

HEALTH MANAGEMENT ASSOCIATES

RHP 4
Learning Collaborative
Social Media Raise the Floor Initiative
Access to Care and Patient Engagement Workgroups

November 18, 2014

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HealthManagement.com

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Introduction and Roll Call

- First Quarter Learning Collaborative
 - 3 more to be held this year, including statewide collaborative in August 2015
- Review progress, successes and challenges for
 - Raise the Floor - Social Media activities
 - Access to Care Working Group - 2:00
 - Patient Engagement - 3:00

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Social Media

RAISE THE FLOOR INITIATIVE

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Social Media Choices

A word cloud of digital marketing and social media terms. The word 'facebook' is the largest and most prominent, centered in the lower half. Other words include 'website', 'twitter', 'messaging', 'blog', 'text', 'mystrength.com', 'webpage', 'solutionreach', 'instagram', and 'youtube'. The words are arranged in a roughly triangular shape, with 'facebook' at the base and 'twitter' and 'website' at the top right.

HMA | 4

Providers' Progress Towards Goals

Providers at various stages in activities:

- Researching/brainstorming available options
- Seeking permission from Executive Leadership
- Establishing/ updating current social media platforms
 - Health fairs
 - Websites
 - Facebook
 - Tracking views and visits

Have gained reach with our ads and promotions to over 22,000 "reaches"/contacts on our FB page. Have increased visits to our website and have created not just employment ads, but many health and wellness ads that are shared often by other organizations on their pages/websites.

HMA | 5

Many Successes !!!!!

- Health Fairs in October and November
- Added a Military Veteran Peer Network link
- Engaging clients/patients in using social media activities
- Expanding and improving Facebook page
- Created a YouTube page (still pending activation)
- Significant increase in visits to webpages, promotions

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Challenges in Meeting Goals

- Improving level of public interest in sites
- Staffing and training
 - Need additional staff, more training to monitor and update websites 24/7
- Obtaining Executive leadership authorization
 - Need approval for website and to expand allowed information
- Client access and education
 - Limited incomes, computer access
 - Many use smart phones but not computers
- Monitoring content, posting and updating information to keep visitors interested and engaged

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About 34,900 results (0.34 seconds)

Yoakum Community Hospital
www.yoakumhospital.org/
 Yoakum Community Hospital is a community hospital serving the
 around Yoakum, Texas since 1922. Yoakum Community Hospital

Employment Opportunities **Department:**
 For The Healthcare of Your Life For The Healthca
 Yoakum Community Hospital ... Yoakum Commu

[More results from yoakumhospital.org »](#)

Old Haunted Yoakum Community Hospital - Yoal
<https://www.facebook.com/OldHauntedYoakumHospital>
 Old Haunted Yoakum Community Hospital, Yoakum, TX. 1586 lik
 this · 232 were here. This page is for information and a place to...

Yoakum Community Hospital Yoakum, TX, 7799!
www.yellowpages.com/yoakum.../yoakum-community...
 Get reviews, hours, directions, coupons and more for Yoakum Cor
 1700 Carl Ramert Dr. Yoakum, TX. Search for other Hoenitale in Yo

Otto Kaiser Memorial Hospital
November 11

Don't forget about our FREE health screenings here at the Hospital THIS Saturday, November 15. No appointment needed and results are immediate. Baptist Healthy Solutions' Mobile Unit will be on campus from 9 am until 1 pm. Bring someone you love and get a free screening that will check your Cholesterol, Blood Glucose, Blood Pressure, BMI and Heart Attack/Stroke assessment. Hope to see you there!



Like Comment Share 21 Shares

129 people like this.
View 7 more comments

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Bluebonnet Trails Community MHMR Center

Accomplishments:

- Navigator staff are participating in Health Fairs and civic events to increase awareness of the program
- Navigator staff are working with the FQHC to begin some education to patients on chronic disease and mental health disease process
- Memorial Hospital Stakeholder – Bluebonnet Trails Navigator Program staff are working together to develop a space on the hospital's existing face book page for monthly questions and educational information to be posted. Currently postings have included monthly prevention articles posted by the Marketing Director. Our input is valued and we will begin posting educational articles on chronic and mental health diseases.
- The Community has become aware of our program and local PCP offices are notifying the Navigator staff for assistance with non-compliant patients and education for this population to keep them from using the ER for visits when their offices are not open

Challenges:

- Organizing meetings that all staff can attend
- Final decision on what is able to be placed on the social media page with administrative approval
- Response from the community on subjects
- Community knowledge of the social media site

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CHRISTUS Spohn

Goal(s):

- Update present Spohn Facebook to include health education and health literacy such that Spohn acts as a “hub” of information including
 - Community health events calendars
 - Immunization sites
 - Health resources etc.

