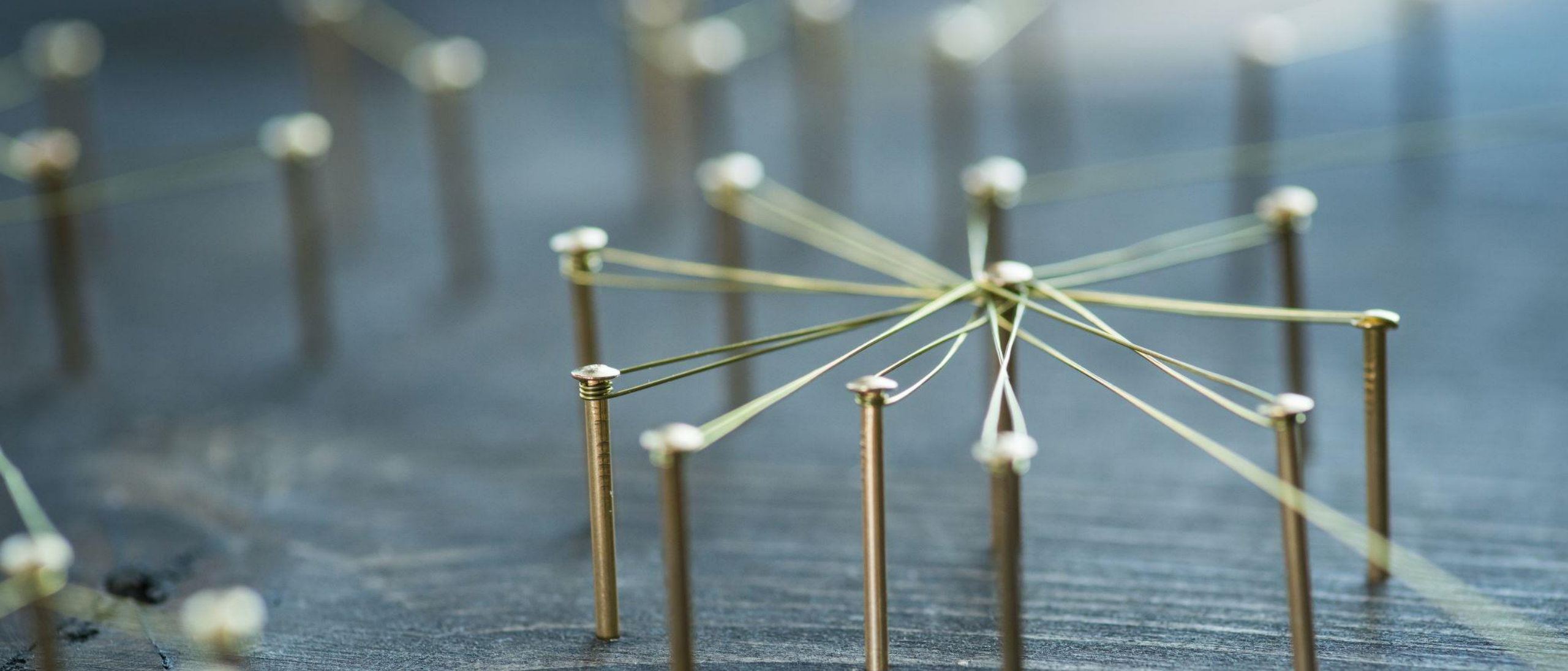
Jessica Alward

- Employee of State of New Hampshire Division of Public Health Services
- NH Public Health Detailing is funded through grants from the CDC
- Employee of NaRCAD
- No other conflicts of interest

Session Goals

- **Explore the detailer's role in:**
 - Resource gathering and sharing
 - Encouraging community engagement for clinicians
- **Connect with peers** in small breakout groups and in large group discussions



