Webinar Instructions

Thank you for joining today, please wait while others sign in.

- Phone Dial in: 1-866-740-1260
- Access code: 4796665#
- Due to the large number of participants, all lines will be muted during the call.
- If you want to ask a question, please type in your question into the box.
Improving the lives of older Americans

Building Sustainability at Every Level – Two AAAs Share Their Strategies for Success

March, 2011
Agenda

- Central Texas Partnership to Support the Health of Seniors and their Families - Center Texas Area Agency on Aging/Aging and Disability Resource Center and Scott and White Healthcare (30 minutes)
  - Richard McGhee, Central Texas AAA
  - Angie Hochhalter, Scott and White Healthcare and Texas A&M
  - Alan Stevens, Scott and White Healthcare

- Texas Healthy Lifestyles - Area Agency on Aging of Tarrant County and Senior Citizen Services of Tarrant County (30 minutes)
  - Don Smith, AAA of Tarrant County
  - Jennifer Severance, Senior Citizen Services of Tarrant County

- Q &A - all participants (20-25 minutes)
Central Texas Partnership to Support the Health of Seniors and their Families:

*Central Texas Aging & Disability Resource Center and Scott & White Healthcare*

H. Richard McGhee, Director
Central Texas Area Agency on Aging

Angie Hochhalter, PhD
Alan Stevens, PhD
Scott & White Healthcare

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[Central Texas Aging & Disability Resource Center]

[Scott & White Healthcare]
Outline

• Our organizations and motivation for partnering

• Collaborative projects

• Challenges to partnerships, ideas for success
…a highly visible, trusted, and valued place where people of all ages and incomes can turn for information on the full range of long term service options and is a single point of entry to access support programs and benefits.
Central Texas Resource Center
An Initiative of the U.S. Department of Health and Human Services

Consumer Impact
Program Growth
Community Impact
Infrastructure, System Change

FORWARD TOGETHER
2011 Congress on Healthcare Leadership

American College of Healthcare Executives
Support and Funding Basics

- Older Americans Act – Core Services
- AoA/CMS Gants for ADRC
- AoA/CMS ADRC Money Follows the Person
- AoA/CMS ADRC Care Transition
- CMS MIPPA and State Health Insurance Program
- Local Governments
- State General Revenue
- TOTAL ANNUAL FUNDING: $ 1.8 Million
ADRC organizational structure allows leaders to align the individual goals of partner agencies to achieve greater access and new services.
ADRC organizational structure allows a single point of entry
Recent Health Initiatives

• Evidenced-based programming
  • Chronic disease self-management
  • Caregiver support

• Community Living Program (AoA/CMS)

• Evidence–Based Care Transitions (AoA/CMS)

• Veteran’s Directed Home & Community Based Services Program (VD-HCBSP)
ADRC Impact on Health

• Empowers informed long-term planning and decision-making
• Streamlines access to public and private services
• Is a trusted information and counseling source for consumers and professionals
• Links with pathways to long-term services and supports
• Offers evidenced-based health programming to support patient engagement in self-care
• Collaborates to secure grant funding for demonstration programs
“I guess I would simply have done the best I could on my own if I was capable. I feel more confident now that I have found [ADRC personnel] and I know she would help me.”

Where would you have turned for services had you not contacted the ADRC?

“Call 7 Different Agencies”

“Phone book but preferred individuals/businesses vetted by ADRC”

“Done run out of options”

“Lord only knows”

“…Maybe Doctors”

“Perhaps a nursing home”
Scott & White Healthcare: accountable for the health, quality of life, and value of care in our community
• Grants/quality infrastructure
• Personnel dedicating time to the relationship, programs, presentations, evaluation
• Flexible funding streams for matching dollars, in kind contributions
• EMR
• Formal relationships with consumers

ADRC PARTNER PROFILE

• Represent healthcare as a stakeholder, provide letters of support
• Provider referrals to ADRC services, space available for programs
We partner because ADRC…

• Connects with consumers outside the “patient” role
• Is a one-stop for access to community resources
• Is better than us at doing certain health-related activities
• Can address social barriers to care
• Has access to unique funding sources
• Has a different perspective
• Shares our core values and goals
Business Case for Healthcare-ADRC Partnership

– Earn community trust, consumer loyalty

– Protect operating margin
  • Open beds to high acuity patients
  • Open beds to additional payers
  • Avoid penalties for excess readmissions (PPACA)

– Optimize efficient use of resources by right-sizing hospitals (e.g., economies of scale, productive staffing ratios, reduced need for new beds)
Challenges in ADRC-Healthcare Partnerships

Strategies for Marking Partnerships Work

American College of Healthcare Executives
## What Does it Take for Us to Partner?