Plan for Implementation and Achievement:

- Spohn leadership buy-in
- Identify and appoint team members
- Harness power of social media with dedicated tech savvy associates
- Bring in local and national sponsorship for community involvement initiatives (ie., point/reward system for visiting site and links to go towards gift card etc.)

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CHRISTUS Spohn

Actions Taken:

- Presently researching/brainstorming/evaluating what’s available presently

Review and Evaluate:

Progress Towards Goal(s):

- In progress, none to report at this time

Challenges:

- Limited knowledge of social media

Next Steps:

- Increase use of traditional and technical media to advertise FB site

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Recommendations for Improving Facebook Sites and Increasing Usage

- Post with consistent frequency: 3-4 times weekly
 - Wednesdays and Sundays are the best days for new postings
- Review your demographic data using the “People Engaged” tab and Page Insights to see who you are reaching and when
- Post between 8am and 7pm
- Shorter posts receive more hits
- Keep content relevant and fresh to keep viewers returning

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Improving Facebook Usage

- Use activities to engage readers using “fill in the blank” and true/false questions
- Use photos and videos to tell a story, launch conversations
- Make sure the content (including links) is mobile/smart phone friendly
- Provide opportunities for readers to talk about themselves
- Interact with followers on a regular basis

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Websites for Tips on Using Social Media

Sites for information on improving your Facebook posts/engagement rates:

- <https://blog.bufferapp.com/7-facebook-stats-you-should-know-for-a-more-engaging-page>
- <http://facebook.about.com/od/PagesGroups/a/11-Ways-To-Increase-Facebook-Engagement.htm>
- <http://www.socialmediatoday.com/content/10-simple-ways-improve-your-facebook-page-engagement-infographic>
- <http://www.marismith.com/resources/>

Updates on Current Events

- Plan Modifications
 - Week of November 17, 2014
 - Comments due December 8, 2014
- October Reporting
 - During the HHSC review process, users who login to the DSRIP online reporting system will be able to see HHSC's preliminary comments and signoff of "approved" or "needs more information." We want to caution that the review process may include multiple levels of review, and that comments and signoff are not final until the review period closes on December 5.
 - Language has been added to the Program Funding and Mechanics Protocol (PFM) to specify that HHSC and CMS may determine that a subset of not less than half of the projects and metrics will be reviewed during the 30 days after the reporting period. In such instances, HHSC and CMS will designate those projects and metrics that are not reviewed within 30 days as "provisionally approved." Such "provisionally approved" projects and metrics will be reviewed in full by HHSC prior to the next reporting due date in April 2015.

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 - Available until November 26, 2014
- Deferral Update
- DY2 Unspent Funds Update

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Reminder: Upcoming Events

- In-person Learning Collaborative
 - February 18, 2015 in Corpus Christi
 - Quality Reporting Templates due: February 2, 2014

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Workgroup

ACCESS TO CARE

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Providers' Progress Towards Goals

Providers at various stages in activities:

- Hired staff
- Expanded hours at existing clinics
- Reopened a clinic closed by previous owner
- Negotiated with city on a new location for clinic

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Many Successes !!!!!

- Monitored the number of individuals referred and accepted to primary care services
- Validated eligibility screening process
- Hired 2 new physicians
- Hired a new mid-level practitioner
- Doubled clinic hours
- Reopened 4 previously closed clinics

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Challenges in Meeting Goals

- Recruitment/staffing
- IT/EMR
 - Connectivity, bandwidth, comfort with technology
- Competing with expanded hours from outside facilities
- Clinic location discourages patients and staff
- Obtaining custody of medical records from previous owner
- Engaging individuals in skills training activities

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DeTar Access To Care Update

RHP 4 Learning Collaborative
November 18th, 2014

- Four Projects to Increase Access to Care
 - Chronic Disease Management Program
 - Rural Pre-Natal Clinics
 - Intensive Outpatient Program
 - Family Medicine Residency

Access to Care Projects

Coastal Plains Community Center

Goal:

To ensure that every eligible individual is offered an opportunity to access primary care services.

Plan for Implementation and Achievement:

- Primary care Navigators are hired for every service site.
- At time of Intake, every individual is assessed for primary care eligibility.
- At any time, the case manager can refer a client to the Navigator for primary care services.
- Referrals are made to the Navigator via a warm hand off procedure as PC clinics are on the same day as the BH clinic.
- Navigators register individuals for primary care services and individual receive a doctor's appointment, a reminder call, and are met by Navigator on the day of the appointment.
- Policy and Procedures were written addressing service access.
- Navigators were trained in Diabetic Empowerment Education Program (DEEP) training so that they can offer classes in Diabetes and High Blood pressure. These are our two Category 3 milestones.
- Monthly meeting are held with providers, Navigators, and Waiver project coordinator to discuss any concerns and recommendations in regards to scheduling, medication dispensing, access to care and any clinic processes.
- We named our PC clinic to distinguish it from the BH clinic. Flyers were printed and distributed announcing the PC clinics. Signs were made and posted throughout the clinic, announcing our Salud y Vida clinic to assist with access to care.

