



Pittsburgh Regional Healthcare Initiative

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Robert Wood Johnson Pursuing Perfection Site

A community approach to chronic disease

Although Southwestern Pennsylvania has more than its share of chronic diseases—especially diabetes—it is not the only region of the country to discover its quiet epidemic. The New York Times recently concluded a multi-part series on its own diabetes epidemic*.

Whatcom County, Washington, population 180,000, began to examine how it treated people with chronic diseases over a decade ago.

“When patients participate in the design, they make an absolutely transformational contribution.”

*—Lori Nichols, Hlnet Director, Whatcom County (WA)
Pursuing Perfection site*

“We found we did well in treating your broken hand, but not so well if you had a disease that needed constant checking,” said Lori Nichols, Director of the community-based Pursuing Perfection and Hlnet programs. “We found that we were not getting the right information to the right place at the right time.”

In 1990, 84 physicians met hospital executives for two days to discuss their vision for seamless care for the people of Whatcom County.

When Washington State mandated managed care, a Physician Hospital Organization formed, the Whatcom Integrated Delivery System (WIDS). Although WIDS disbanded when the mandate was rescinded, its Quality Improvement group continued to meet with community stakeholders like the health department and local payors. The QI group, the Community Health Improvement Consortium (CHIC) selected quality improvement issues with these attributes: they required collaboration of several entities; they were measurable, and there was readiness in the community to deal with them. Using

a weighted matrix, the group arrived at four areas of concentration: 1) diabetes, 2) congestive heart failure, 3) tobacco cessation, and 4) mammography.

As participants in the Washington State Diabetes Awareness Project, CHIC members agreed on evidence-based guidelines for care. Then the power of the EMR technology became evident. CHIC members agreed to document, for example, diabetes care, populating a dozen fields present in the EMR—and a community-wide diabetes registry was born. Physicians can see how individual patients are doing, and check their own performance as well.

“Most wired” community

At about the same time, 1990, the Sisters of St. Joseph of Peace, at the helm of the 6-hospital PeaceHealth System, took a risk by investing heavily in electronic medical record (EMR) technology. The software, developed in nearby Seattle, over time has become IDX Last Word, (now GE). Today, all physician offices can view the hospital EMR. The majority of labs in the county are reported in it, and now through a joint venture with imaging center and a large multi-specialty group, even x-rays are available. Now physicians have access to real-time information kept at the hospital, even if they themselves do not have EMR technology.

Hlnet: local information superhighway

In 1994, a local Blue Shield licensee and St Joseph Hospital asked how they could get more information to and among physicians. Already, 68% of physicians’ offices were submitting claims data electronically. What if an information superhighway, in the form of a community-wide physician intranet, were made available?

The local insurer paid to wire 105 physician offices with PCs and printers. The cost of operating the network was shared by the hospital and payor with

no charge to the physician for the first three years. The full-service intranet, called HInet, has grown to offer not only the hospital EMR, but e-mail among physicians, listservs for special interest areas, subscription patient information and library resources, a help desk, consulting services—even SPAM protection.

The three-year pilot period expired and physicians were called upon to pay for the service. What happened? Today 99% of physician practices subscribe, as well as 8 of 9 skilled nursing facilities. Today, over 2100 PCs are in use in physician practices. In fact, there are now more PCs than network users, indicating that physicians also log on from home. Whatcom County has been called the “most wired” medical region in the country.

Involving patients

Whatcom County received a Pursuing Perfection grant from the Robert Wood Johnson Foundation in 2001, which enabled it to extend the conversation to patients. In fact, the resulting web-based tool may make the patient the hub of his or her own information.

This secure, internet-based, patient-centered tool, called the Shared Care Plan, is available to any resident in Whatcom County (www.sharedcareplan.org). Patients can track their own lab results and recent diagnoses, enter their medication lists, drug allergies, health goals, advance directives and so on. They can also receive their information: the Shared Care Plan “talks” to the hospital EMR,

electronic prescription software, and someday, imaging software. The Shared Care Plan also links patients with the subscription-only patient information site, Healthwise, and soon Krames.

“How did we know what to offer? The patients told us,” says Nichols. “The Shared Care Plan puts information in their hands and engages them in managing their conditions.”

Patients told the team that they needed more than an online tool: they needed people to help them navigate the healthcare system to get the care they needed. The Pursuing Perfection project funded several Clinical Care Specialists, community-based professionals who fill healthcare gaps. Clinical Care Specialists break through red tape when a patient needs to be seen; teach self-management skills and link patients with necessary resources for conditions like diabetes; and translate between patients and health care professionals.

Results

Since the Pursuing Perfection grant enabled Whatcom County to implement the Shared Care Plan and Clinical Care Specialists, results have been encouraging. Patients report improved quality of life, less depression, improved functional status and increased confidence in managing their own health. Patients and physicians alike report improved relationships and better visits as a result of the Shared Care Plans. More patients are avoiding hospitalization and ED visits, resulting in savings of about \$3000 per patient per year.



Pursuing Perfection in Whatcom County, Washington encourages better management of chronic disease by putting patients at the center. Patients can create their health record and map their progress.

A lesson in transformation

“Possibly the most important thing we have learned,” says Nichols, “is that when patients participate in the design, they make an absolutely transformational contribution.”

Patients sit on the Pursuing Perfection Leadership Board, on the Patient Family Advisory Board, on the design teams with the hospital. Patients sat on the interview panel when the Clinical Care Specialists were hired.

“Their assessments of the candidates were sometimes very different,” says Nichols. “The resulting conversations on the panel resulted in selections both patients and clinicians agreed upon.”