

A Dynamic Framework for a Coordinated System of Care

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Integrated Care Collaboration

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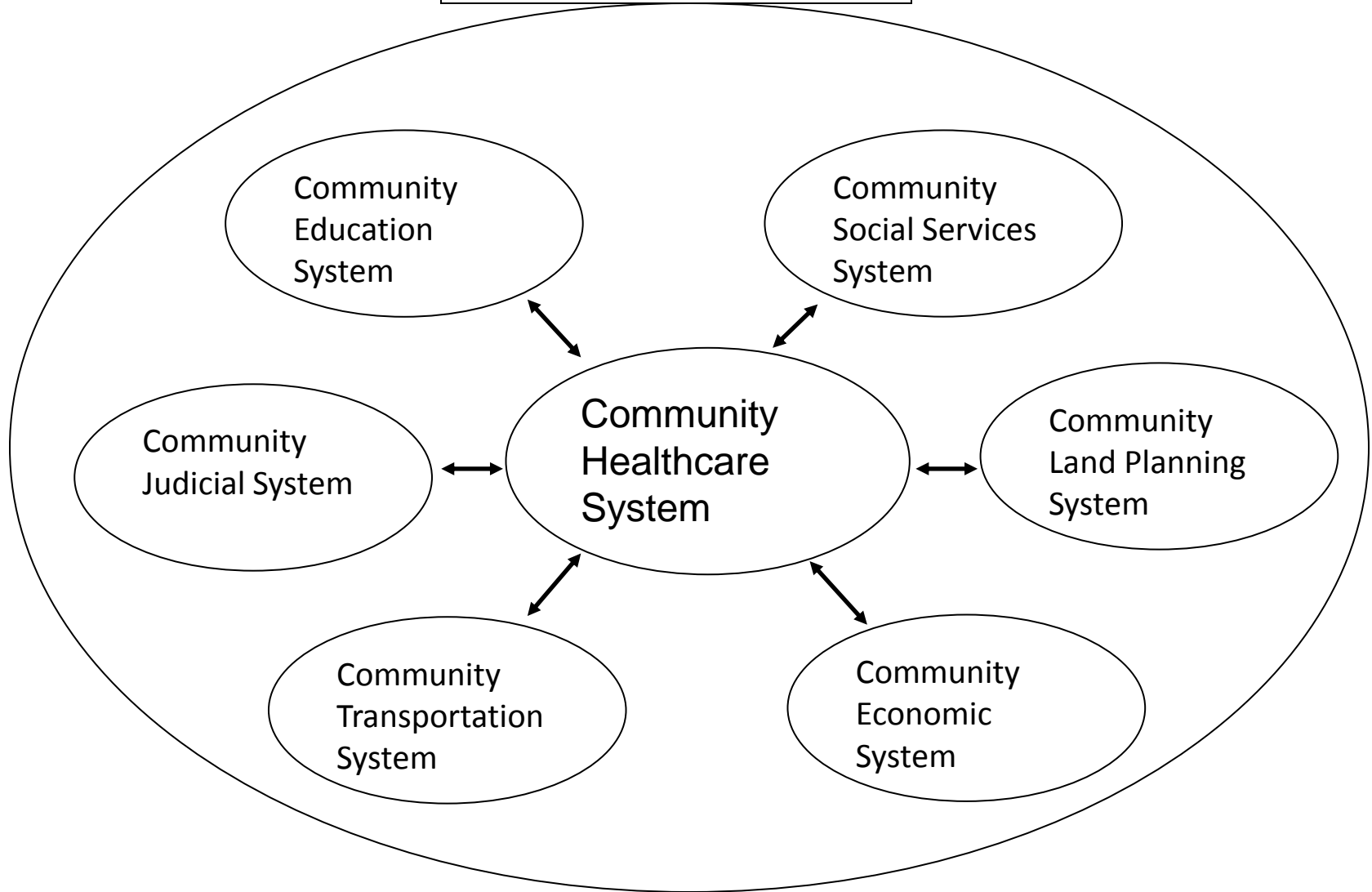
University of Texas at Austin, School of Nursing

