



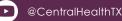
Workshop III: Quality of Care

Community Health Champions Tuesday, October 15, 2019













Introduction to the Dell Medical School



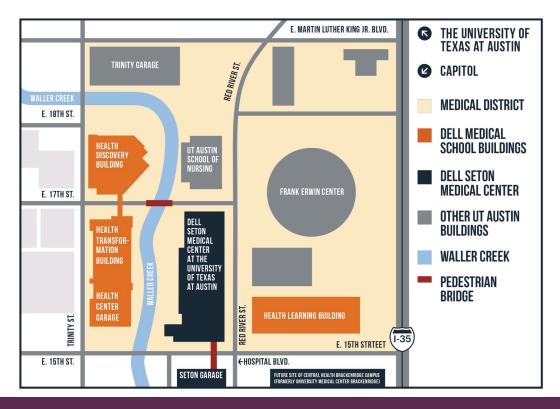


























Dell Seton Medical Center at The University of Texas

- Teaching hospital owned & operated by Seton (not Dell Med)
- \$310 million investment
- 211 beds
- Replaced UMC-Brackenridge as region's first safetynet hospital
- Opened May 2017









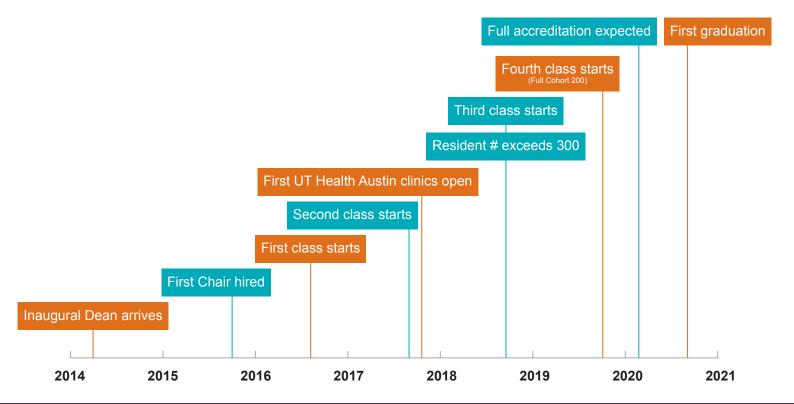
















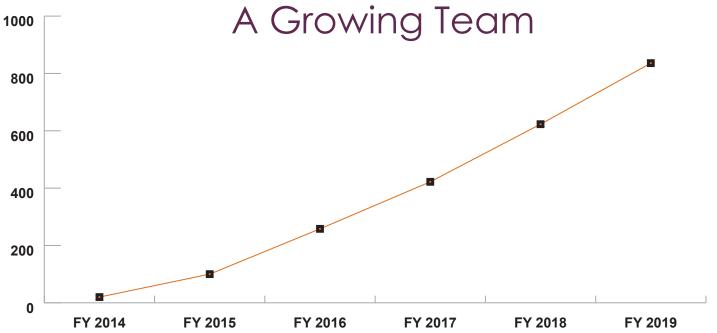








Dell Medical School & UT Health Austin:













An Academic Medical Center

Trains future physicians, conducts research to advance medical knowledge and provides health services to demonstrate better models of care.

Uniquely, Dell Med's mission is to revolutionize how people get and stay healthy – all with a focus on making Austin and Travis County a model healthy community.













Trains Future Physicians

- 50 students each year (5,000+ applicants)
- First class: Started June 2016 & graduates May 2020
- 90% of students must be Texas residents
- Groundbreaking curriculum

















Joint Admission Medical Program

- Joint effort between TX medical schools & universities
- Provides support to economically disadvantaged students in Texas to prepare for and go to medical school
- Created to make a path to medical school a reality
- Guarantees admission to a participating Texas medical school if all criteria are met
- Includes mentoring, MCAT prep, internships, scholarships













Graduate Medical Education (GME)

Building: Expanded infrastructure for GME accreditation & new

residency positions

Growing: Added 100+ new residents & fellows since 2012 (320 today)

Improving: 1 of 8 institutions recognized nationally as an innovator

transforming GME and patient care

Providing Care: 493,000 hours of clinical care invested directly at CommUnityCare, Dell

Children's Medical Center, Dell Seton Medical Center and Seton Shoal

Creek in 2018/19















Care Planning & Care



"My experience was wonderful. [The Women's Health Institute care team] kept calling to check in on me every other day after my procedure. I had never had an experience like that before with any other doctor."

- Patrice













Serving Patients in the Medical Access Program

- UT Health Austin provided care to 3,230 unique MAP patients through 10,841 total visits, including outpatient visits, surgeries, radiology and behavioral health. (Oct 2017-July 2019)
- Dell Med faculty, including UT Health Austin clinicians, provide care for MAP patients at CommUnityCare, Lone Star Circle of Care, and Seton clinics and hospitals.
- Strengthened the integration of services in the hospital, CommUnityCare and UT Health Austin to improve care for MAP patients.
- Added known and studied interventions that were previously not available to MAP patients.















