

# Atlanta Metro Community Healthcare Connections Minutes

Meeting Name	Location	Minutes Taken By		
Atlanta Metro	Grady Memorial Hospital, Costello Conference Room	Jennifer Curry		
Date	Facilitator	Leaders	Actual Start Time	Actual End Time
6/21/16	Jennifer Curry		2:15	4:00

**Meeting Purpose/Objective: Coming Together to Improve Care in the Community**

- ✓ Improve communication and patient care across the continuum
- ✓ Assist all facilities in meeting goals for Medicare quality improvement measures
- ✓ Discuss and implement efforts to increase communication between providers and settings
- ✓ Recognize current work and reward creative thinking.

**Team Members Present**

<input checked="" type="checkbox"/> A.G. Rhodes Health & Rehab (Atlanta/Boulevard Location) <input checked="" type="checkbox"/> Alliant Quality <input checked="" type="checkbox"/> Apria Healthcare <input checked="" type="checkbox"/> Barnes Healthcare Services <input checked="" type="checkbox"/> Emory Dept. of Neurology, Integrated Memory Care Clinic	<input checked="" type="checkbox"/> Grady Memorial, Acute Care for the Elderly (ACE) Program <input checked="" type="checkbox"/> Grady Memorial, Cardiovascular Services <input checked="" type="checkbox"/> Grady Memorial, EMS <input checked="" type="checkbox"/> Grady Memorial, Heart Failure Program <input checked="" type="checkbox"/> Grady Memorial, Injury Prevention & Trauma Research <input checked="" type="checkbox"/> Grady Memorial, Senior Services	<input checked="" type="checkbox"/> PruittHealth Decatur <input checked="" type="checkbox"/> PruittHealth Marietta <input checked="" type="checkbox"/> PruittHealth Virginia Park <input checked="" type="checkbox"/> Riverwoods Behavioral Health <input checked="" type="checkbox"/> Sanofi <input checked="" type="checkbox"/> Traditions Health & Rehab
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**Discussion/Getting Started**

- Jennifer Curry reviewed venue logistics, objectives, confidentiality, info sheets for newcomers, and referred attendees to the sign-in sheet and the table containing adult and staff immunization announcements and handouts.
- Participants introduced themselves and their respective organizations. There were 24 participants.
- Jennifer took minutes and Diane helped to keep time. (Room was not available until 2:15p.m.)
- Many thanks to our Grady hosts & hostesses, especially Diane Wirth of the Grady Heart Failure Program for securing the space, escorting us to the conference room, and validating parking tickets!

**Educational Components**

- Presentation w/data and discussion – Elizabeth Williams, Grady Injury Prevention & Trauma Research Coordinator
  - Elizabeth presented and discussed data from the Trauma Registry. In 2015, there were 3,951 patients on the registry (a 12% increase from the previous year), and the top 3 mechanisms of injury were:
    1. Motor-Vehicle Crashes (includes motorcycles and pedestrians): 1,540
    2. Violence: 1,100+
    3. Falls: 887 – An increase of 100+ patients possibly due to aging & increased # of older adults in the population. Most of the falls in the trauma registry were “ground-level falls” of 33ft. or less; the registry is capable of containing info. on the length (feet) of a fall, as long as it is documented.
- Presentation (PowerPoint) w/data and discussion – Jeff Herald, Grady CDS Analyst
  - Jeff provides data and quality improvement support to the Grady Heart Failure Program’s Telehealth Program as well as to the Pharmacy. Jeff presented on multiple efforts and showed a diagram of the Heart Failure Clinic’s reduction of their patient no-show rate. Their success is a direct result of using grant funds to utilize Common Courtesy (introduced at January, 2016 CHCC mtg.) to provide their patients w/rides to follow-up appointments. 50-60 patients have utilized the benefit so far. The grant goes through November, but Grady will be re-applying.
  - Jennifer clarified that Common Courtesy is a non-profit organization that works in conjunction with the Uber platform, but it is not the same as simply using Uber. Diane added: Four regular/consistent Uber drivers are assigned to the HF clinic via Common Courtesy. This is a nice alternative to Grady Transport, which is limited to 25 trips/day for the entire Grady hospital system. The HF patients are very ill, and with Common Courtesy/Uber they can avoid the extended wait times and ride-sharing. A patient can also stop at the pharmacy as part of the ride service. Uber reps. from the main San Francisco office came to Grady to learn more about this intervention. The Common Courtesy website can be used to securely give “the gift of mobility” to patients, family members, specific individuals, organizations (e.g. American Parkinson’s Disease Association donation for riders w/Parkinson’s), etc. For more info: <http://www.ccrides.org/>