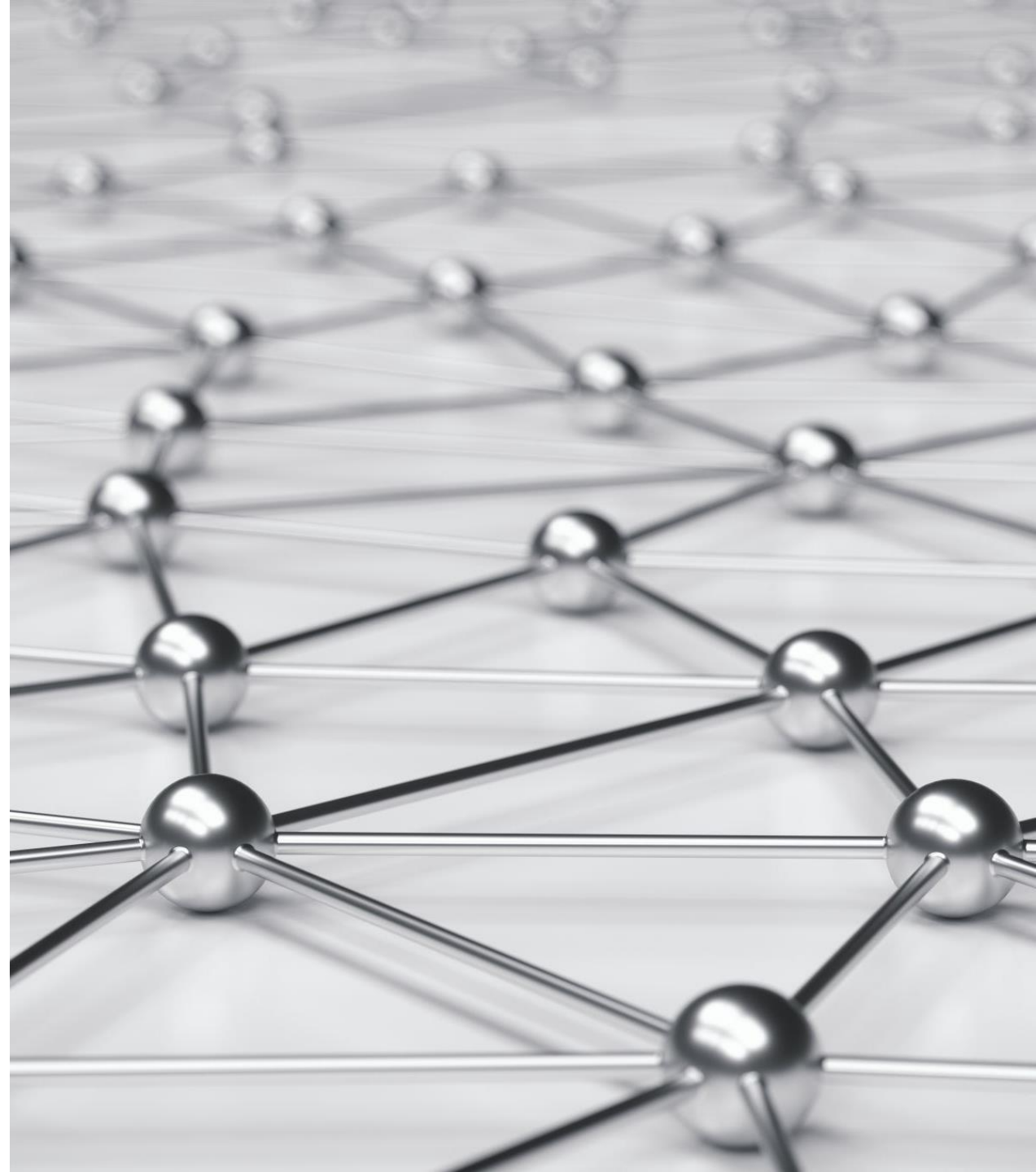


The Detailer's Role in Resource Gathering & Sharing

Nicole Seymour, BSP, PharmD, ACPR

Agenda

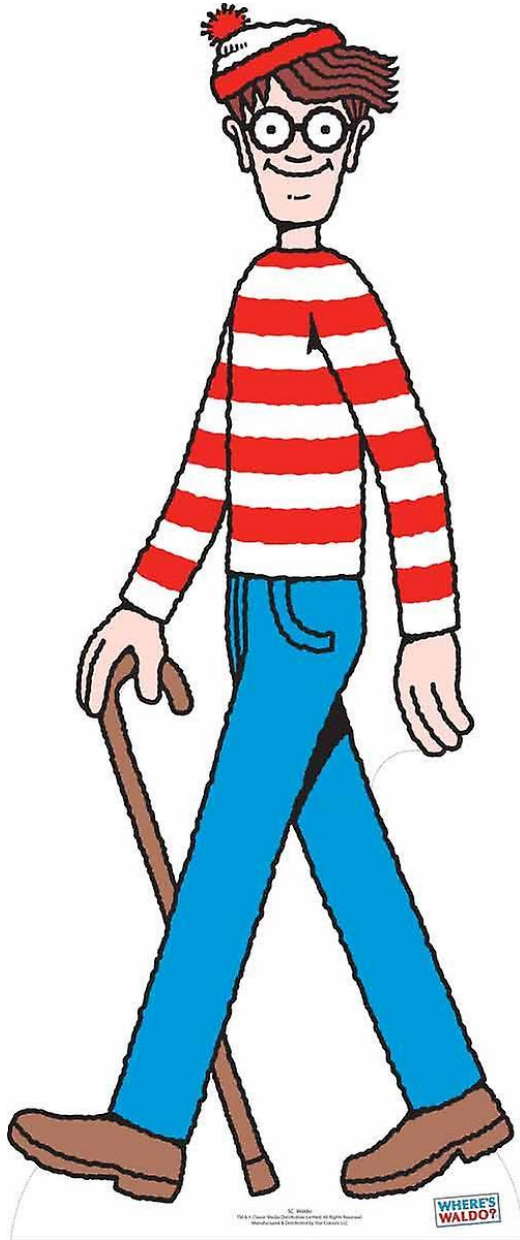
- Why bother?
- Types of resources
- Finding and investigating resources
- Presenting resources
- Examples from CEP



Why Bother?

Value to providers:

IMPROVES PATIENT CARE



Resource Waldo



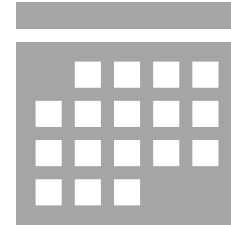
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Why Bother?



Value to providers:

IMPROVES PATIENT CARE



Value to providers:

SAVES TIME

Why Bother?