<table>
<thead>
<tr>
<th>ADRC</th>
<th>Healthcare</th>
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<tr>
<td>• Commitment to partnering, respect, valued outcomes</td>
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<td>• Shared project leadership</td>
<td>• Qualified leader with dedicated time</td>
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<td>• In kind personnel time</td>
<td>• Shared project leadership</td>
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<td>– Planning/writing proposals</td>
<td>• In kind personnel time</td>
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<td>– Referrals to/from program</td>
<td>– Planning/writing proposals</td>
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<td>– Team meetings</td>
<td>– IRB/compliance</td>
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<td>– Training program personnel in ADRC protocols</td>
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<td>– Data extraction from ADRC systems</td>
<td>– Data systems support</td>
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<td>• Software licenses, space</td>
<td>• Employer of record, new HR positions and processes</td>
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<td>• Contract management</td>
<td>• Commitment to evaluation not interfering with service delivery</td>
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<td>• Commitment to evaluation</td>
<td>• Commitment to the health of the community</td>
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<td>• Flexibility in timeline for unfamiliar processes (e.g., IRB)</td>
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Ideas for Starting Partnerships

• Begin with tight focus, build on incremental success

  Consider beginning with applications for PPACA programs requiring partnerships

• Go out of your way to demonstrate mutual respect, commitment to real partnership, and potential for mutual benefit

  History of poor relationships, perceived potential for being taken advantage of in PPACA programs may be an initial barrier
Strategies for ADRC-Healthcare Partners

- Collaborate on well-defined projects
- Build on incremental success
- Identify champions to nurture the relationship, encourage others in the organization to get involved
- Give each partner a stake
- Share the spotlight
- Remain flexible to partner roles & responsibilities
- Leverage partner strengths, be patient with differences
- Define short- and long-term markers of success
- Look toward the future
Central Texas Awards/Recognition

- Over $7 million dollars in competitive discretionary funding to enhance the lives of older Central Texans and their family caregivers
  - Community Living Program
  - Veterans Directed Home and Community Based Services Program,
  - ADRC Evidence-Based Care Transition Demonstration Project
- 2010 AoA/CMS/VA Excellence in Action - Changing Systems – Changing Lives Award
- 2010 and 2011 winner of the AoA/CMS/VA award for partnership with the VA Medical Center
- 2009 Rosalynn Carter Leadership Award in Caregiving
Central Texas ADRC and Scott & White Healthcare Partnership to Support the Health of Seniors and their Families

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I was tired. My pain was my boss. It was telling me what I could and couldn't do. {insert your program name} workshops put me back in charge.

Now I have the energy to do the things that matter. I am calmer and more confident about my health. I got relief from my pain.

I put life back in my life.

Texas Healthy Lifestyles
Chronic Disease/ Diabetes Self Management Program

Administration on Aging/National Council on Aging
“Building Sustainability at Every Level”
March 2011

Donald R. Smith, MA, Area Agency on Aging of Tarrant County
Jennifer J. Severance, Ph.D., Senior Citizen Services of Tarrant County, Inc.
Presentation Overview

- History of evidence-based programs in Tarrant County
- Procurement and contract management
- Implementation strategies
- Partnering strategies and examples
- Challenges and successes
History of Evidence-Based Programs in Tarrant County

• Healthy IDEAS
• Matter of Balance
• Diabetes Identification and Management Program
• Medication Management Improvement System
• Stanford Chronic Disease Self Management for Diabetes
• Resources for Enhancing Alzheimer’s Caregiver Health (REACH II)
• Community Living Program/Care Transitions
Procurement and Contract Management

