Building Partnerships with Patients and Families in Adoption of Choosing Wisely® Tools

PCPCC Support and Alignment Network
American Board of Internal Medicine Foundation (ABIMF)
Institute for Patient- and Family-Centered Care (IPFCC)
Northern New England Practice Transformation Network (NNE PTN)

April 20, 2018
Before We Begin

- We will send you the recording
- Participate in the conversation!
- Submit your questions anytime
  - Add your comments to the chat box
  - We’ll do Q&A at the end of the presentation!
Today's Speakers

Kelly Rand, MA, CPH
Program Manager

Mary Minniti, CPHQ
Senior Policy & Program Specialist

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Project Manager, Consumer and Community Engagement
Objectives

- Explore Choosing Wisely as a strategy for improving care and enhancing patient and family engagement

- Learn how implementation of Choosing Wisely effectively engages patients at the point of care and increases shared decision making

- Discover how involving patient and family advisors positively impacts implementation of Choosing Wisely tools into your practice
1. Setting the Stage: Person & Family Engagement in TCPI and Benefits
2. Choosing Wisely Initiative
3. PTN Case Study: Adoption and Support
4. Patient and Family Partnerships with Choosing Wisely Implementation
5. Resource Review
6. Q & A

How We’ll Spend Our Time
• Promote broad **payment and practice reform** in primary care and specialty care.

• Promote **care coordination** between providers of services and suppliers.

• Establish **community-based health teams** to support chronic care management.

• Promote **improved quality** and **reduced cost** by developing a collaborative of institutions that support practice transformation.
KEY AIM

Sustain efficient care delivery by reducing unnecessary testing and procedures
A Strategic Framework

Quality Payment Program

- **Quality Measures (60% of MIPS score)**
  - Patient satisfaction
  - Medication management

- **Advancing Care Information (25% of MIPS score)**
  - Patient portals, Summary of Care, e-Prescribing, patient-specific health education

- **Improvement Activities (15% of score)**
  - Medicaid patient engagement
  - Patient and family engagement in QI
  - TCPI participation

PFE is a Primary Driver!
Factors influencing engagement:

- Patient (beliefs about their role, health literacy, education)
- Organization (policies and practices, culture)
- Society (social norms, regulations, policy)
Person and Family Engagement Performance Metrics

- Governance
  - Support for Patient and Family Voices

- Point of Care
  - Shared Decision Making
  - E-tool Use

- Policy and Procedure
  - Patient Activation
  - Health Literacy Survey
  - Medication Management
PFE Metrics:
• Shared Decision-Making
• Patient Activation
• Patient Voice

• TCPI Change Tactics:
  • 1.1 Patient and family engagement
  • 1.2 Team-based relationships
  • 1.5 Coordinated care delivery
  • 1.6 Organized, evidence-based care

• PAT Milestones: 2,3,4,5,9,18

Let Choosing Wisely Help You Meet TCPI Requirements!
In a growing number of instances where truly stunning levels of improvement have been achieved...

Leaders of these organizations often cite—putting patients and families in a position of real power and influence, using their wisdom and experience to redesign and improve care systems—as being the single most powerful transformational change in their history.

Extensive Evidence on PFE
Compelling Evidence

- Improvement in staff experience, retention, reduction in job stress and burnout
- Improved transitions of care, decrease in unnecessary readmissions
- Increased patient and family success in self-management, improved quality of life, reduced illness burden
- Reduced rates of hospitalization, emergency room utilization, shorter LOS and cost per case

Download for free at NAM.edu/PFEC
Goal Setting

- Reassess Goals
- Decision Aids
- Teach Back
- Develop Care Plans
Studies have shown that 40-80% of the medical information patients are told during office visits is forgotten immediately, and nearly half of the information retained is incorrect.

A 2011 analysis of 86 randomized clinical trials concluded that decision aids make patients better informed, improve communication with doctors, and increase participation in decisions about their care.

