

Swedish Community Health Needs Assessment Implementation Strategy

Swedish has identified 4 system wide priorities that will be our focus for the next 3 years. In addition, each Swedish campus has an implementation strategy which addresses site specific priorities.

These priorities were chosen based on public health data, recommendations from the CHNA champions at each site (using community feedback) and the Swedish CHNA Advisory Council.

These priorities include:

- Access to Care
- Behavioral Health
- Community Needs Advisory Council
- Diabetes

Access to Care

According to Communities Count King County 2008 the following four indicators lead us to choose *Access to Care* as our number 1 priority over the next 3 years:

- *Living in poverty is increasing*
- *People who could not get healthcare due to cost are increasing*
- *People having no usual source of care are increasing*
- *Percent of uninsured is increasing*

In response, the Swedish goal is to develop programs and processes that bridge the gaps in access to care through the following strategies and activities:

- 1. Affordable Care Act Initiative**
- 2. Development of Innovative programs to provide services to the underserved.**

1. Affordable Care Act Initiative:

The purpose of the Affordable Care Act Initiative is to develop and implement a robust program that will facilitate enrollment in the Washington State Healthcare Exchange. Special focus will be on Medicaid enrollment for the underserved. To that end:

Enrollment

Focus: establish Swedish's role in helping to enroll new patients through Medicaid expansion/the exchanges

- A plan is in place for the SMC Financial Patient Navigators to be trained and certified to enroll patients admitted in any Swedish hospital. Still to be discussed is the availability of resources to assist with enrolling patients in our Emergency Departments.

Physician Strategy

Focus: understand the impact of Medicaid expansion on the physician network and develop a strategy to support the potential influx of new patients

- The team is developing a clinic-by-clinic enrollment strategy. Partnerships with Federally Qualified Health Centers (FQHCs) and other community clinics are also being explored to help manage the influx of new patients and their enrollment needs.

Toolkit

Focus: develop a suite of materials to educate and inform both internal audiences and patients about the upcoming changes in health care

- Swedish is identifying the materials needed for both internal audiences and patients. Swedish will look to leverage current, approved content from the state and Public Health – Seattle & King County once those materials become available. Materials will be offered in a variety of languages to best meet the needs of our patients.

Communications

Focus: ensure all stakeholders remain informed of key activities and progress

- The team will continue to use a variety of communications tools such as this update, the Swedish Intranet and Mini-Memo, and appropriate meetings to share progress reports. Our communications team will lead all external communication efforts, including media relations, social/digital media outreach, and event coordination (as appropriate).

Initial Results:

The following website was developed for our patients and staff:

<http://www.swedish.org/patient-visitor-info/billing/insurance-plan-information/new-insurance-exchange-information>

Ongoing Plan:

As enrollment continues into 2015, Swedish plans to be a thought leader in the community and share its best practices for enrollment. We will continue to be a part of the Dow Constantine King County Leadership Circle to keep abreast of all trends, new best practices and these will be reported back to the enrollment advisory council for implementation.

2. Development of Innovative programs to provide services to the underserved.

In response to the disparity in access to care, Swedish has implemented 2 nationally recognized programs that address access to care for the underserved. The programs will be refined, expanded and replicated across the next 3 years. The two programs are the *Global to Local Initiative* and the *Swedish Community Specialty Clinic (SCSC)*.

Global to Local Initiative:



The Global to Local initiative is a new approach in applying global solutions to local healthcare challenges in underserved populations. Numerous organizations within the Washington Global Health Alliance are working to improve lives of millions of people worldwide. Global to Local seeks to utilize expertise and experience from these organizations to discover ways in which successful global health strategies can be applied in our county, state and country. Global to Local is collaborating with neighboring cities in Tukwila and SeaTac, Wash., to provide innovative, holistic and community-driven solutions to providing healthcare and economic development strategies in diverse, low-income populations.

Click here for a video about Global to Local:

<http://www.swedish.org/About/Overview/Mission-Outreach/Community-Engagement/Community-Programs/Global-to-Local#axzz2SclgwpYT>

Swedish Community Specialty Clinic:

To further Swedish Medical Center's commitment to serve the uninsured, we opened SCSC's First Hill clinic in September 2010. The former Mother Joseph and Glaser specialty clinics combined and partnered with King County Project Access (KCPA) to provide expanded specialty care services to our community. SCSC provides a workable solution to one of the most pressing health care problems facing low-income and uninsured people in our community – access to specialty care services. This program builds on the safety net of primary care provided by the community health and public health clinics in King County. Through KCPA and a volunteer staff of over 300 Swedish specialty physicians, low-income uninsured patients have access to needed specialty health care and donated ancillary, in- and out-patient hospital services.