Healthcare Service Delivery Frameworks

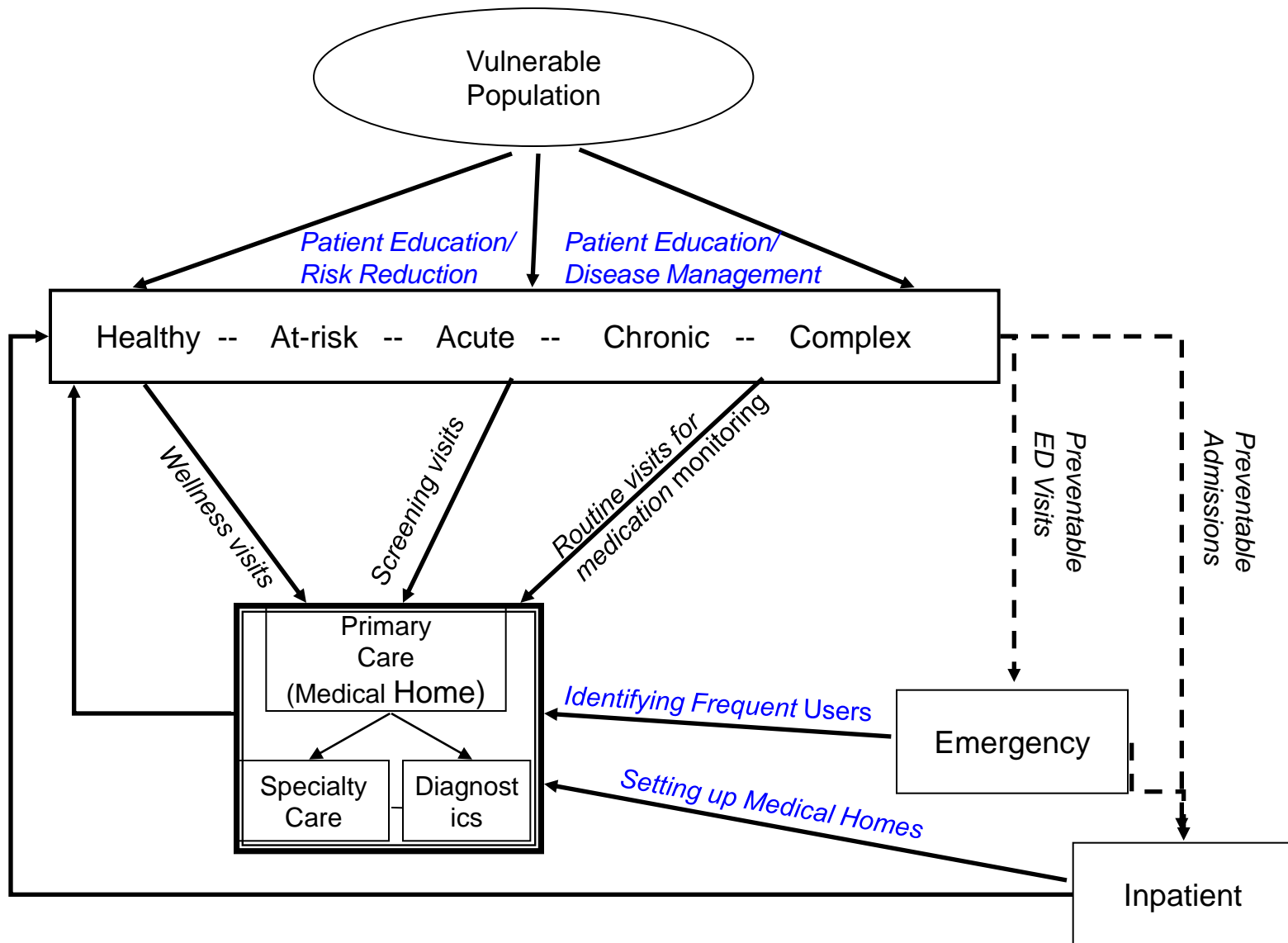
- Andersen's "Behavioral Model of Health Services Use"
- Penchansky's "Fit" Approach
- Frenk's Domains of Access, Availability, and Accessibility