Choosing Wisely: Effective Tools for Creating Partnerships

Kelly Rand, MA, CPH
Program Manager
ABIM Foundation
Choosing Wisely is an initiative of the ABIM Foundation to help clinicians and patients engage in conversations about the overuse of tests and procedures and to support physician efforts to help patients make smart, effective choices.
Engagement and Partnership

- Payers
- Delivery System
- Consumer Groups/Employers
- Government

Patient and Clinician Conversations
Lessons Learned

• Alignment of values and framing
• Simple rules
• Engagement and partnerships
• Bottom-up approach with support
• Need for system and performance improvement approaches
• Need for patient and family engagement
Framing the Choosing Wisely Message

• Patients want:
  ✓ Communication with their clinician
  ✓ Participation in making care decisions
  ✓ Access to information
• Focus on safety when justified
• Communicate in plain language
• Use both mass media and individual consumer approaches

Communicating information about “what not to do” to consumer. John S Santa. BMC Medical Informatics and Decision Making 201313(Suppl 3):S2
Questions to Ask your Doctor:
Several resources with similar messaging, and all easy to use.

1. **Brochures / Posters**

2. **Videos**

3. **Wallet Cards**

4. **Rack Cards**
How Well Do the Topic-Specific Brochures Work?

Before reading
<16% interested in topics

After reading
• 50% interested in receiving more information
• 66% said they would talk to their doctor about the topic
• 43% changed their mind about a topic

(2013; 2,669 respondents)
Participating in *Choosing Wisely* help aligns your work with Aim 5 of TCPI to “sustain efficient care delivery by reducing unnecessary testing and procedures.”

- Groups commit to launching projects at their institutions to reduce at least three overused tests or treatments by 20% over a 12-14 month period.
  - Collection of resources and “lessons learned”
  - Individual virtual consultations with ABIM Foundation staff
  - Bi-monthly “check-in” sessions
THANK YOU

For More Information:
www.choosingwisely.org  |  www.abimfoundation.org

@ABIMFoundation  #choosingwisely
Using Choosing Wisely® tools & tactics as a strategy for improving care and enhancing patient and family engagement/activation

A Tri-State Collaborative Program
Managed by Maine Quality Counts
NNE-PTN Transformation Comes in all Sizes

NNE-PTN is located in a very rural area of New England and includes Maine, New Hampshire and Vermont.

We work with 337 (93% small/rural) practices across the three states representing 2,346 providers.
Our Experience Timeline

Initially – pre NNE-PTN:
• Initial Pilot - 4 Primary Care Practices
  - 5 Focus Areas
  - General use of Choosing Wisely into the workflow
  (Using Choosing Wisely® Tools to Empower Patients: An Implementation Toolkit for Health Care Practice Teams)

1st Spread:
• Spread into the State Innovation Model (SIM) – Patient Provider Partnership on Shared Decision-Making
  - Low Back Pain and general use of Choosing Wisely into the workflow

2nd Spread:
• 3 Health Systems & Community Engagement
• Low Back Pain and Cost of Care Conversations in the clinical visit
• Managing Chronic Pain through the Caring for ME initiative
Integrating CW into the workflow

- Best Practices
- Lessons Learned

Choosing Wisely Process Flow from a Patient Perspective

- Patient gains access card & Instructions sheet and Patient Information sheet (like of instructions, imaging, when to be back pain or loss of benzodiazepine) at check-in.
- Educational videos play while patient is in waiting room and Patient Information sheets are displayed in the waiting room.
- Clinical staff asks patient if they need through the 3 Questions/Patient Information Sheet.
- Patient and provider address questions during the visit. For more information on how to have a conversation, view the Choosing Wisely: Physician Communication Modules at: https://www.choosingwisely.org/

Choosing Wisely Question Sheet Workflow

Goal: Encourage patients to further engage in their care through questions that foster open and effective dialog with their provider and practice team.

- Patient checks in for appointment.
- Provider reads and writes down or asks questions they may have at the visit.
- Patient goes through 3 Questions on the worksheet (patient does not need to carry or share with the provider).
- Clinical staff asks patient if they have questions when reaching the patient (you are starting the tool).
- Clinical staff reads the questions and answers any they are able to.
- Clinical staff tops any questions patient has into PIH (PIH).
- Provide questions in 1 minute or less.
- Provision patient access to provider, and documents more detailed answers before the patient leaves.
- Scripting for PIH at check-in:
  - Make sure you knew the three questions for your provider during the visit. Scripting for MA at check-in:
  - Give you any questions for your provider that you have thought about today? I will copy them over the computer so that you can provide care to them. We will do our best to answer all of your questions during your visit. Sometimes what sound is to additive everyday, we will make sure that we make a plan to perform someone for you.
  - Scripting for NA at check-in:
    - Did you have enough time to think about the questions for your provider during the visit? If you have time, please tell us before we can ask you to return. I will make sure the computer so that you can provide care to them.
- Scripting for Provider during visit:
  - Talk with your next questions with you today. What is most important for your providers today and which? Evaluate more detailed questions for your provider.
Visuals are Important = Culture Change
Choosing Wisely – Opportunity for PTNs