Value to Detailers

- **Supports your key messages** (improving patient care)
- May be your **winning ticket** for buy-in/impact
- May **motivate provider** to book visit &/or see you again
- May **earn credibility, appreciation and respect** from provider

Why Bother?

- **Improved understanding of clinician & patient experience**
 - Assists with needs assessment
- **Connections for detailer**
 - Bi-directional information sharing
 - Leads to other introductions
 - Partnership opportunities (i.e., tools, webinars, events, etc)

Types of Resources

Provider

- Clinical
- Education & resources
- Other

Patient

- Clinical
- Social/financial
- General

Types of Resources

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- Other

Patient

- Clinical
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- General

Provider: Clinical Decisions



Local
specialists



Local clinics



**Electronic
specialty
consultations**



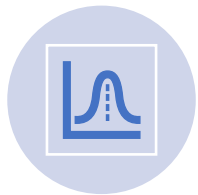
**Mentorship
groups**



**Moderated
clinical
forums**



Allied health



Project ECHO

Provider: Education & Resources



Project ECHO



Mentorship groups



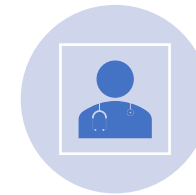
Moderated clinical forums



Academic detailing



Clinical practice organizations & supporting groups



Clinician organizations & associated publications



Public Health



+++

Provider: Other



Operations supports

Human resources, procedures/flow, EMR supports, billing, staff training



Drug information

Algorithms, cheat sheets, access/coverage support



Apps & other practice tools

Types of Resources

Provider

- Clinical
- Education & resources
- Other

Patient

- Clinical
- Social/financial
- General

Patient: Local Clinical

Condition-
specific
clinics

Homecare

Hospital-
based
programs

Allied health

Paramedicine
programs

Local
community
health centres

Local mental
health
associations

Patient: Social/Financial

Seniors Centres

Local libraries

Local community,
cultural & religious
groups

Patient: General/Multipurpose

Patient: General Repositories

211 or other repositories

System navigators (*or similar role*)

Provincial/state/federal repositories

Public Health

Finding Resources

- Clinical Organizations
- 211
- Google
- Resource navigators
- Public health
- Stakeholder groups
- Academic institutions
- Conferences
- Local clinical groups
- Ask other detailing services
- Ask clinicians
- +++

Create list or table

Investigating Resources

- **Generate questions**
 - What might providers want to know?
 - Wait time, referral criteria, process, details about service, costs/coverage
- **Review website**
 - Referral forms, Q&A, contact info
- **Reach out to learn more**
 - Templated emails/letters/scripts
 - They may have informational material for you to share
- **Ask colleagues**
- **Try for yourself!**

Track answers & progress

Investigating Resources

Prioritize based on:

- Ease of acquiring information
- Potential impact for clinicians
- General awareness & utilization of resource (if known)
- Widespread applicability

Divide & conquer!

Presenting Resources

Table or curated list

- There is such thing as too many options
- Include pertinent details

Virtual visits

- Use that bookmarks bar to preload websites to relevant page
- Open relevant supporting documents

