Rural Elder Care Coordination on Cape Cod: A Community-Based Approach to Closing the Gaps

Kazmira Nedeau
Outer Cape Health Services

Andy Lowe
Outer Cape Health Services

Follow this and additional works at: https://escholarship.umassmed.edu/chr_symposium

Part of the Civic and Community Engagement Commons, Community-Based Research Commons, Community Health and Preventive Medicine Commons, and the Translational Medical Research Commons

This work is licensed under a Creative Commons Attribution-Noncommercial-Share Alike 3.0 License.
Rural Elder Care Coordination on Cape Cod: A Community-Based Approach to Closing the Gaps

Kazmira Nedeau (Grants Submission & Compliance Analyst) & Andy Lowe (Director of Program Management Resources)
Outer Cape Health Services, Wellfleet, MA

WHO WE ARE

- Federally-qualified health center
- Three locations on Outer Cape Cod
- Provide primary and specialty care to 16,500 patients (2015)
- Specialty care: Behavioral health, dermatology, dental, vision
- Over half of patients on public insurance or uninsured:

Population characteristics

10% lower per capita income than Massachusetts (2010-2014)

Less housing is available: highest number of units for seasonal use (35.5%) compared with all other Mass. counties

Rents are expensive

Seasonal employment, higher unemployment

AN AGING POPULATION

<table>
<thead>
<tr>
<th>Year</th>
<th>Median age of Barnstable County</th>
</tr>
</thead>
<tbody>
<tr>
<td>1950</td>
<td>30.0</td>
</tr>
<tr>
<td>1970</td>
<td>37.0</td>
</tr>
<tr>
<td>1990</td>
<td>40.0</td>
</tr>
<tr>
<td>2013</td>
<td>40.0</td>
</tr>
</tbody>
</table>

80+ population growing on Cape Cod

The number of men in their 80s is rapidly outpacing other senior citizens on Cape Cod, but reason is unclear

CARE COORDINATION PROGRAM

- Patients seen by PCP (NP or PA)
- Care Coordination team connects to 80 in years; provide wrap-around services
- Monitoring of any OCHS patients discharged from hospital (inpatient) or short-term rehab
- Conduct of communication between PCP, patient and short-term rehab provider
- Referral to supportive services
- Tracking, monitoring, supporting of patients who receive behavioral health services
- Making sure patients have access to additional services

Health conditions

- Depression
- Alcohol disorder
- Overweight
- Hypertension
- Heart Disease
- Diabetes
- COPD

Barriers to care

Finding a doctor

Barnstable County designated by MHS as Medically Underserved Area for primary care, mental health and dental health

Fewer physicians accepting MassHealth

68% MassHealth

Transportation

60% Cape Cod seniors have lost their drivers license

High costs

52% Cape Cod seniors have difficulty paying insurance deductible/co-pays

Observed benefits

Lower rates of hospital readmissions
- Reduction in hospital days
- Reduction in days at skilled nursing facility
- Reduced cost to individual, system
- Increased time at home, quality of life

Challenges

- Sporadic or inconsistent communication among agencies involved in patients' care
- Difficult to close loop on referrals
- Fractured continuum of care places burden on patient

The goal

Communication is consistent among agencies, resulting in greater focus on the patient's needs and provision of wrap-around services.

BUILDING A NETWORK

A critical success factor in improving the Care Coordination program will be building a network of partners in the community to provide input and share resources

Key considerations

- Marathon, not a sprint
- Iterative process; will take shape over time
- Participation of consumers needed for validity, efficacy
- Solution should be responsive, not prescriptive

Challenges & questions

- How to get people excited about something that's inherently difficult to define
- Creating a self-governing body with shared goals
- Empowering participants, particularly consumers, to take leadership roles
- What are the measures of efficacy of care coordination?
- Does care coordination increase quality of life? Sense of connection to community?

Support & potential funding

- UMMS CCTS: Drs. Ockene & Cashman
- Patient Centered Outcomes Research Institute
- Town grants, Cape & Islands United Way

References

2. Barnstable County Department of Human Services. 2013/2014 - Fig 1. Median age at retirement of Barnstable County population - to.
8. Cape Cod Commission. Coordinated public transit – Human Services Transportation Plan: Regarding FTA Section 5310 funds, enhanced intermodal and medical transit services. 2015
9. Cape Cod Commission. Coordinated public transit – Human Services Transportation Plan: Regarding FTA Section 5310 funds, enhanced intermodal and medical transit services. 2015
11. Cape Cod Commission. Coordinated public transit – Human Services Transportation Plan: Regarding FTA Section 5310 funds, enhanced intermodal and medical transit services. 2015


CHS patients

Phase 1: PLAN

Define goals
Define structure & governance
Identify community partners

Phase 2: STUDY

Organize and facilitate meetings
Gather or provide input on needs
Ideas for research and/or services

Phase 3: DO

Refine as necessary
Communicate accomplishments internally & externally

Phase 4: ACT

Evaluate progress towards goals
Collect input from group on value of meetings

Ideas for research and/or services

Supportive services