Systems Approach to Community Healthcare

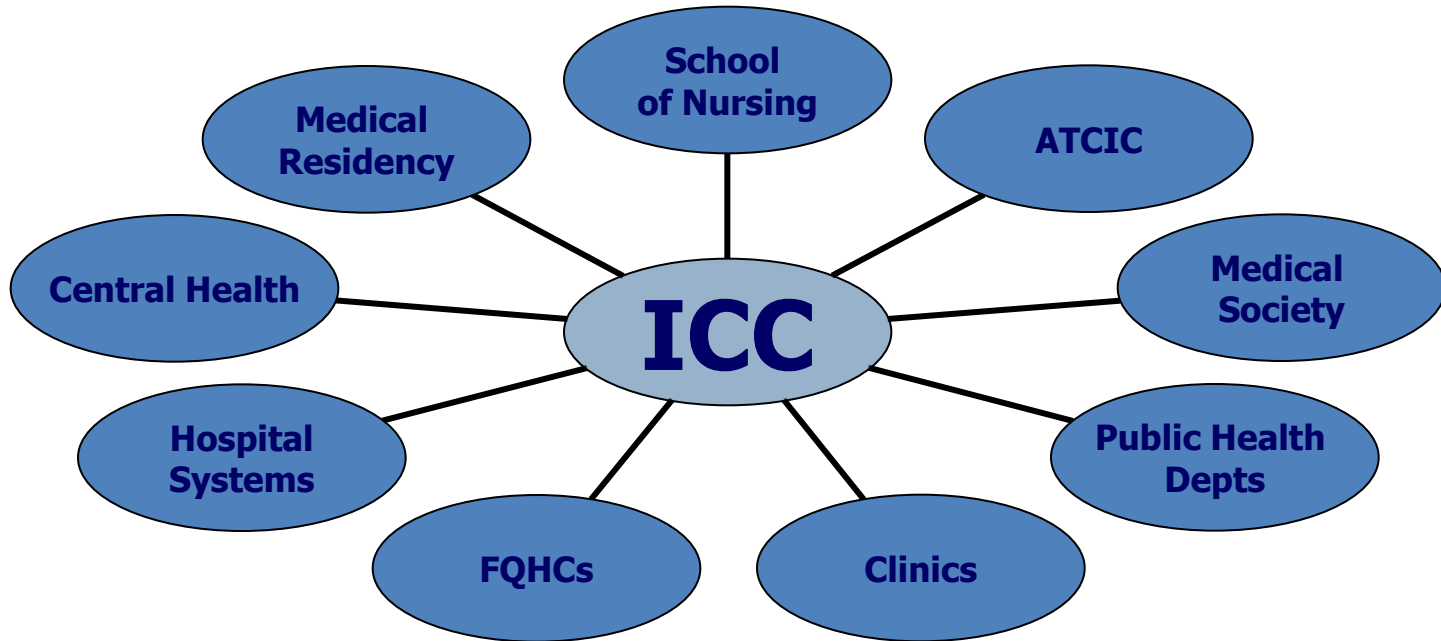
Community Systems



Dynamic Framework for a Coordinated System of Care (DFCSC)