- Presentation w/discussion – Joyce Turner, Grady ACE Program & Queenie Jordan, Manager of Grady Senior Services
  - Grady’s Acute Care of the Elderly (ACE) Program currently consists of 10 beds on 11A. ACE has a multi-disciplinary team that meets daily to develop and review patients’ care plans. (This includes Floor Nurses, an ACE Medical Director, EMS, Community Health Workers, etc.) Floor nurses were trained on ACE before it was rolled out. The program is guided by NYU’s NICHE (Nurses Improving Care for Healthsystem Elders) national standards. Requirements for patients are:
    1. 75 years-of-age or older
    2. Geriatric clinic or geriatric syndrome
    3. Admitted to hospital (currently limited but want to expand)
  - Grady’s Senior Services is a non-clinical program that works with patients and families to provide resources and supportive services. Queenie Jordan has been the Manager for 17 years, and she relies upon a team of Volunteers that includes Georgia State University Gerontology students.
  
- Presentation w/discussion – Mike Colman, VP of Grady EMS
  - Mike provided a history and overview of Grady’s Mobile Integrated Health program. Grady patients’ needs are complex and often exceed the skills of EMS. Grady is implementing the national Community Paramedics Model; many EMS depts. across the country are interested and/or implementing, but funding and sustainability are issues because EMS cannot bill for in-home services. Grady’s program pairs EMS staff with physicians from an in-home physician practice, Home Care Medicine of Atlanta (Dr. Bing, who did her residency at Grady and was also introduced to Diane at a previous Atlanta Metro CHCC mtg.). The team can provide services like removing staples, writing prescriptions, lab work, centrifuge, etc., rather than transporting patients to the hospital for those services. Additionally, when an in-home physician calls a patient’s doctor, she or he has much better results than when an EMS staff person attempts to speak to a patient’s doctor. Currently Grady EMS is targeting callers who call 911 5x/month or more. The program runs 2 days/week but will increase to 3 days/week when the new Nurse Practitioner comes on board. (The NP will be hired by Home Care Medicine of Atlanta, which serves as a Grady vendor.) It would be wonderful to be able to operate the program 5 days/week.
  
- Other Updates:
  - Tremayne Graydon announced that Riverwoods Behavioral Health has a new, 16-bed Geriatric Unit.

**Wrap-up**

- The group discussed future locations. The group used to meet at different member hospitals. Ideally all 5 hospitals would be represented at each meeting, regardless of location. The group agreed that the Grady meeting facilities are excellent, with the downsides being parking (the garage is often full) and the fact that other hospitals may not attend. Jennifer will explore options for the next meeting, including Grady, United Way, and DeKalb Medical. There have also been a few requests for a conference line for members who cannot attend in person, although this is dependent upon the host site. Jennifer will explore this option also.

**NEXT MEETING**

**Date:** August 16, 2016

**Time:** 2-4p.m.

**Location:** TBD

**NEXT STEPS**

Party Responsible	Activity	Due Date
Jennifer	Determine location for August meeting & explore conference line availability	8/1/16
Everyone -collect data that is relevant to your facility	Let Alliant know if your agency needs assistance with data design, interpretation, etc., in order to communicate to CMS the great work that is being done.	Ongoing

Everyone	<ul style="list-style-type: none"> <li>• <b>Assignment:</b> <ul style="list-style-type: none"> <li>▪ What change would you like to see in your agency/facility? Be specific, but creative. For those who are not representing an agency, think about a care setting with which you are highly involved. You do not have to have control over the proposed change in order to choose it.</li> <li>▪ Who would need to be involved in order for this change to happen? Who would have to be “on board” or “at the table?”</li> </ul> </li> </ul>	8/16/16 (Come prepared to discuss at least one idea at our next meeting, immediately following a data presentation)
Everyone	<ul style="list-style-type: none"> <li>• Identify &amp; invite more stakeholders to the table, esp. from hospitals (case management/discharge), nursing homes (transportation coordinators), and pharmacies.</li> </ul>	Ongoing
Everyone	<ul style="list-style-type: none"> <li>• Please let Alliant know if your agency/organization would like to host a free 6-week diabetes self-management class, or if you know of potential host sites who may be interested.</li> </ul>	Ongoing