Dell Med's Support for Central Health's Mission















GENTRAL HEALTH DELL MED'S SUPPORT FOR CENTRAL HEALTH'S MISSION



EXAMPLES OF HOW DELL MED IS CREATING NEW MODELS OF HEALTH DELIVERY TO IMPROVE CARE IN TRAVIS COUNTY

Central Health Objective 1: Develop and execute health care delivery strategy based on people and place

- . Created successful new bipolar disorder model of care that showed a dramatic improvement in patient health compared to traditional treatment models. Integral Care is now using this model of care in the community. Strategy 1.1
- Doubled colorectal cancer screening rate for CommUnityCare patients through at-home screening kits. Strategies 1.1, 2.4 & 2.5
- · Convened diverse stakeholders for redesign of the Austin State Hospital to make it the cornerstone for an improved system of person-centered mental health care delivery across Central Texas. Through a collaborative effort. secured \$165 million in state funding to construct the first phase of a replacement hospital. Strategies 1.1, 1.2 & 2.5
- · Launched Factor Health to partner with local nonprofits addressing nonmedical drivers and build on combined expertise of Dell Med and community-based organizations to translate value to payers willing to invest in effective interventions, Strategy 1.2
- · Issued third call for proposals by Community-Driven Initiatives to support and implement health solutions proposed by and for local residents. Strategy 1.2
- Created the Center for Youth Mental Health to support people living with mental illness as they transition to adulthood. Strategy 1.1

Additional Support for Central Health's Work Plan

Worked closely with Central Health communications to increase community awareness and education, including flu vaccine promotions, Southeast Health & Wellness Center expanding services, new health resources, etc. Also supports driving public engagement for community events, including Health Equity Forums, Virtual Conversations and Community Conversations focused on a wide range of topics. Strategy 1.3

Central Health Objective 2: Implement patientfocused and coordinated health care system

- Increased number of incoming medical residents and fellows by 45% since 2012 (from 85 to 124). Strategies 1.1 and 2.1
- Recruited fourth class supported with need-based scholarships to produce physicians who can focus on community health. Strategy 2.1
- · Launched world-class pediatric and congenital heart program led by the doctor who created the top program in the country. Strategy 2.1
- Launched pediatric neuroscience program to elevate care for treatment of neurological disorders such as epilepsy, spina bifida, movement disorders. autism, stroke and other issues such as headaches and brain tumors.
- · Significantly reduced patients' length of hospital stays and the share of patients readmitted after inpatient orthopedic surgery by UT Health Austin Musculoskeletal Institute providers. Nearly two thirds of orthopedic patients report improvements in pain and function since starting care with UT Health Austin, Strategies 2.1 and 2.2.
- Deliberately invested clinical expertise in improving health and medical equity, which included helping People's Community Clinic better serve kids with asthma and creating a comprehensive health records framework that will give providers a better understanding of the underlying nonmedical drivers impacting health outside the clinic. Strategy 24

Plan 2024

Central Health Strategy Proposed FY 2019 & FY2020 Strategies from Performance Review Recommendations

Current Work Plan Objectives	Current and New Work Plan Strategies	Milestones (Memo up front, midpoint, end-of-year report)
	STRATEGY 1.1: Service Locations and Care Delivery: By data analysis, provider input, and community-based advisory groups, determine funding of business plans for future service delivery sites, and/or mobile services, and/or technology solutions for delivering care to the	
	served population.	Next Update: Jan. 2019
OBJECTIVE 1: Develop and execute health	STRATEGY 1.2: Population Health-Social Determinants: Provide funding or reimbursement	
	to provider partners for resources to establish population health goals and work with governmental and other organizations to address specific social determinants affecting the population served.	Next Update: Nov. 2018
care delivery		
strategy based	STRATEGY 1.3: Communication: Improve communication with consumers and the community about Central Health's pivotal role ensuring the delivery of care to people with	
on people and place	low incomes. SUB-STRATEGY 1.3.1: Focus communication efforts on the target patient population and the	
	community at-large about Central Health's role in the delivery of care and programs to access health care.	
	SUB-STRATEGY 1.3.2: Increase consumer awareness of available services, how to be a	
	patient, key health concerns and conditions, and providing partners. Tailor messages to specific patient audiences using preferred languages and culturally relevant themes.	
	SUB-STRATEGY 1.3.3: Increase awareness of Central Health-funded facilities, partners and	Next Update: Dec.
	providers.	2018
	STRATEGY 2.1: Patient Wait Times: Establish measures and fund projects to improve patient wait times and network adequacy for access to primary and specialty care services.	
	SUB-STRATEGY 2.1.1: Specialty Care Shortage: Implement use of technology solutions to	
	reduce specialty care wait times. SUB-STRATEGY 2.1.2: Specialty Care Shortage: Work with Dell Medical School, partner	
	SUB-STRATEGY 2.1.2: Specialty Care Shortage: Work with Dell Medical School, partner providers, and other educational organizations to develop programs to address specialty	
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OBJECTIVE 2: Implement	SUB-STRATEGY 2.1.2: Specialty Care Shortage: Work with Dell Medical School, partner providers, and other educational organizations to develop programs to address specialty care shortage and enhanced primary care training.	Next Update: Dec. 2018
Implement	SUB-STRATEGY 2.1.2: Specialty Care Shortage: Work with Dell Medical School, partner providers, and other educational organizations to develop programs to address specialty care shortage and enhanced primary care training. SUB-STRATEGY 2.1.3: Primary Care Access: Fill provider vacancies and prioritize condition- specific interventions.	
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Implement patient-focused and coordinated health care	SUB-STRATEGY 2.1.2: Specialty Care Shortage: Work with Dell Medical School, partner providers, and other educational organizations to develop programs to address specialty care shortage and enhanced primary care training. SUB-STRATEGY 2.1.3: Primary Care Access: Rill provider vacancies and prioritize conditions-specific interventions. STRATEGY 2.2: Patient Reported Outcomes and Experiences: Establish measures, including measures that address inequity, and improve patient reported health outcomes and	2018 Next Update: Dec.
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Proposed Allocation of CCC Dollars in Fiscal Year 2020 Budget