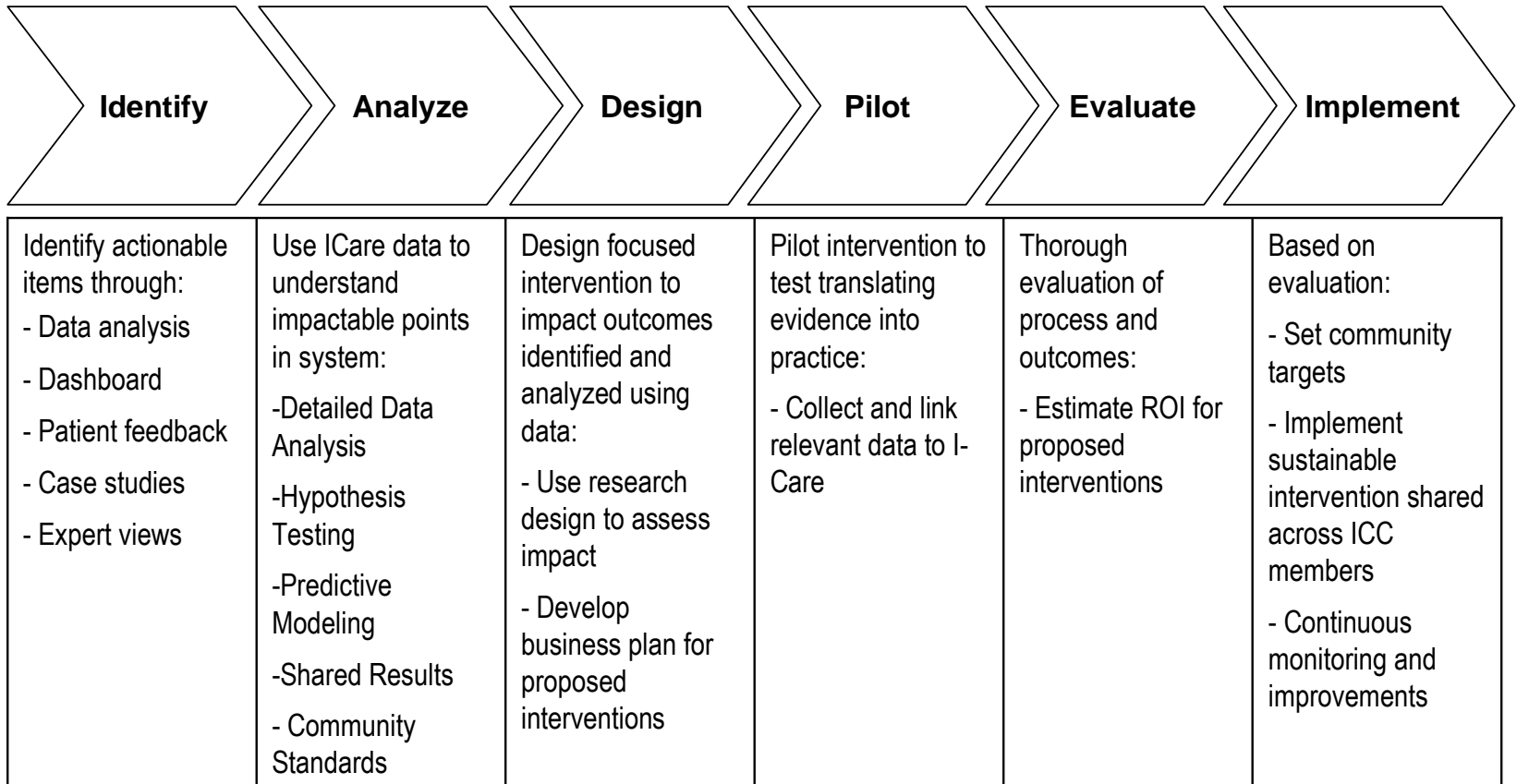
Integrated Care Collaboration (ICC)



Integrated Care Collaboration (ICC)

- Consortium of safety net providers in Central Texas Region (pop: ~2 million)
- To improve access to healthcare for un/underinsured
- 26 members: hospitals, clinics, academic institutions, mental health agency, public health departments, EMS, jail health, call centers
- Hybrid model of a health information exchange (HIE) with a database