Brochures, posters, handouts & referral forms can be an asset

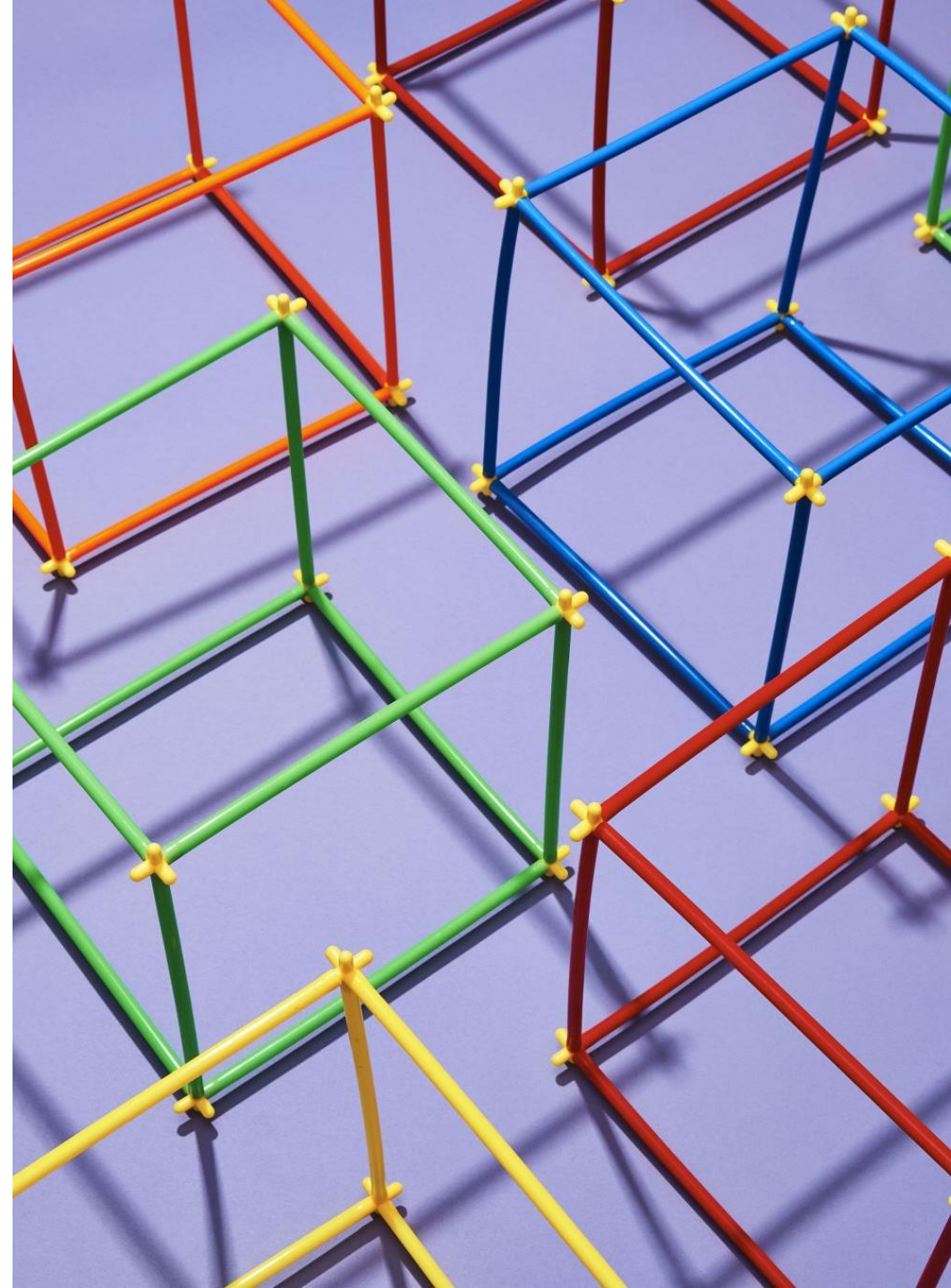
Presenting Resources: Context is Key

There to share information

- Caution re: “endorsing” or “recommending” services

Seek to understand limitations

- i.e., referral time, referral criteria, service provided, etc.



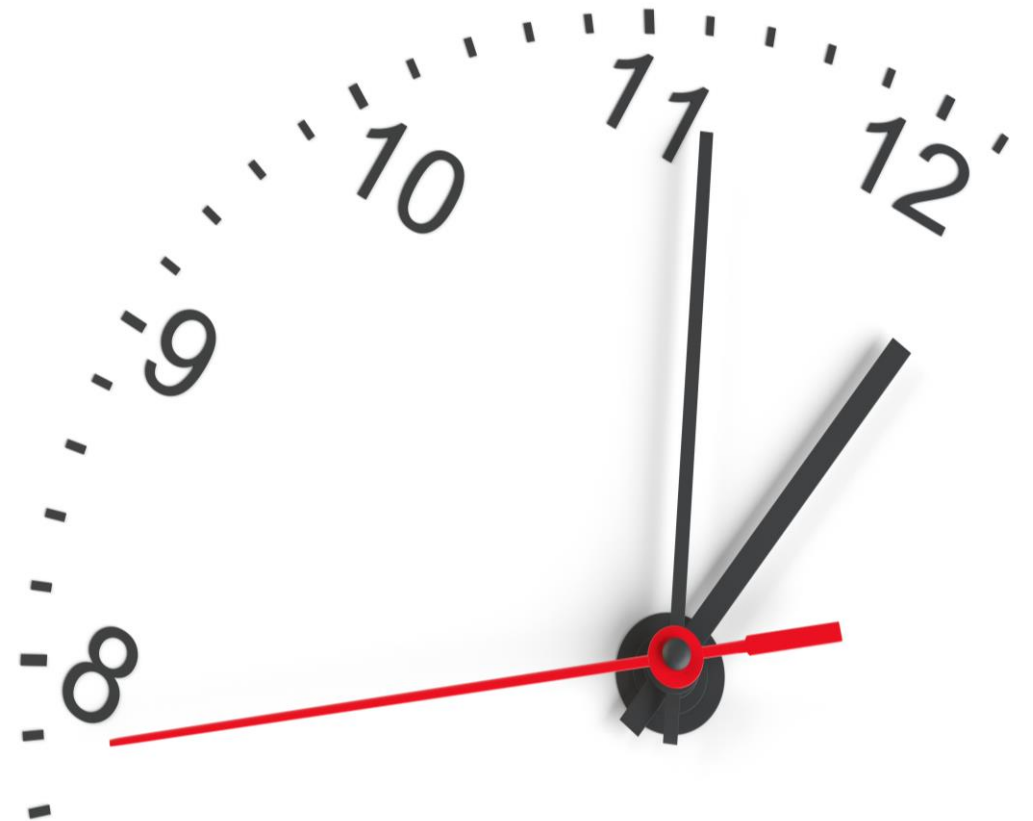
Presenting Resources: Context is Key

Respect the clinician's time

- During detail
- Needed to access the resource
 - i.e., new process, new referral, account registration, etc.

