Engaging and Empowering Patients: Redesigning Patient Care

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Tuesday, March 6th, 11:30am - 12:30pm
Speakers

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Conflict of Interest

Jonathan Ringo, MD
Has no real or apparent conflicts of interest to report.

Patricia Birch, MBA
Has no real or apparent conflicts of interest to report.
Agenda

• Welcome & Introduction
• Learning Objectives
• Redesigning Patient Care: Industry Drivers
• Redesigning Care: LifeBridge
  • Challenges
  • Solution Approach & Barriers to Adoption
  • Results
  • Best Practices
• Q&A
Learning Objectives

• Describe how a digital patient engagement solution can help deliver a superior patient experience while delivering better outcomes, improving continuity of care and enhanced communications

• Describe best practices in applying human-centered design to build clinically integrated patient engagement platforms

• Describe the key barriers to adoption and strategies to overcome them during the implementation of the solution

• Share best practices around rapid implementation and scaling for clinically integrated patient engagement platforms
Redesigning Care: Industry Drivers
We Have a Complex Healthcare System

<table>
<thead>
<tr>
<th>Issue</th>
<th>Description</th>
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<tbody>
<tr>
<td>Siloed Care</td>
<td>Care is ad-hoc, atomized across systems and treatment</td>
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<td>Lack of Transparency</td>
<td>Insufficient access to healthcare costs, information and services</td>
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<td>Healthcare Bureaucracy</td>
<td>Consumers are asked to navigate a complex system, handle complex choices</td>
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<td>Regulatory Barriers</td>
<td>Time spent on complying with rules vs delivering care</td>
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## Consumer Expectations Are on The Rise

<table>
<thead>
<tr>
<th>Feature</th>
<th>Expectations</th>
<th>Examples</th>
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| **Personalized Experience**     | • Preference for personalized shopping experience  
                                  • Personalized recommendations, treatment                      | Netflix  |
| **Price Transparency**          | • Details of out-of-pocket costs  
                                  • Upfront cost estimates                                        | Amazon  |
| **On – Demand Access**          | • Anytime, Anywhere: quick and efficient  
                                  • Tele-medicine, virtual access                                  | Uber    |
| **Digitally Connected**         | • Patient support networks and social communities  
                                  • Wearables, health & wellness apps                               | YouTube |
Shift Towards Value => Simplicity

- Incentives to promote healthy lifestyle
- Rewards for behavioral change

- Cost and quality transparency
- Alternative options for care

- Experience
  - Frictionless and intelligent transactions
  - Quick access to information

- Loyalty / Rewards

- Convenient Access
  - Tele-visits
  - Same day access

- Affordability

- Continuity of Care
  - Fully integrated network
  - High quality of care across care settings
Technology: Foundation for Redesign

- Meaningful Interactions
- Simplified Decisions
- Better Health Outcomes
- Seamless Care Delivery
- Empowering Consumers

- Remote Patient Monitoring
- Virtual Assistant
- Robotic Assisted Surgery
- Smart Scheduling
- Medication Adherence
Engaging and Empowering Patients

- **Connected Care**: Delivering high quality and personalized care
- **Intelligent Treatments**: Using Artificial Intelligence to drive synergies of care
- **Omni-channel Experience**: Streamlined and seamless experience
- **360 Degree View**: Holistic view of health records will drive care efficiencies
Redesigning Care: LifeBridge
Gaps in Communication and Care Coordination

**System Level → Inconsistent Communications**
- More than 100 contact centers
- Different processes, tools, approaches
- Inconsistent patient/provider experiences

**Physician Level → Dissatisfaction and Referral Leakage**
- Admissions and discharges without PCP knowledge
- Limited hospitalist and PCP communication during acute care stays

**Patient Level → Limited Engagement and Satisfaction**
- Variable post discharge follow up
- High emergency room utilization
- Patient satisfaction below goals
Two Core Solution Objectives

Enhance Physician Communications and Collaboration

- Warm handoff between PCP and hospitalist team
- Plan of care continuity

Deliver Seamless, Integrated Patient Experience

- Omni-channel communication
- Patient education
- Care coordination activities including transportation, medication assistance, and appropriate utilization
Envisioned Desired Future State

• Conducted stakeholder interviews, ethnographic studies, workflow analysis

• Evaluated current vs. future state processes

• Leveraged human-centered design principles to re-define the patient care and physician experience