Methodology to use DFCSC in a Community



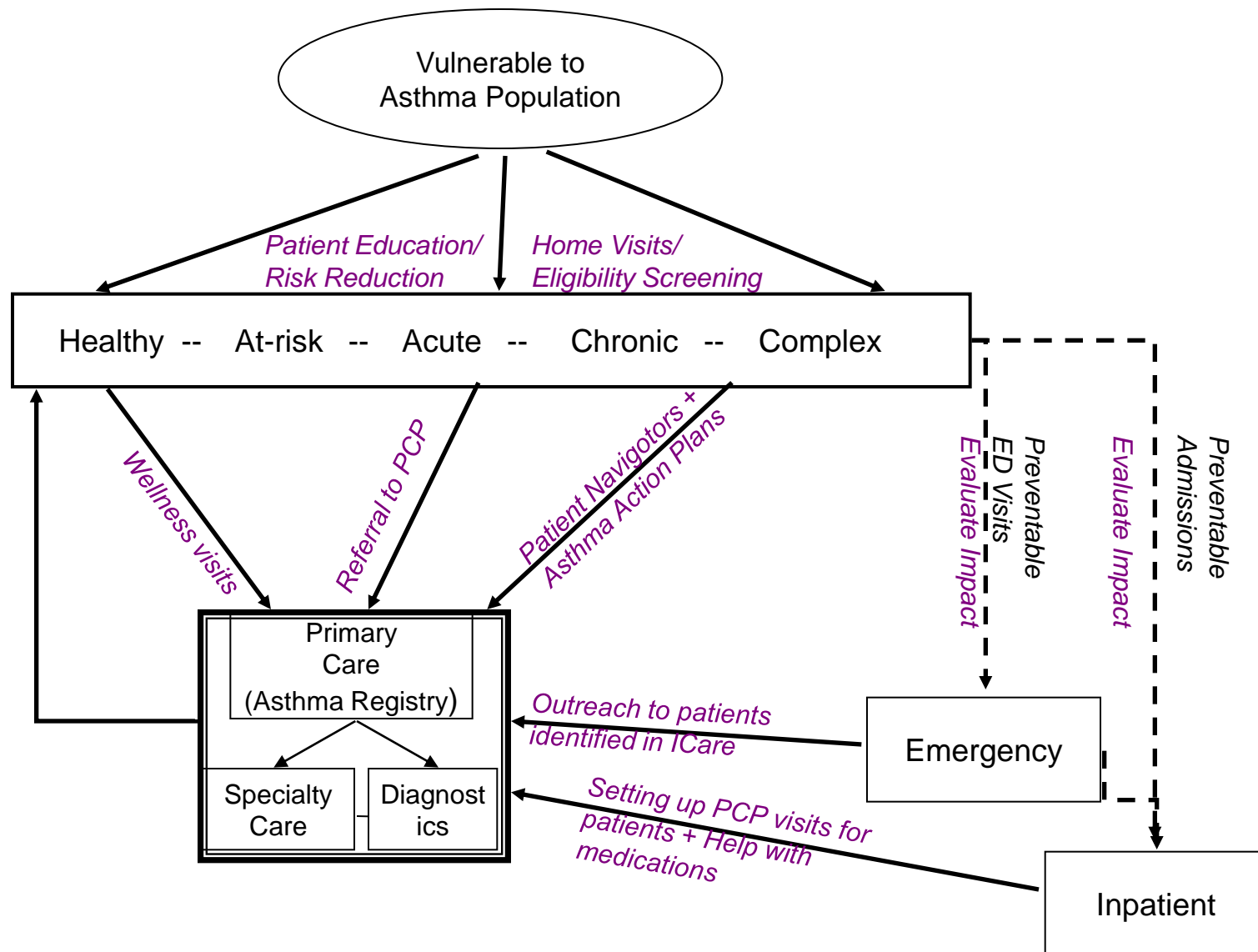
ICC Asthma Program Description

- Staffed by Registered Respiratory Therapists, Certified Asthma Educators
- Criteria for enrollment:
 - One or more ED visits in last twelve months
 - One or more inpatient visits last twelve months
 - Four or more clinic visits in last twelve months
- Enroll over 600 patients per year
- Regional reach over 5 counties