Providers want to use resources & information they can trust

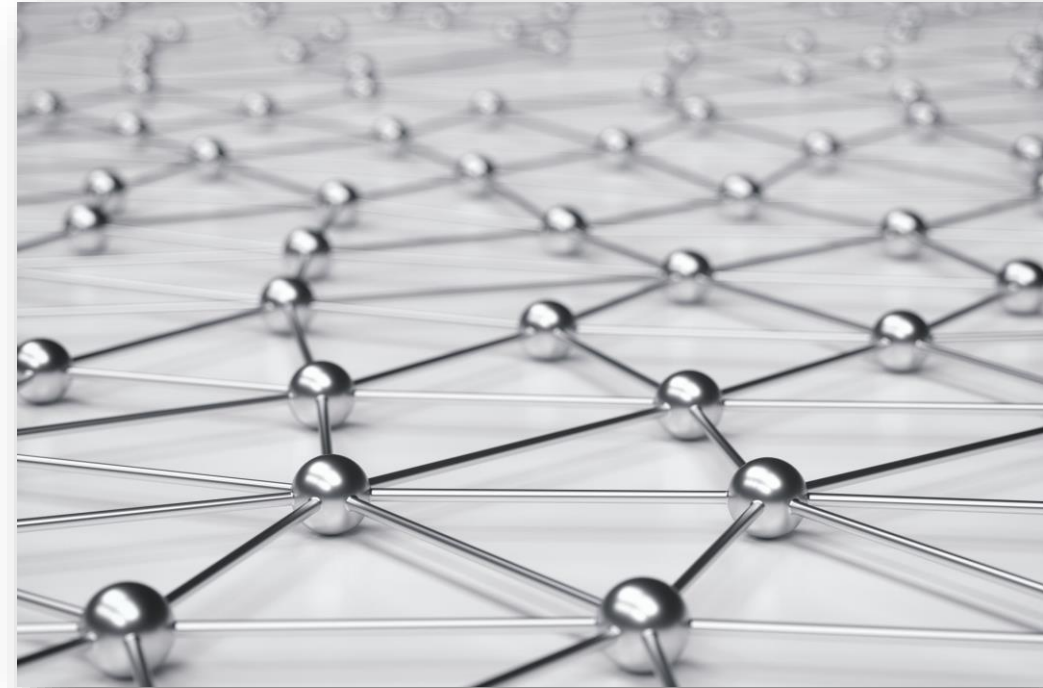
- They want their patients to trust them in the same way!



Presenting Resources: Practicality

Accessibility

- Add to folder on computer
- Add links to browser bookmarks
- Print resources & add to handouts drawer
- Put up posters
- Put handouts or brochures out
- Add resource to Electronic Medical Record (EMR)



Presenting Resources: Practicality



Remembering to do it!

- Update EMR templates
- Identify patients (i.e., EMR search)
- Add reminders to patient charts
- Post-it note or phone reminders
- Have a follow-up academic detailing appt!

Heart Failure Example: Clinical Supports

	Local Cardiology Clinics	Gerimedrisk	Virtual Hallway
Description	Clinical support +/- self-management & allied health	Electronic clinical consultations	Clinical support
Time need to investigate	+++	+ (already known from prior topics)	++
Anticipated response rate	Low	Moderate	High
Potential impact for provider?	Moderate	High	High
Well-known?	Yes	No	No
Well-utilized?	Likely	No	No
Relevant to all?	Variable	Yes	No

Heart Failure Example: Clinical Supports

	Home & Community Care	Community Paramedicine	Best Care Teams
Description	In-home assessments & supports as deemed necessary	In-home or remote monitoring + blood draws, check-ins, etc	Assessments & education, clinical recommendations, monitoring
Time need to investigate	+++	+++	+++
Anticipated response rate	Moderate	Moderate	Moderate
Potential impact for provider?	Moderate	High	NA
Well-known?	Yes	No	No
Well-utilized?	Yes	No	No
Relevant to all?	Yes	No	No

Heart Failure Example: Patient Supports

	Local Cardiac Rehab	Regional Self-Management Groups	Heart & Stroke Association
Description	Self-management, social, dietary & activity support	Self-management	Peer support, patient information, patient self-management booklet
Time need to investigate	+++	+ (already known from prior topics)	++
Anticipated response rate	Moderate	High (connected already)	Moderate
Potential impact for provider?	Moderate	Low	Moderate
Well-known?	Yes	No	No
Well-utilized?	No	No	No
Relevant to all?	No	No	Yes

Heart Failure Example: Clinician Decision Aids & Tools

	CEP Heart Failure Tool	www.hfmedchoice.com	RxFiles Furosemide Sliding Scale Resource
Description	Clinical tool supporting	Decision aid for risk/benefit prediction for medications	Cheat-sheet of tips related to prescribing & deprescribing furosemide
Time need to investigate	0	++	+
Anticipated response rate	NA	NA	+++
Potential impact for provider?	High	Moderate	Moderate
Well-known?	No	No	No
Well-utilized?	No	No	No
Relevant to all?	Yes	Likely	Yes

Heart Failure Example: Other Resources

- <https://decongest.ca/> ← Furosemide dosing guidance
- MedSask Drug Shortages ← guidance for alternate therapy that became relevant when a common medication used for heart failure became unavailable
- Canadian Cardiovascular Society Guidelines ← teaching tool, pocket guides
- 211 ← social supports & patient navigation
- 811 ← access to free dietary advice
- Food banks
- Seniors' centres
- Community Health Centres
- +++



Breakout Groups

Breakouts: Case Study

Your team is starting a new detailing topic on Type 2 diabetes. You've been tasked with compiling local resources to share with clinicians during your detailing visits.