	Fiscal Year 2020 (FY19 Unaudited		
Domain	Planned Permitted Investment Allocation	Est. Min. Expenditure	% CCC Allocation towards Est. Min. Expenditure	% CCC Allocation towards Est. Min. Expenditure
Women's Health	4.50	7.60	59%	66%
Surgery	4.50	15.70	29%	30%
Internal Medicine	3.60	9.30	39%	39%
LIVESTRONG Cancer Institutes	-	6.00	0%	0%
Neurology	-	10.10	0%	0%
Psychiatry	-	11.20	0%	0%
Population Health	3.20	9.60	33%	42%
Pediatrics	2.50	5.40	46%	48%
Diagnostic Medicine	0.30	1.10	27%	36%
Neurosurgery	0.50	1.17	43%	New in FY20
Ophthalmology	0.50	1.07	47%	New in FY20
Clinical Practice Operations	3.80	13.00	29%	19%
Clinical Space Expenses	3.10	9.80	32%	23%
Medical Education	4.60	13.50	34%	34%
Dean's Office	0.60	5.00	12%	24%
Information Technology for Care	1.00	3.70	27%	27%
Business Office	0.70	6.40	11%	11%
Research Operations	0.80	2.10	38%	38%
Health Ecosystem	0.80	3.20	25%	25%
Value Institute	-	3.00	0%	13%
Design Institute	-	2.90	0%	14%
Student Scholarships	-	0.70	0%	0%
Development	-	2.00	0%	0%
Communications	-	1.40	0%	0%
Total	35.00	144.94		













Quality of Care Panel Discussion

Moderated by Vanessa Sweet Strategy Manager, Central Health

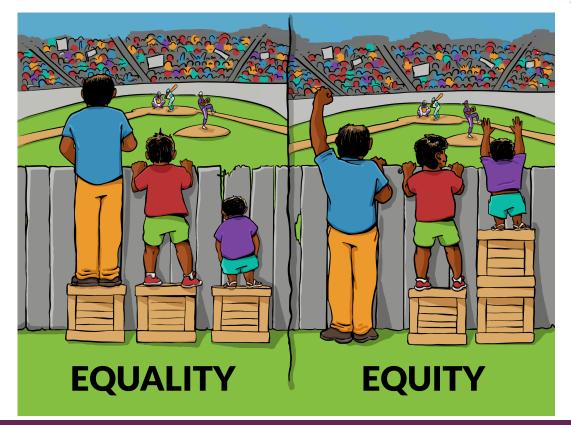






















Health Disparities: Diabetes

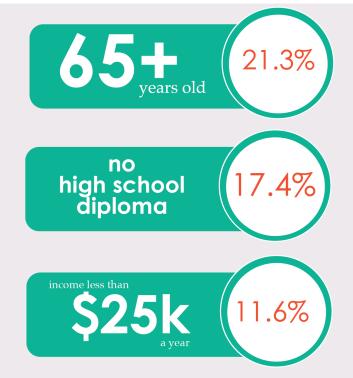


PREVALENCE OF DIABETES

African-American 13%

Hispanic 12%

Non-Hispanic Whites 6%



Source: 2016 BRFSS Austin/Travis County











Panelists



- Dr. Tracy Angelocci, Lone Star Circle of Care
- Yvonne Camarena, CommUnityCare Health Centers

- Mary McDowell, People's Community Clinic
- Elizabeth Marrero, Program Director,

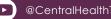














America's Health Centers











Travis County FQHC's



















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- Mary McDowell, People's Community Clinic
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Announcements



- Parking validations
- Surveys
- Social hour Scholz Garten

Queer + Allies Meeting

















Health care for all



CENTRAL HEALTH







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