Disease Management Core Interventions

- Funding eligibility screening and application assistance
- Home visits to provide care planning and Asthma self-management education
- Assistance with accessing primary care
- Assistance with accessing pharmaceuticals
- Coordination of care plan sharing with primary care physicians, school nurses, specialists, and family members

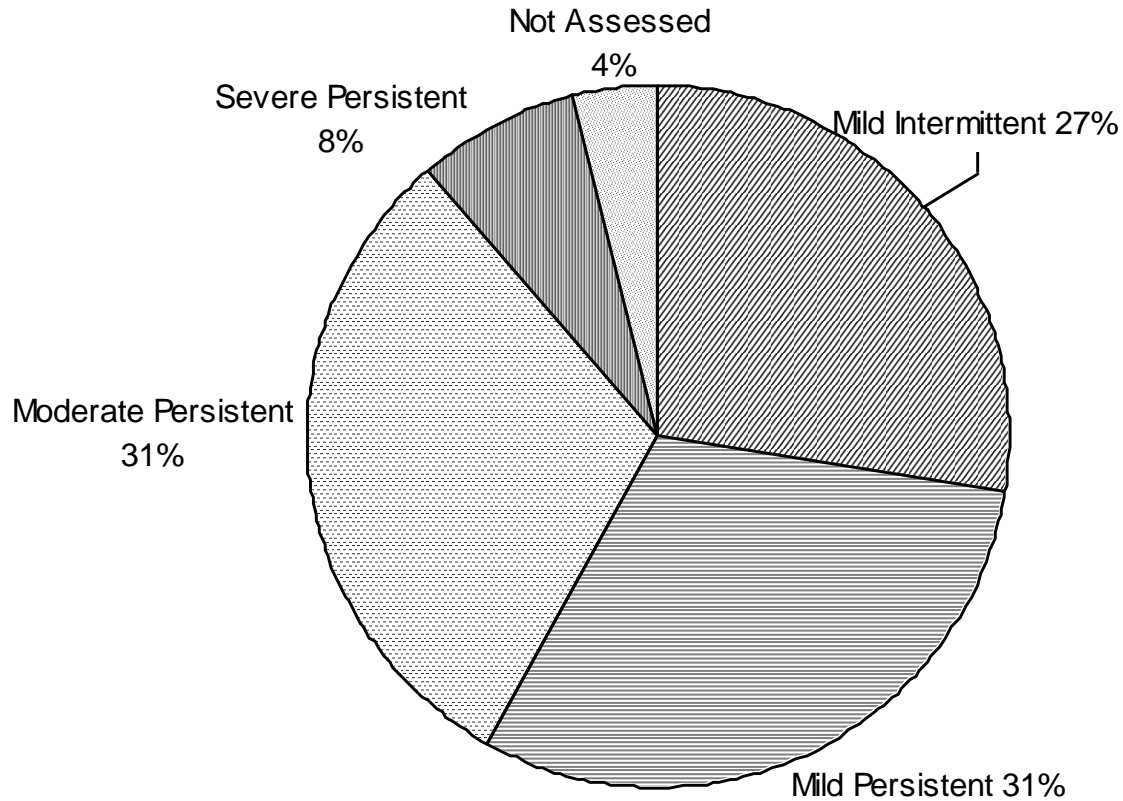
DFCSC for Asthma Program



Evaluation methodology

- 172 patients participated in 12-month education/case management program
- Baseline quality of life and utilization data were collected
- Serial quality of life measures were conducted at 90-day intervals over twelve-months
- Post-program utilization analysis was conducted and compared with baseline