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Strategies for Provider Recruitment

- Promote your facility's personal appeal
 - Why would a provider want to join you?
 - Focus on the positive aspects/attributes of your facility
- Use multiple outreach strategies for reaching potential providers
 - Direct mail
 - Email
 - Journal ads
 - Web postings and website recruitment
- <http://www.healthleadersmedia.com/print/MAR-300433/Physician-Recruitment-Strategies-Get-More-Personal>

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Strategies for Provider Recruitment and Retention

- Identify and advertise ideal candidate attributes
- Pursue multiple candidates to address fall out
- Engage multiple staff (a committee of physician stakeholders, recruiters, administrators) to make hiring decisions
- Provide support during on-boarding to support and sustain physician engagement and integration into the practice and community

<http://www.advisory.com/research/medical-group-strategy-council/practice-notes/2013/august/five-evergreen-topics-for-physician-recruitment>

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Strategies for Provider Recruitment and Retention

- Cast a wide net
- Understand what sets you apart
 - Not all physicians are looking for a large city
 - Note outdoor amenities as well as typical “city” attractions
- Offer competitive compensation and benefits
 - Flexible schedules
- Properly support new hires
 - Maintain open lines of communication
 - Address problems early and quickly to avoid dissatisfaction

<http://www.physicianspractice.com/blog/three-strategies-improving-physician-recruitment-efforts>

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Strategies for Informing Clients of New Hours, Services

- Website updates and information; include testimonials/comments from patients
- Handouts/fliers to patients when visiting clinic
- Include automated message on phone system
- Send emails and text messages to clients
- Work with contracted health plans to include notices in newsletters and ensure provider directory is updated to reflect extended hours

Workgroup

PATIENT ENGAGEMENT

Providers' Progress Towards Goals

Providers at various stages in activities:

- Identified target population
- Created educational materials
- Engaged staff/physicians
- Conducted screenings
- Provide transportation
- Scheduled program sessions at a convenient time
- Sent reminders
- Incentivized participation

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Many Successes !!!!!

- Held 1:1 meetings with corporate and community leaders
- Implemented care transitions/care partners
- Installed TVs in med clinic exam rooms
- Created health resource guides and distributed during nurse home visits
- Created an outpatient clinic brochure and distributed at health fairs
- Provided diabetes education during screenings
- Administered the PHQ9 to over 50% of Karnes County consumers
- Piloted motivational texts

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Challenges in Meeting Goals

- High participant drop-out rate
- Buy-in from patients, parents, management, and community
- Ongoing education of staff and patients
- Access to technology
- Transportation

Keep Message Simple

- Health Literacy affects more than 90 million people
- Literacy skills are a stronger predictor of an individual's health status than age, income, employment status, education level or racial/ethnic group
- Average American reads at the 8th or 9th grade level; 20% read at the 5th grade level or below but most health care materials are written above the 10th grade level
- More than 60% of adults age 60 and over have either inadequate or marginal literacy skills
- Annual health care costs for individuals with low literacy skills are 4 times higher than those with higher levels
- Patients with low health literacy skills have a 50% increased risk of hospitalization compared with patients who had adequate literacy skills

Examples of Simplified Language

- Use words patients can understand:
 - Adequate = enough
 - Ailment = sickness, problem, illness
 - Benign = is not cancer, will not hurt you
 - Excessive = too much
 - Oral = by mouth
 - Avoid = stay away from, don't eat, don't use
 - Option = choice
 - Hazardous = not safe, dangerous

http://c.ymcdn.com/sites/www.npsf.org/resource/collection/9220B314-9666-40DA-89DA-9F46357530F1/AskMe3_WordsToWatch_English1.pdf

Ask Me 3 Questions

- Program of the National Patient Safety Foundation that provides resources and suggestions for engaging patients
- Teaches patients how to communicate with their providers
- Recommends adoption of “Ask Me 3” questions that patients should be encouraged to ask
 - 1. What is my main problem?
 - 2. What do I need to do?
 - 3. Why is it important for me to do this?
- Website include brochures, articles that can be reproduced or linked to from website
- More information is available at

http://c.ymcdn.com/sites/www.npsf.org/resource/resmgr/Store/AskMe_8-pg_EN_ref-sample.pdf?hhSearchTerms=%22ask+and+3%22

Additional Resources for Improved Patient Engagement and Communications

- Preventing falls/home safety tips:
 - <http://www.cdc.gov/Features/OlderAmericans/>
- Improving patient safety/compliance
 - <http://www.npsf.org/?page=educationresources>
- Tips for engaging patients
 - <http://www.betterpatientengagement.com/2012/08/05/infrequent-provider-visits-3-steps-to-improved-patient-engagement/>

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