1. What types of resources do you want to **include on your resource list?** (*List 5-10 resources you want to include*)
2. Which of those **resources/organizations will you prioritize making a relationship** with so that you can learn more about their goals and services? (*Pick 3 resources/organizations*)
3. Pick one of the above organizations you prioritized and **create an elevator pitch** as a small group for when you introduce your program. (*Think about what information you want to include in your pitch*)

Small Group Logistics

- The discussion goals will be available to view in your chatbox
- You can request help from the host if you need assistance from the NaRCAD team
- See you in 15 minutes!



A large group of fluffy yellow chicks is shown in a red bowl. The chicks are densely packed, and the bowl is filled with them. The background is a soft, out-of-focus yellow, suggesting a large number of chicks. The text "Large Group Discussion" is overlaid in the center in a white, bold, sans-serif font. A thin white horizontal line is positioned below the text.

Large Group Discussion



Empowering Providers to Be Leaders in Their Communities

Jessica Alward, MS, LBB

Topics for Consideration



Why engagement is important



Accountable Health Communities



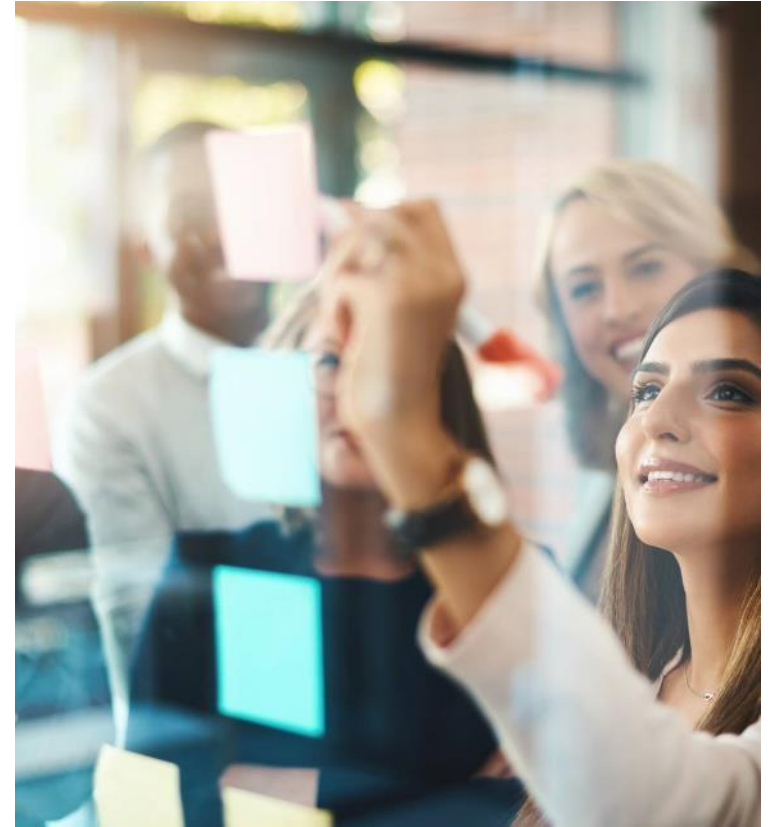
Roadblocks to engagement by clinicians



How detailers can help clinicians engage

Introduction

- Not only do we as detailers need to be able to **share** what resources exist in our communities, providers need to be familiar and **connected** with them too
- It's important for clinicians and practice staff to have a vested interest in the area they practice in
 - **Referring** patients to outside partners means being confident in those referrals
 - Patients **trust** their provider to know which organizations will truly be helpful, respectful and available
- How can we as detailers **help providers** build these relationships and show them exactly why it is vital for them to do it?



Why Community Engagement is Important

Building Stronger Relationships

COMMUNITY PARTNERS

- Learn structure & mission of CBOs
- Share local data
- Identify strengths & vulnerabilities of local community
- Gain practice in leading or collaborating with CBOs
- Innovate- build public policy

PATIENTS

- Reduce health inequities
- Connect with patients as people outside the office
- Develop cultural humility
- Foster trust
- Empower patients

How to Actively Engage

LOCAL

- Participate in health fairs and conferences
- Build a social media presence
- Career days at schools
- Offer group health screenings
- Get to know local 211
- Join a board of directors

GLOBAL

- Join a global engagement organization
- Connect with resource sharing hubs
- Go with whatever you are passionate about

Accountable Health Community Model



Graphic adapted from Carol Ellis, PHD

Clinician Responsibility: Hippocratic Oath

I will remember that I do not treat only a fever or a cancerous growth, but a sick human being, whose illness may affect the person's family and economic stability. My responsibility includes these related problems, if I am to care adequately for the sick.



Creating Accountable Health Communities Through Provider Engagement

WHOLE PATIENT CARE

- Building in time to listen
- Ask open ended questions to gather more information
- Leverage data to understand what is happening in the community and how that impacts a particular patient(s)
- Offer **usable, vetted** community resources
- Anticipate healthcare challenges that can be lessened through connection to community

HEALTH COMMUNITIES

- Find and deal with the widespread health-related social needs to improve health outcomes
- Growing evidence shows that if we deal with unmet HRSNs like homelessness, hunger, and exposure to violence, we can help undo their harm to health

Tools to Foster Whole Patient Care

Screening Tool

RECOMMENDED SCREENING TOOL

Health Leads' screening toolkit is licensed under a Creative Commons CC BY-SA 4.0 license, which means you can freely share and adapt the tool however you like. All we ask is you include attribution to Health Leads and, if you modify the tool, that you distribute the modifications under the same licensing structure. Full details on the Creative Commons license are available at creativecommons.org/licenses/by-sa/4.0/.

