

Mission:

To improve the health of the residents and environment of Newaygo County.

Vision:

For Newaygo County to be the healthiest county in the state of Michigan.

Members of LiveWell Newaygo County



Newaygo County Partners in Prevention and Recovery

Commission on Aging

Current Projects

- BreatheWell Tobacco Cessation Services
- CATCH (Coordinated Approach to Child Health)
 - IHI: Better Health for Lower Cost

Strategic Planning:

Promoting LiveWell in Newaygo Co.

Increase community engagement in the coalition

For more information, visit www.newaygocountycc.org

IHI Project: Our Multi-Agency Goals

Core Components

- Participant centered – screening and assessment driven
- Fluid service delivery in participant's home
- Improve general self-sufficiency, quality of life, health outcomes
- Reduce need for public assistance and healthcare costs

Project Developed: MI Way to Thrive

- Improve life for families by building self-sufficiency and effective engagement with the health care system
- Flipped the traditional model and went outside the healthcare system
- Examples of barriers addressed by MI Way to Thrive:
 - Health behaviors
 - Navigating healthcare system
 - Education
 - Health literacy
 - Insurance
 - Budgeting
 - Transportation
 - Jobs

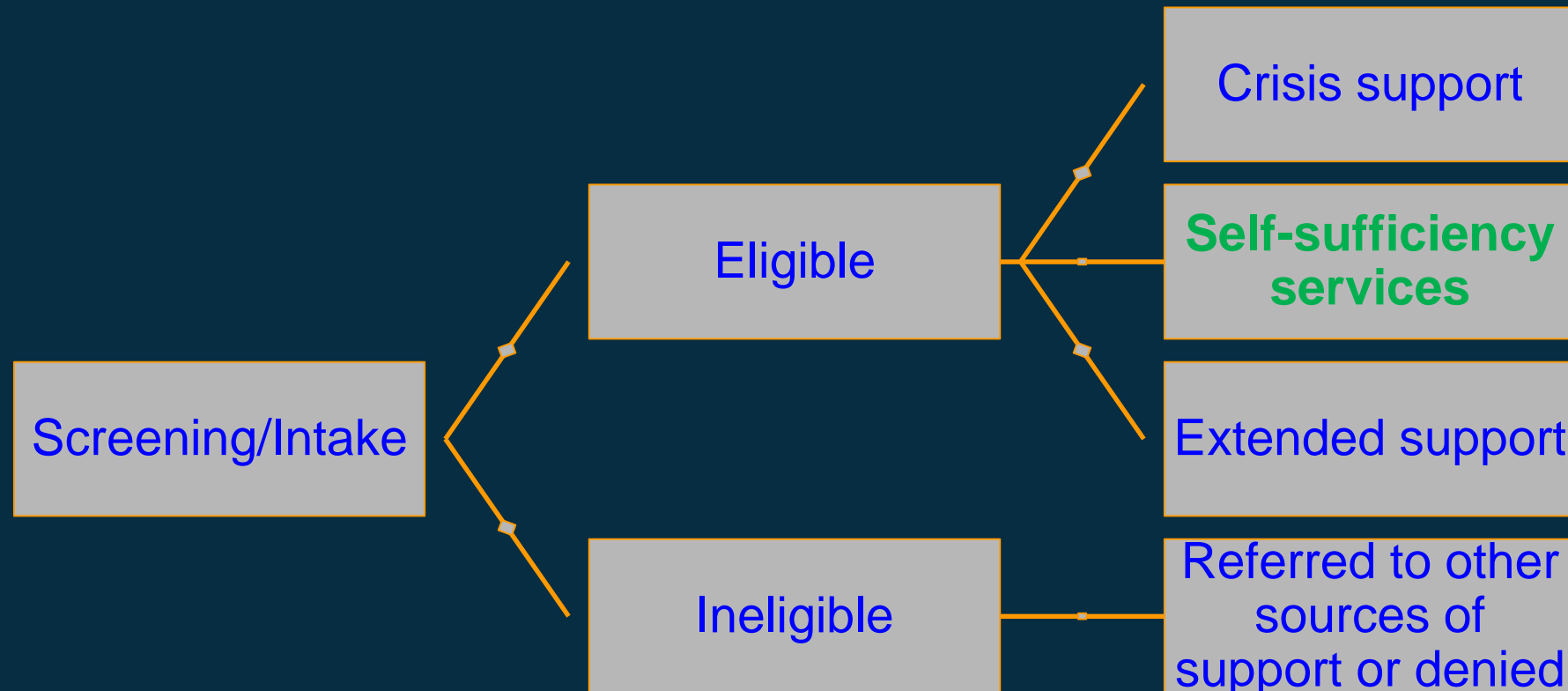
Final Target Population

Population segment:

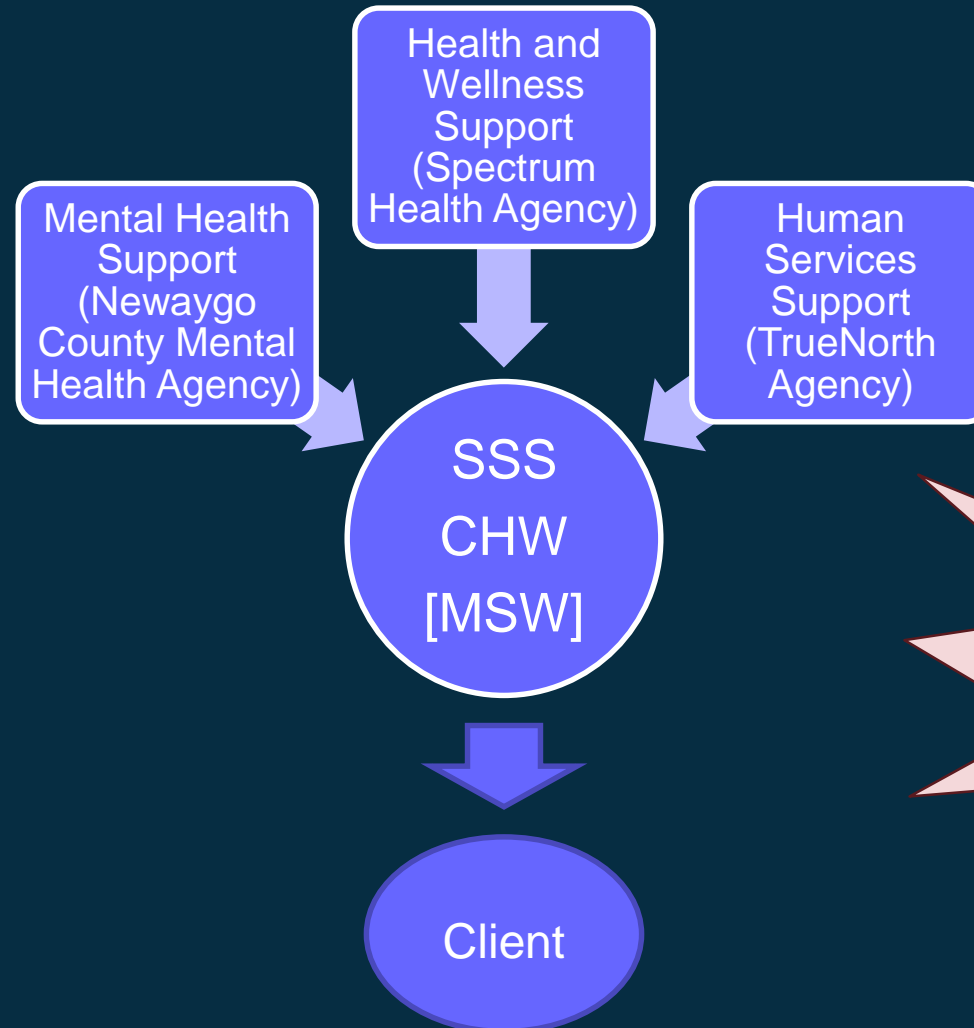
- 150%< of FPG
- Those seeking services at TrueNorth or Community Mental Health
- Identified by self-sufficiency worker at TrueNorth or MSW at CMH
- At least one significant chronic disease
- Medicaid or no insurance preferred
- Disengaged from the healthcare system or using it incorrectly