• Addresses key elements of TCPI Change Package
• Change Concept 1: Person & Family-Centered Care:
  1.1: Patient & Family Engagement
    1.1.3: Collaborate with patients & families
    **Milestone:** Practice can demonstrate that it encourages patients and families to collaborate in goal setting, decision making, and self-management
  1.6: Organized, evidence-based care
    1.6.5: Reduce unnecessary tests
    **Milestone:** Practice has reduced unnecessary tests, as defined by the practice
  3.4: Efficiency of operation
    3.4.2: Eliminate waste whenever possible
    **Milestone:** Practice has streamlined workflows, and can demonstrate value of all steps in processes
3rd Spread: NNE-PTN

Initially aimed at decreasing unnecessary imaging for Low Back Pain

High Achievers:
• An orthopedic group in coastal Maine
• A large health system in the mid-coast area

Clinical Team and Patient Interventions
• Cost of Care Conversations - Clinical Workflows and scripting
• Patient Decision Aids including cost comparisons, wallet card of resources, nudging poster

Next Steps: imaging for uncomplicated headaches, decrease ED UR, chronic pain and behavioral health
Cost of Care Conversations – Team Based Approach

Team-based Communication Scripting Template

Team-based Workflow Template
Cost of Care - Patient Decision Aids

Be In The Know About Health Care Costs!
Costs can vary depending on type of treatment, location, & your insurance coverage.

1. Talk with your provider about treatment options & how to find out about costs.
2. Visit www.comparemaine.org to see differences in procedure costs by Insurance & location.
3. Contact your insurance for the amount you will need to pay.
4. No insurance? Speak with DU’s Patient Assistance Coordinators either Tia or Cami at (207) 524-3593.

CompareMaine (average procedures costs at different facilities in Maine) www.comparemaine.org
Athena https://separatesr vendas.com/cod/website/aphs/eton/cost-quiely-of- treatments
Community Health Options https://www.healthoptions.org/

To access the above go to comparemaine.org and click on Resources.

All Cost of Care resources can be found here.
# Choosing Wisely & Cost of Care Materials

## Choosing Wisely Tools

- CW 5 Questions Poster
- CW 5 Questions Rack card & Wallet card
- CW Patient Information Sheets
- CW Low Back Pain Rack Card

All materials downloadable at: [http://www.choosingwisely.org/patient-resources/](http://www.choosingwisely.org/patient-resources/)

Download the Choosing Wisely Mobile App

## Cost of Care Tools

- Cost of Care Low Back Pain Treatment Options Patient Decision Aid
- Diagnosis and Treatment Flash Card
- Cost of Care Conversation Guides for Full Team (Provider, MA/RN, PSR)
- Cost of Care Nudging Letter/poster

All materials downloadable through the Maine Quality Costs learning module: Cost of Care Conversations

## Resources

### Choosing Wisely Tools & Resources (MQC learning Modules)
- Choosing Wisely’s 500+ Specialty Society Recommendations
- Strategies to Embed Choosing Wisely in the Workflow (Using Choosing Wisely to Empower Patients Toolkit)
- Transformation Rx Vlog: Appropriate Use of Care – Engaging Patients and Care Teams Using the Choosing Wisely Approach
- AMA Stepsforward® – Advancing Choosing Wisely
- ABIM Physician Communication Modules funded by the Drexel University College of Medicine
- Choosing Wisely in Washington- Washington Health Alliance

### Cost of Care Tools
- Compare the costs and quality of healthcare procedures in Maine
- Practicing Provider discussing how to embed the use of Cost of Care materials into the practice setting utilizing all members of the team
- Webinar: "Engage the Patient in Overuse at the Point of Care"
- Webinar: "Eliminating Low Value Care AKA Waste"
- Peter Ubel podcast on Health, Bioethics and Behavioral Economics
- NRHI Getting to Affordability Initiative
Clinical Outcomes

Aim 5
Reduce Unnecessary Testing & Procedures
Committed to reducing 1,634 unnecessary images for low back pain by end of 2019

As of Q9 - 1,184 patients were not exposed to radiation from unnecessary imaging!!!
(And we saved $1,045,825)
Achieving the Aims through PFE