Example Introductory text: This form is available in other languages. If you do not speak English, call (800) 555-6666 (TTY: (800) 777-8888) to connect to an interpreter who will assist you at no cost.

Name _____ Phone number _____

Preferred Language _____ Best time to call _____

		Yes / No
	In the last 12 months*, did you ever eat less than you felt you should because there wasn't enough money for food?	<input type="checkbox"/> Y <input type="checkbox"/> N
	In the last 12 months, has the electric, gas, oil, or water company threatened to shut off your services in your home?	<input type="checkbox"/> Y <input type="checkbox"/> N
	Are you worried that in the next 2 months, you may not have stable housing?	<input type="checkbox"/> Y <input type="checkbox"/> N
	Do problems getting child care make it difficult for you to work or study? (leave blank if you do not have children)	<input type="checkbox"/> Y <input type="checkbox"/> N
	In the last 12 months, have you needed to see a doctor, but could not because of cost?	<input type="checkbox"/> Y <input type="checkbox"/> N
	In the last 12 months, have you ever had to go without health care because you didn't have a way to get there?	<input type="checkbox"/> Y <input type="checkbox"/> N
	Do you ever need help reading hospital materials?	<input type="checkbox"/> Y <input type="checkbox"/> N
	I often feel that I lack companionship.	<input type="checkbox"/> Y <input type="checkbox"/> N
	Are any of your needs urgent? For example: I don't have food tonight, I don't have a place to sleep tonight	<input type="checkbox"/> Y <input type="checkbox"/> N
	If you checked YES to any boxes above, would you like to receive assistance with any of these needs?	<input type="checkbox"/> Y <input type="checkbox"/> N

*time frames can be altered as needed

FOR STAFF USE ONLY:

- Place a patient sticker to the right
- Give this form to the patient with patient packet
- PRINT your name and role below

