

OUTREACH CARE NETWORK

Palliative Care Team



Outreach Care Network
Board Certified Palliative Medicine
Chronic Symptom Management Services
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Who We Are

- ❖ **Companion Hospice Palliative Home Health Home Care** is the largest privately owned Hospice Organization in California. We are dedicated to an integrated holistic approach in the medical management of our patients in Southern California since 1994. Expanded to Arizona and Texas in 2013.
- ❖ **Outreach Care Network** , *the bridge to better healthcare* was developed in 2009 to provide for the challenges faced in Palliative Care and Chronic Symptom Management as a unifier of clinical, emotional, spiritual and coordination care strategy.
- ❖ In partnership with MCO's, Health plans, Hospitals, patients and their doctors in Southern California, Arizona and Texas, OCN has focused on the most "At Risk" patient populations. Our targeted palliative and chronic symptom care plans provide best care strategies and outcomes meeting and exceeding our Clients established goals.
- ❖ This strategy of **bonding** and **strategic** care has improved patient satisfaction, quality of care, and significantly contained avoidable hospitalizations and their associated costs.



Our Clients

- Managed Care Organizations
 - Medical Groups
 - IPAs
 - TPAs
 - ACO's
- Hospital Systems
- Health Plans

OCN PALLIATIVE CARE TEAM BELIEF



Comprehensive Palliative Care

- In patient Acute Care and/or consultation
- Transitional Care Navigator Support (Hospital, SNF, & Home)
- Transitional Care Clinic, co-managed
- Provider Partnership of Care
- High Risk Home Care Teams
- Acute Care Alternative Programs
- Tele-Care Triage 24/7 responder

OCN: Our Care Teams

- Palliative and Board Certified Physicians
- Nurse Practitioners
- Pharmacists*
- Skilled Nurses
- Admission Coordinators
- Transitional Care Navigator's
- Social Workers
- Home Care Aid*
- Chaplains
- Volunteers
- Tele-Care Triage (OCN TEAM)
- IT Support
- Management TeamGE / VISIT

Core Team accessible 24/7
including weekdays, weekends
and holidays

Our Rural Palliative Model

Tiered Program:

Three Tier Services, based on initial severity of patients symptoms and continued clinical care, medication management, lack of daily family and resource support, inappropriate acute access usage and hospice appropriateness transition. The interdisciplinary clinical team will focus on the palliative care and management of the identified “High Risk” patient population and their families thru our local OCN providers, team and Tele Health support. California Health and Wellness will identify and provide patient census, management resources and clinical rounds

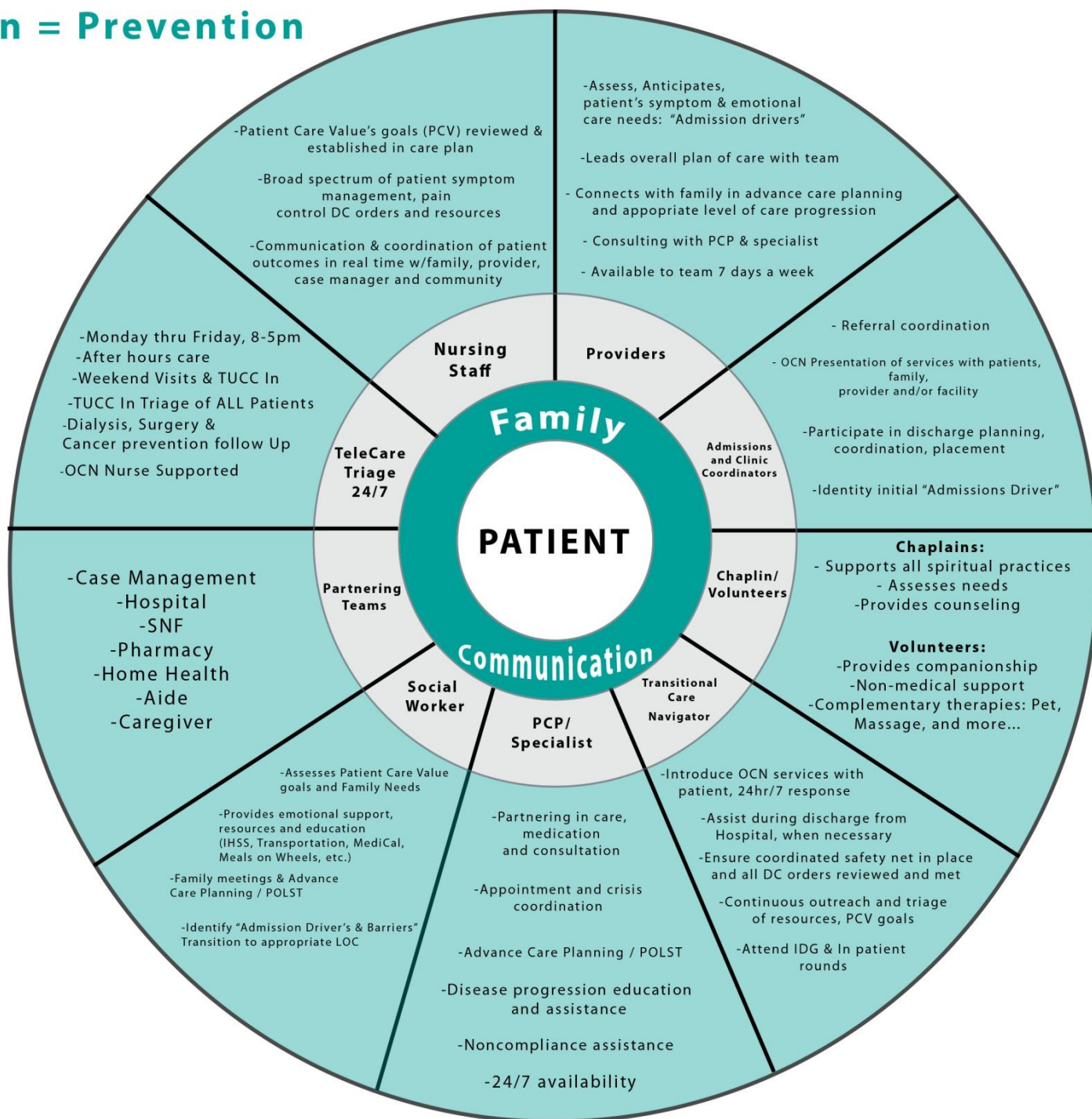
Target Population:

A patient population subset of 62,802 members of Health Net of California/California Health and Wellness in Imperial County and meet the criteria determined by partnership

Potential referral criteria includes:

- Life expectancy of 12 to 24 months
- Frequent emergency room, hospitalizations or readmits
- Disease specific complications
- Increased medication management
- Lack of family support, resources
- Hospice Appropriate
- Criteria identified patients within community

Anticipation = Prevention



REALITY



Challenges

- **Staffing:**

Due to the geographically isolated area, employing qualified and experienced clinical staff that are bilingual, community savvy and not averse to distance driving in isolated areas was a challenge. Our Palliative Care model requires that we hire locally as much as possible to allow for 24/7 accessibility.

- **Resolution:**

We were able to develop the clinical team locally and obtained a Palliative Physician from the Coachella Valley who is willing to travel over “the hill”.

- **Implementation of Telemedicine:**

- Will allow immediate access when necessary and bilingual

Client Outcomes

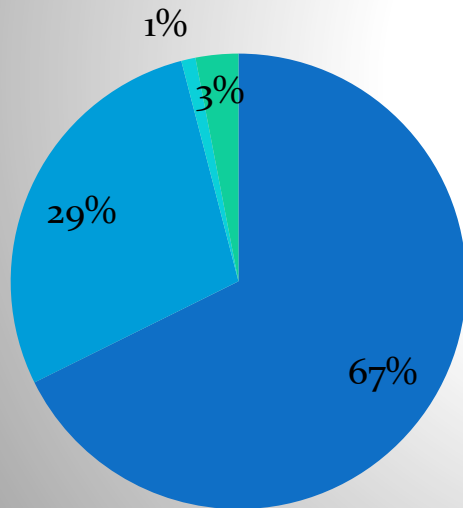
Population: Patients enrolled in OCN Calendar Years 2015 and 2016

Objective: Category Percentage of Outcomes per Year

- 1) Patients transitioned to Hospice
- 2) Patients symptoms managed and graduated program
- 3) Patients managed by MD only
- 4) Patients readmitted to hospital

Admissions to OCN over 489 unique patients 2015

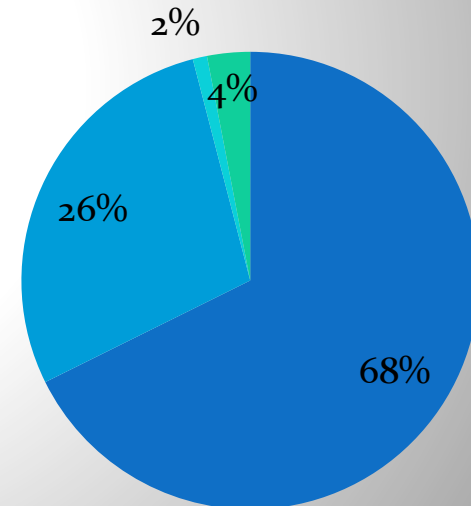
Client Outcomes 2015



■ Hospice ■ Goals Met ■ MD Visit Only ■ Hospital

Admissions to OCN over 572 unique patients 2016

Client Outcomes 2016



■ Hospice ■ Goals Met ■ MD Visit Only ■ Hospital

WHAT HAVE WE LEARNED

- COMPANY: Your organization must understand the new Post Acute Care climate and the role Palliative Care will provide as a solution to patients and partners. You will need management to support your program clinically, financially, staffing, protocol and trusting your vision.
IN IT TO CHANGE LIVES
- TEAM: Layout your Palliative program with your team, educate on the business/contracts side to everyone so they understand requirements and care differences, train, train, train!!
- Walk in your Clients shoes. Know the organization, management, staffing, their goals, their struggles, resources and communicate daily! OUT PERFORM YOUR CONTRACT
- If you OWN your patients overall care you will OWN your outcomes!
 - Home Health, Provider visits, curative treatment follow up, DME, hospital discharge, medication, etc..
 - Bilingual does matter to the patient even if we don't think it does
 - Outside triage will send your patient to the hospital
 - Over communicate immediately to your patient and deliver what you say! 2PM IS THE SAME AS 2AMDO THE RIGHT THING FOR YOUR PATIENT AND THINK OUTSIDE THE BOX

WHAT HAVE WE LEARNED



never
never
never
give
up

(winston churchill)

Let's Move Forward

We would like to thank the California Healthcare Foundation, Dr. Tao Le, Healthnet and California Health and Wellness for their dedication in providing Palliative services to our rural and underserved communities!

We appreciate the opportunity to present the success our partnership and services have provided for our other Clients and their patients. We have witnessed, with great pride the improved satisfaction and quality of daily life our team has provided to patients and their family's. In turn this has provided a significant cost savings and reduction of unnecessary admission days for all.

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