• Focus on quadruple aim
Collaboration Across People, Process, Technology

**People**
- Local and global admin and clinical staff
- 24 X 7 Support
- Real time quality & performance oversight
- Training

**Process**
- Process re-design
- Across organizations
- Across care settings
- Tailored task & workflow management

**Technology**
- Omni-channel
- Real-time dashboards
- Cloud, shared, on premise
- Telephony/IVR routing
- Bi-directional
Flexible, Digital Patient Engagement Solution

- Cloud-based, as-a-service, highly personalized omni-channel engagement
- Access to patient data and call history
- 24/7 clinical support
- Robust analytics: real-time alerts and comprehensive view
- Integrated workflows for diabetes, congestive heart failure COPD disease management programs
- Remote monitoring
Developed Plan to Rapidly Pilot and Scale

Rapid pilot within 45 days, and full roll out within 90 days

An adaptive iterative approach allowed the team to add services on the fly as new opportunities were identified.
### Rapid Implementation Supported New Services

<table>
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<tr>
<th>Category</th>
<th>Services</th>
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<tr>
<td>Pre-Discharge Contact</td>
<td>Post-Discharge Follow Up, PCP Notifications, Care Gap Follow up, Surveys (HCHAPS, and others)</td>
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<tr>
<td>Transfers</td>
<td>Scheduling, Transport, Provider Connect</td>
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<tr>
<td>Medical Office Support</td>
<td>Referral Support, Medication Review and Escalation</td>
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<tr>
<td>Behavioral Connect</td>
<td>Clinical Alerts, Adherence and Alert Follow Up</td>
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<tr>
<td>Community View (HIE)</td>
<td>Clinical Conference Connect</td>
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<tr>
<td>Live Transcription</td>
<td>Pharmacy Advice, Clinical Conference Connect</td>
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<tr>
<td>Health Assessments</td>
<td>Biometrics and Wearables, Tele-Medicine</td>
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**Legend**

- **In Place**
- **Developing**
Challenges and Barriers to Adoption

1. Unlearning existing processes → understanding and working with new processes
2. Understanding the styles and exact mode of communication among physicians, patients and employees
3. Management of variable communication channels
4. Understanding wishes vs reality (Kaplan)
5. Proving value-add and return on investment
6. Resistance to an off-shore model
Improved Patient and Physician Satisfaction

**Patient Satisfaction**
- Significant spike in patient satisfaction levels
- High HCAHPS scores and improved overall Star Rating

**Physician Satisfaction**
- Smooth hand-offs between hospitalists, PCPs
- Positive feedback across provider community, staff, community physicians
Performance KPI’s Have Exceeded Expectations

- **100%**
  - Improved follow up within 48 hours of discharge for high risk patients

- **21.5%**
  - Reduced Readmissions more than 21% for the CHF and COPD Populations through managed care transitions

- **15%**
  - Reduction in No-Show Appointments through patient follow-up calls, transportation assistance, and reminders
Increase in Inbound/Outbound Call Volume

125%+ increase in inbound/outbound call volume supported reduction in readmissions
The Program Continues to Scale

• Piloted initiated in July 2015; expansion of the team and use cases began immediately and continues weekly

• Solution capabilities support our Medicare Populations through the Chesapeake Regional Information System for Our Patients (CRISP), including call center, clinical support, scheduling, and care coordination with primary care.

• As of Dec 2016: 5,000+ Patient/Physician contacts per week 20,000+ contacts per month (across phone, email, web)
LifeBridge Health LifeLink Command Center
Best Practices

Work closely with key stakeholders:
- Conduct interviews to gain perspective across multiple stakeholders
- Identify and prioritize key objectives
- Define a clear solution vision and implementation roadmap

Develop a strong business case and define clear success metrics:
- Ensure flexibility to implement course corrections as needed
- Look across clinical process and outcomes, patient and physician satisfaction measures, key financial indicators

Apply human-centered design:
- Capture the patient perspective
- Actively engage patients in your design process
- Consider your target population, simplicity and ease of use
Best Practices (continued)

Confirm solution integration across your IT ecosystem:
• Including integration with EMRs, population health records, analytics

Incorporate human-centered design to ensure high adoption:
• Build solution around end-user perspectives vs. traditional systems-driven approach

Identify the right implementation partner:
• Strong relationships ensure success over the long-term

Ensure senior executive-level support across the project lifecycle
Questions

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http://www.lifebridgehealth.org/sinai/AskPresidentSinaiHospital.aspx

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