- **Healthy IDEAS:** staffed by AAA (2006)
  - Four subcontractors

- **Matter of Balance** (2008)
  - Outsourced to Senior Citizen Services of Tarrant County
  - 33 senior centers
  - Full-time Project Manager/ Master Trainer
  - Over 900 graduates; three (3) active Master Trainers; over 60 lay leaders
  - Lesson learned: Outsourcing allowed rapid expansion and increased sustainability
Procurement and Contract Management

- Diabetes Identification and Management Program
- Meals on Wheels (United Way Demonstration Project)
- National Association of Area Agencies on Aging Top Innovation Award (2009)
- Two full-time dieticians funded by United Way and AAA Title IIIB Revenue
- United Way commitment to funding for three (3) years
- Lesson learned: Multiple funding sources increase sustainability
Procurement and Contract Management

- Resources for Enhancing Alzheimer’s Caregiver Health (REACH II)
- Over 20 Licensed Professional Counselors
- Grantees and Vendors
- United Way, Community Living Program and Title IIIE Revenues
- Lesson learned: Use of vendors allows scalability
Procurement and Contract Management

- Stanford Diabetes Self Management Program (DSMP)
- Tarrant County Department of Public Health (TCPH) - Past CDSMP Licensee
- Jennifer Severance, Ph.D. / Full-time project manager/Master Trainer
- VA North Texas Health Care System (VD-HCBS Agreement)
- Lessons learned: Choosing partners with experience in evidence-based programs
  - improves startup capacity
  - further diversifies revenue streams (VA, TCPH)
Procurement and Contract Management

- United Way’s Healthy Aging and Independent Living Initiative
- Three-year $4 million initiative
- Respite Care
- Caregiver Education and Counseling
- Diabetes Screening and Intervention
- Stanford Diabetes Self-Management Program
- Lessons Learned: Strategic partnerships build momentum and increase financial leverage
DSMP Progress since June 2010

- 5 Master Trainers
- 22 Lay Leaders
- 22 workshops
- 323 enrolled
- 159 graduates
DSMP Implementation Strategies

• Partnerships:
  United Way
  Area Agency on Aging
  Senior Citizen Services
  Tarrant County Public Health
  VA North Texas

• Resources:
  United Way’s Healthy Aging and Independent Living Initiative

• Lesson learned: Building on previous experience (Matter of Balance program)
DSMP Monthly Workgroup

- Primary partners represented
- Coordination/ Planning
- Accountability/ Progress
- Reinforcement/ Corrections
- Program promotion

Lesson learned: Frequent meetings with project partners are essential
DSMP Implementation Sites

- Community Centers
- Government buildings
- Faith-based groups
- College campus
- Long term care campus
- Lesson learned: Site diversification is key to building capacity
DSMP Partnering Strategies and Examples

• Formal agreements
  Tarrant County Public Health
  VA North Texas Health System
  Senior Citizen Services

• Info-sessions (Session Zero)
  YMCA Silver Sneakers Program
  Retirement Homes

• Course Development
  Senior Education Program at Tarrant County Community College
  Campuses
DSMP Partnering Strategies and Examples

- Direct observation
  - Texas Health Resources
  - JPS Health Network

- Professional networks
  - Tarrant Area Gerontological Society
  - Faith Community Nursing Network
  - Tarrant County Diabetes Collaboration
  - Healthy Tarrant County Collaboration
  - Health Literacy Council
  - Coalition on Aging and Disability Services
  - Aging and Disability Resource Center
DSMP Partnering Strategies and Examples: Possible Future Partners

- VA North Texas Expansion (40 counties)
- Pharmaceutical Companies
- Health Industry Council of North Texas
- Federally Qualified Community Health Centers
- AARP Chapters
- Neighborhood Associations
- Lesson learned: Explore win-win, nontraditional partnerships
Other Lessons Learned

• Start with a plan
• Stay flexible & communicate
• Know the decision-makers
• Provide ongoing support
• Focus on your customer
• Take pictures
• Celebrate success
“The class has been challenging and encouraging. It has challenged me to take a continuous look at my diabetes and set daily goals to control my disease. I have been encouraged because I believe that consistent changes will allow me to have some control of this disease I have.”
I was tired. My pain was my boss. It was telling me what I could and couldn't do. {insert your program name} workshops put me back in charge.

Now I have the energy to do the things that matter. I am calmer and more confident about my health. I got relief from my pain.

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