Staff Name _____

Place patient sticker here

Z Codes

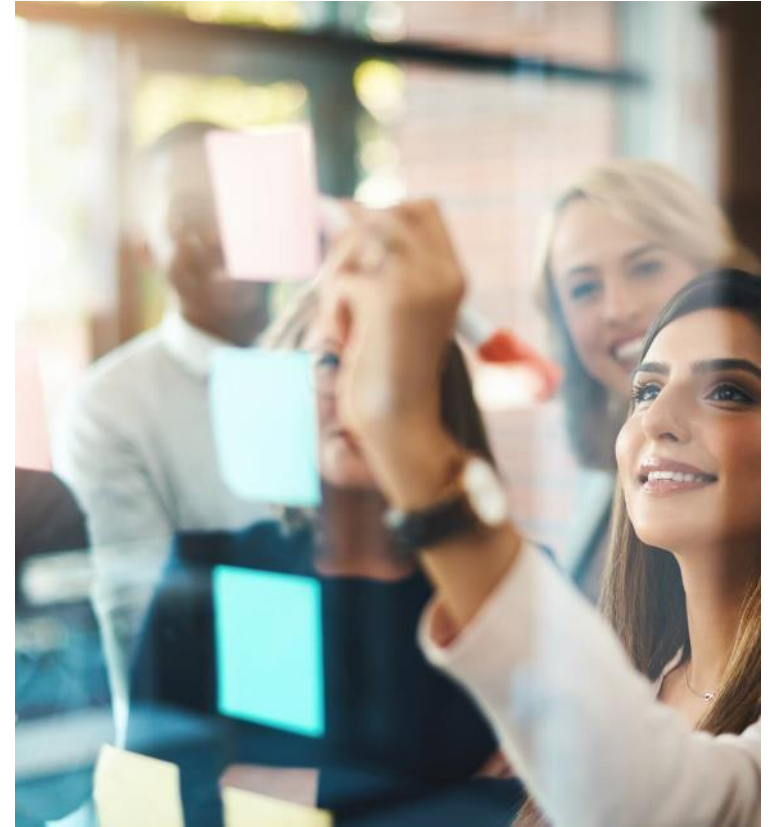
New Z-Codes Proposed for Public Comment

comments due May 10, 2019 to: nchscid10CM@cdc.gov

Z-CODE	SUBCODE	DESCRIPTION
Z55	CATEGORY: Problems related to education and literacy	
	Z55.5	Less than a high school degree
	Z55.6	High school diploma or GED
Z56	CATEGORY: Problems related to employment and unemployment	
Z56.8	Subcategory: Other problems related to employment	
	Z56.83	Unemployed and seeking work
	Z56.84	Unemployed but not seeking work
	Z56.85	Employed part time or temporary
	Z56.86	Employed full time
Z59	CATEGORY: Problems related to housing and economic circumstances	
Z59.4	New Proposed Subcategory: Lack of adequate food and safe drinking water/ Inadequate drinking water supply	
	Z59.41	Lack of adequate food/ Inadequate food/ Lack of food
	Z59.42	Food insecurity
	Z59.43	Lack of safe drinking water Inadequate supply of drinking water
	Z59.6	Low Income
	Z59.61	Unable to pay for prescriptions
	Z59.62	Unable to pay for utilities
	Z59.63	Unable to pay for medical care
	Z59.64	Unable to pay for transportation for medical appointments or prescriptions
	Z59.65	Unable to pay for phone
	Z59.66	Unable to pay for adequate clothing
	Z59.67	Unable to find or pay for child care
	Z59.69	Unable to pay for other needed items
Z59.9	Subcategory: Problem related to housing and economic circumstances, unspecified	
	Z59.91	Worried about losing housing
Z60	CATEGORY: Problems related to social environment	
Z60.8	Subcategory: Other problems related to social environment	
	Z60.81	Unable to deal with stress
	Z60.82	Inadequate social interaction - limited to once or twice a week
	Z60.83	Can hardly ever count on family and friends in times of trouble
	Z60.84	Feeling unsafe in current location
	Z60.85	Stressed quite a bit or very much
	Z60.86	Stressed somewhat
Z71	CATEGORY: Persons encountering health services for other counseling and medical advice, not elsewhere classified	
Z71.8	Subcategory: Other specified counseling	
	Z71.85	Counseling for socioeconomic factors
Z91	CATEGORY: Personal risk factors, not elsewhere classified	
Z91.1	Subcategory: Patient's noncompliance with medical treatment and regimen	
Z91.11	Subcategory: Patient's noncompliance with dietary regimen	
	Z91.110	Patient's noncompliance with dietary regimen due to financial hardship

All information in this table was obtained from [cdc.gov](https://www.cdc.gov) on April 11, 2019 and compiled by Patchwise Labs, LLC





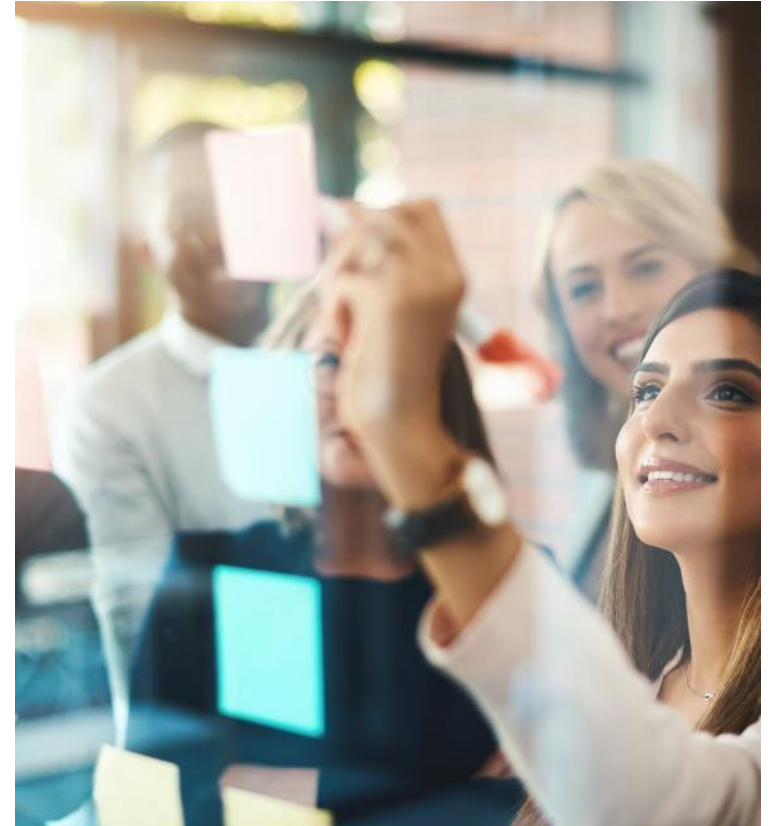
Roadblocks to Clinician Engagement

Why Is It so Hard?

COMMON ROADBLOCKS

- Time
- Clinician interest
- Communication





How Detailers Can Help

What Can We Do as Detailers?

RESOURCES

- Know the organizations in the area
- Share online resources for engagement
- Explain what's in it for them
- Provide useful tools to help them do this work

HUMAN TO HUMAN SUPPORT

- Help providers find their passion
- Explain why local level engagement helps build trust with patients
- Appeal to their sense of greater good
- Share stories of your own community engagement

Summary



Community engagement serves to help providers know and understand the issues



It helps build trust with patients and local organizations and fosters a sense of belonging for the clinician



When an open dialogue between healthcare professionals and citizens is had, better overall health outcomes will be attained



Breakout Groups

Breakouts: Case Study

You're a clinician at a local clinic and want to help improve care for your patients with Type 2 diabetes. You're interested in connecting with community organizations to refer your patients to and decide the local food pantry will be a good place to start.

1. How will you **recruit others in your clinic** to join you in building a relationship with the local food pantry? *(List 3 ways you'd get your clinic on board)*
2. What **information do you need to gather** from the food pantry to **better support you in making patient referrals**? *(List 5 things you'd want to know more about)*
3. How will you/your clinic be able to **support the food pantry** in their own efforts/goals? *(List 3 ways your team can provide support to the food pantry)*

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Large Group Discussion



Thank you



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