In 2011 a Specialty Dental Clinic with more than 30 volunteer oral surgeons and dentists was added. This program was developed and funded through a unique collaboration between Swedish, Project Access Northwest, Seattle-King County Dental Society/Foundation and the Washington Dental Services Foundation. Our goal is to set a new standard in community health and demonstrate the importance of charity care to our nonprofit mission even in tough economic times.

Behavioral Health Initiative

Improving gaps in access to behavioral healthcare at all of our clinics and campuses was identified as a key focus in the next 3 years. A strategic plan for implementing Behavioral Health (MH/SA) outpatient and inpatient services at Swedish is a priority. Elements of this strategic plan are:

- To coordinate design and implementation across delivery system that is financially sustainable over time with valid metrics and outcome measures
- Integrate with current community based services that provides continuity of care

Process

- Develop a Steering Committee to oversee implementation of strategic initiatives related to outpatient BH/SA services. Coordinate with other groups and constituencies in an open and transparent fashion. Inform and coordinate activities with governance (SMG/PEC), ASC department, operations and SMC. Initial MH/SA service implementation designed for at risk populations that can be scaled up to new populations at risk. Coordinate with ACO contracting requirements and contracting efforts for reimbursement of BH services.

Goals

- Identify BH need at SMG clinic level, evaluate PCMH implementation (MH/SA scope); develop gap in care analysis
- Identify and evaluate community resources currently available to meet gaps in care
- Identify and coordinate with current services offered within SHS for seamless, continuity of treatment for patients
- Evaluate model(s) for strategic, operational and financial criteria before implementation
- Promote model with constituencies; coordinate and guide implementation of preferred approach
- Coordinate model to effectively integrate with but not replace public funding for “chronic, severe, acute” state defined populations.
- Determine and implement processes & structure that will support long term sustainability of the services.
- Ensure actions are consistent with regulatory requirements.

Milestones:

- Determine Gaps in care and ID and evaluate community resources (analysis)
- Steering Committee formed with charter, regular meetings and attendance, tasks, accountabilities, timeline
- Evaluate models and determine preferred model with metrics and resources
- Preferred model agreed to by SMG/PEC leadership with metrics
- Coordinate and message implementation across SHS and with community

Measures:

- Increased enrollee engagement (PAM survey)
- Decreased symptoms
- Increased quality
- Increased patient satisfaction
- Increased provider satisfaction
- Productivity/FFS for BH services
- Reduced total cost of care for cohort after BH treatment
- Increased access to care

Community Needs Advisory Council Partnership Initiative

After we identified the top tier negative health trends in our communities, Swedish launched an initiative aimed at strengthening partnerships with

specific agencies whose missions addressed the particular negative health trends identified in our CHNA. These local, regional and national agencies were committed to reversing negative health trends and we brought them together to form the cornerstone to our Community Benefits program. These evolving partnerships have explored new ways to share resources and encourage teamwork to impact the health of our community. The CEOs and Executive Directors of these agencies sit on an Advisory Council that meets quarterly. We learned quickly that this group could not only help us shape our response to a particular health trend, but collectively we could start working on overlapping health concerns. These partners were offered multiple year partnerships through agreements that focused less on the funds and more about engagement.

To date, the CHNA Advisory Council includes:

- American Cancer Society
- American Diabetes Association
- Lifelong AIDS Alliance
- Senior Services
- March of Dimes
- National Multiple Sclerosis Society
- American Heart Association

Our priority is to continuously define initiatives that will have impact on the negative health trends. Examples of current activities include:

- Swedish has enhanced opportunities to expand CPR training, community presentations of its Life's Simple 7 cardiovascular program
- Expanded participation in walking and diet programs offered by the AHA.
- Swedish has partnered with Lifelong AIDS to host conferences focused on prevention, policy and practice, along with forming a Medicaid Expansion work group to understand the upcoming challenges and opportunities with healthcare reform in Washington.
- Swedish staff works closely with March of Dimes to improve education and support for expecting and new parents, along with an active involvement in public and fundraising activities throughout the community. Senior Services
- Swedish has partnered with Senior Services to provide mobile mammography services to aging women of color, along with tailored health and fitness classes.

- Swedish and Senior Services partnered on presentations to 15 senior housing facilities, centers and groups.
- Swedish Multiple Sclerosis Center hosts regular group support meetings with individuals in various stages of the disease.
- All agencies are working with the Global to Local Initiative to identify ways to improve health in South King County.
- All agencies are collaborating to develop a preventive health toolkit that can be offered to employers to inform their employees of ways to stay healthy.