Engagement, Education, Early Detection

Shared Goal: Reaching 80% Screened for Colorectal Cancer by 2018
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Evansville, Indiana
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Mission
In keeping with our Christian heritage and tradition of service, the mission of Deaconess is to advance the health and well-being of our community, with a compassionate and caring spirit.

Vision
To be the preferred regional health care partner for patients, providers, employees and payers, with access to innovative, efficient, top quality health care.
Deaconess Health System
Evansville, Indiana

At a Glance

• Not-for-profit, governed by a local board of directors
• 50,000 Discharges annually
• 99,000 Emergency department visits
• $900 million in net revenues
• 5000+ employees
• 60+ MD/DO PCPs employed by Deaconess Clinic
• 63% market share in primary service area
• Approximately 2000 analytic cancer cases/year
Engagement

Senior Administration

• President & CEO – Health System
• VP, Deaconess Clinic
• Medical Director, Deaconess Clinic
• Medical Director, Deaconess Clinic-GI Department
• Oncology Committee Chair
• Surgeon
• Nursing Leadership

Clinical Team

• Primary Care Physicians
• Practice Managers
• Health Coaches
• Office Nurses
• Community Engagement Specialist
• Population Health Teams-Deaconess’s ACO
Education
Program Activities- Three Year Plan

• Year 1
  – Increase awareness and education both providers, clinicians, and patients of Deaconess’s commitment to the 80% by 2018 pledge.
  – Population Health teams collaborated to mine EHR for relevant data to establish baseline screening rates for Deaconess Clinic patients
  – Laboratory Department – evaluate current screening tools/kits

• Year 2
  – Focus on PCP workflows and quality indicators.
  – Leverage EHR to identify screening processes and gaps in practice.
  – Continue education internal and external

• Year 3
  – Colorectal Cancer Awareness Seminar-planning stages
  – Continue Deaconess Clinic Quality Indicator
  – Continue Population Health Management initiatives
Early Detection
Improving Primary Care CRCS Rates

• Three year journey began March 20, 2015
• Reflecting back – four phases
  – Blissfully ignorant
  – Reality Check → LOTS of opportunity exists
  – Fly-wheel is turning
  – We will succeed
Colorectal Cancer Screening Rate Trend
12/2015 to 10/2017
60+ PCPs 35,000 Patients

Blissfully ignorant:
* Kick-off meetings
* Report build & validation
* GI Physicians own EMR updates
* Pledge awareness campaign
* Rally the troops & community
Colorectal Cancer Screening Rate Trend
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Reality check: LOTS of opportunity
* EMR Optimization - data capture, reporting, BPA's, Health Maintenance
* GI Physicians present at PCP Seminar
* Provider, staff, patient education on CRCS
* Dashboard provider performance compare
* CRCS added to Physician Quality Comp plan as "Possible Future Metric"
Colorectal Cancer Screening Rate Trend
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Fly-wheel going:
* Clinical Practice Guideline drafted w/Quality and Board
* CRCS Initiative - objective, goals, expectations, resources
* Pledge posters showing progress in all PCP lobbies
* Working care gap lists - voluntary and mandatory
Colorectal Cancer Screening Rate Trend
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We will succeed:
* Physicians put CRCS 80% on their at risk Quality Comp plan
* CRCS 80% incentive alignment across entire health system
* HRA $$$ for employees completing screening
Key Takeaways

• Communication, Data Transparency, Ownership
  – Patient and community awareness
  – Employee, staff, and provider education and empowerment - give them knowledge and resources
    • Provider compare data transparency = “Own your results”
    • “I can’t make them” → “I can influence them”
    • “We’re prepared to take on risk”
  – Keep talking about it and they’ll remember
    • Employee newsletters and forums
    • Provider newsletters, EMR message boards, Care Team meetings, monthly progress dashboards
    • Campaign infographics – suitable for all audiences
    • Lobby posters displaying progress towards goal
FROM THE DIRECTOR’S DESK

May 2017

Questions?

THANK YOU!!