Seeking current and future high risk participants

Model Implementation: Participant Recruitment



Model Implementation: Care Model Design



The key is the Data Sharing System!

Implementation: TrueNorth's Role (SSS)

- Budgeting education
- Connection with CHW
- Energy optimization kits
- Job skills
- Education and employment resources
- Housing assistance
- Food bank
- Christmas support
- Bill payment contribution
- Focus on environmental, occupational, financial, and intellectual well-being

Implementation: Spectrum Health's Role (CHWs)

- Focused on health behaviors and health literacy
- Sets goals, action plans, and tracks progress related to physical, emotional, behavioral, social and/or spiritual health.
 - May be some overlap with SSS.
- Overall health & well-being promotion and education; disease focused
- Coordinate health related services (i.e. insurance, healthcare navigation, etc.)
- Verbal, written, or in-person patient advocate
- Use a variety of assessments to measure outcomes

Our workforce and roles

Role	Agency	Definition
Community Health Worker	Spectrum Health	Removes barriers, makes referrals, helps navigate system, basic health literacy
Self-Sufficiency Specialist	TrueNorth	Removes barriers, promotes self-sufficiency, educates
Health Coach	Spectrum Health	Higher level health behavior and promotion
Fitness Specialists	Spectrum Health	Personal training
Diabetes Educator	Spectrum Health	Certified in diabetes management
Social Worker	Newaygo County Mental Health	Short term counseling services
Health Educators	Spectrum Health and Michigan Health District	Program specific: smoking, nutrition, etc.
Primary Care	Varied	Pending role fit to model

Initial Metrics

Dimension Research Question	Proposed Measure Variables	Data Source	Data plotted on run chart (Y/N)
<p>Population Health Do patients in the IHI pilot improve their health status on specific indicators?</p>	<p>Stress Index Score (BHLC) Aggregated and weighted measures of effect size calculated on three variables (to be determined) in a cost utility model</p> <p>Pain and Anxiety and self-reported health status question. Effect size from pre and post measures (Cohen's d)</p>	<p>TrueNorth Socioeconomic stress scale</p> <p>EQ5D</p>	<p>Time series data will be used to develop a predictive exposure/ response model</p>
<p>Experience of Care Do patients participating in the IHI pilot improve their experience with care?</p>	<p>Experience Survey</p> <p>Patient Activation Measure (PAM) Effect size from pre and post measures (Cohen's d)</p>	<p>Participants survey</p> <p>PAM survey</p>	<p>Time run chart for experience and pre-post measures for PAM</p>
<p>Per Capita Cost Does participation in the IHI pilot result in reduced on average per capita cost?</p>	<p>Per capita cost including energy assistance and healthcare</p> <p>Direct monetary average cost to the funding entity</p>	<p>Payer, clinic and TrueNorth</p>	<p>Average annualized cost reduction will be compared to predictive disease cost burden models for general populations</p>

Where we are now and what we have learned

- Currently have 20 active clients
- Will be accepting clients from Community Mental Health and Spectrum family medicine and internal medicine clinics soon
- Patient engagement is more effective when social determinants are the leading service and medical services are secondary.
- Categorizing client needs by the *dimensions of wellness* (physical, emotional, social, intellectual, spiritual, occupational, environmental) is necessary to identify the most appropriate resources and interventions.
- Initial screening of clients using in-depth behavior change and motivational questions, has helped to reduce our ≤ 30 day drop out rate.