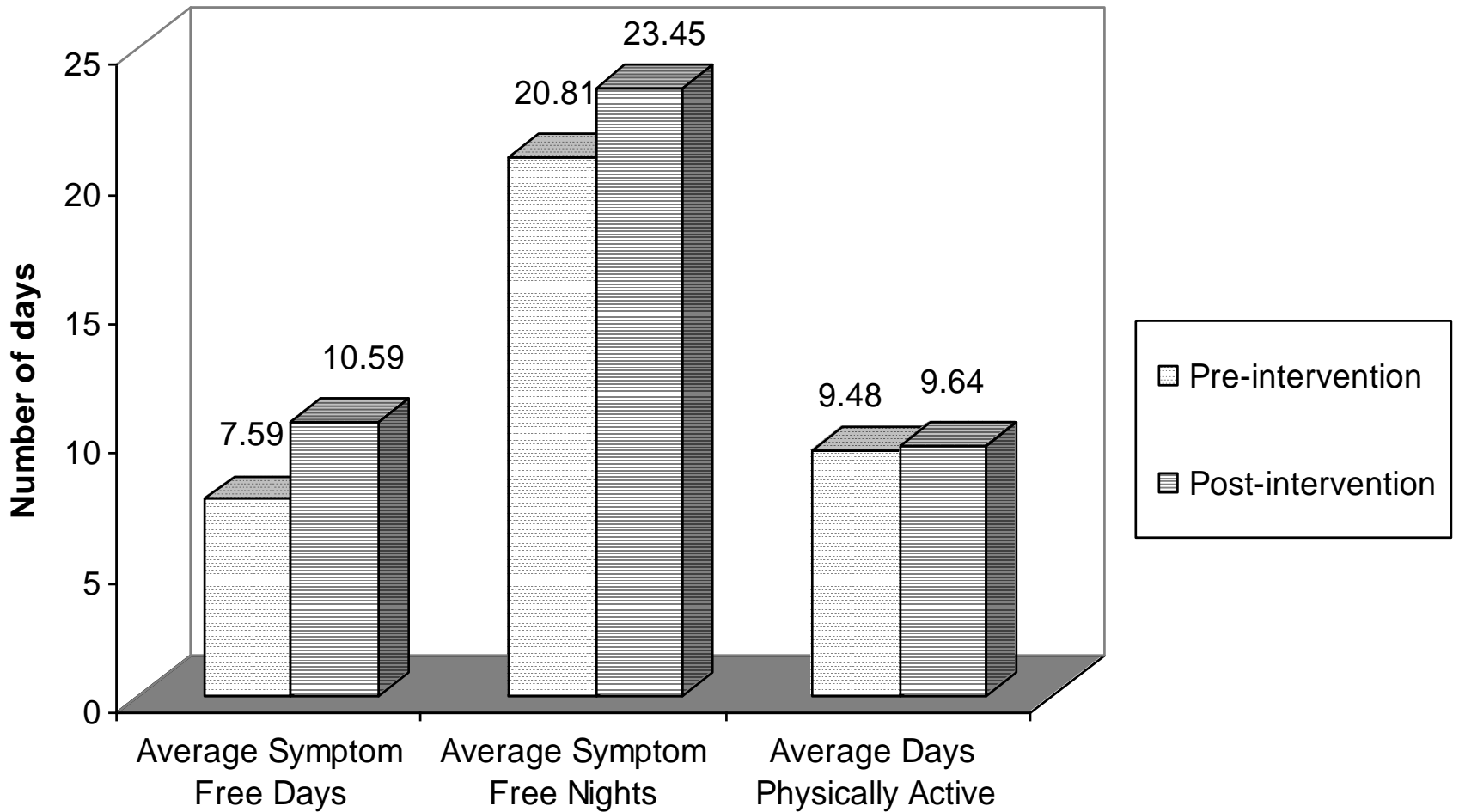
Disease severity in enrolled patients



Healthcare Utilization

N=170	Pre-intervention	Post-intervention	% Reduction
Emergency Department visits	99	36	64%
In-patient visits	33	2	94%

Quality of Life Measures



Discussion