Choosing Wisely Crosswalk to Achieve the Six PFE Metrics

<table>
<thead>
<tr>
<th>TCPI PFE Metrics</th>
<th>Relevant Patient Engagement Activities/ Tools in Choosing Wisely Programs</th>
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</thead>
<tbody>
<tr>
<td>PFE Metric 1: Support for Patient and Family Voices (governance) Are there policies, procedures, and actions taken to support patient and family participation in governance or operational decision-making of the practice? (Patient and Family Advisory Councils (PFAC), Practice Improvement Teams, Board Representatives, etc.)</td>
<td>As part of choosing Wisely implementation, ask the practice/facility PFAC to review the program and offer input. If there is no PFAC, invite a focus group of patients/family advisors to review and comment. To learn more about how you can implement Choosing Wisely in the clinical setting – go to: <a href="http://www.mainelqualitycounts.org/choosingwisely">www.mainelqualitycounts.org/choosingwisely</a></td>
</tr>
<tr>
<td>PFE Metric 2: Shared Decision-Making (Point of Care) Does the practice support shared decision-making by training and ensuring that clinical teams integrate patient-identified goals, preferences, outcomes, and concerns into the treatment plan (e.g. those based on the patient’s culture, language, spiritual, social determinants, etc.)</td>
<td>• Train your team how to use the Choosing Wisely patient education materials about potentially oversused tests/procedures to anchor conversations with patients about the risks, benefits, and context of their treatment goals and preferences.</td>
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Importance of PFE to VBC Transition

The TCPI Person and Family Engagement (PFE) Program Metrics will help in the transition to value based care related to MIPS:

For Example – Low Back Pain:

✧ **PFE Metric 2 – Shared decision-making among clinicians & patients** *(Does the practice support shared decision-making by training and ensuring that clinical teams integrate patient-identified goals, preferences, outcomes, and concerns into the treatment plan? E.g. those based on the individual’s culture, language, spiritual, social determinants, etc.)*

✧ **2018 MIPS Improvement Activities (IA)** – The PFE metrics are linked to Quality Payment Program MIPS Improvement Initiatives. In calculating the overall MIPS score, Improvement Activities are 15% of the overall MIPS score.
   - IA_BE_2 – Use of QCDR to support clinical decision making
   - IA_BE_8 – Participation in a QCDR, that promotes collaborative learning network opportunities that are interactive
   - IA_BE_11 – Participation in a QCDR, that promotes use of processes and tools that engage patients for adherence to treatment plan
   - IA_BE_12 – Use evidence-based decision aids to support shared decision-making
   - IA_BE_15 – Engagement of patients, family and caregivers in developing a plan of care
   - IA_CC_9 – Implementation of practices/processes for developing regular individual care plan
A Tri-State Collaborative Program Managed by Maine Quality Counts

**Education Advancing CW & PFE**

**Improving Patient Outcomes with Cost of Care Conversations in the Clinical Practice**

This learning module seeks to address the TCP Drivers, specifically targeting Patient and Family Engagement and Continuous, Data Driven Quality Improvement as effective drivers that benefit from an improved cost of care conversation. Through examination of relevant studies and research-based models, participants will gain an understanding of how to advance cost of care conversations in the practice setting to improve patient outcomes. The learning module will include practical tools that participants will be able to employ with their practice, as well as identify behaviors to model in order to best support team members in cost of care conversations.

**Learning Objectives:**

At the conclusion of this module, participants will:

- Explain how the integration of cost of care conversations are increasingly important in improving patient care.
- Describe how to pro-actively have a cost of care conversation with patients using www.CompareMaine.org and other tools.
- Discuss how to implement cost of care conversations within their practice.
- Identify ways to use the practice team in the clinical workflow to incorporate cost of care conversations.


**Spend Your Health Care Dollars Wisely**

Welcome to the online class, “Spend Your Health Care Dollars Wisely.” This short online class will help make health care cost secrets more transparent, helping you to save money while being healthier. We’ll show you:

- How wisely costs for the same health service vary.
- How widespread and possibly dangerous unnecessary tests and treatments are.
- How to find quality health services for less money.
- Why this is important for both you and our communities.
- How to advocate, or speak up in your best interest for your right to know health costs.

**How to Begin**

Click the blue “TAKE THIS COURSE” button on the right sidebar to begin the course. You will be prompted to login or register for a new user account. If you already have a QC Learning Lab account, click “LOGIN.” If you don’t have an account, click “REGISTER NOW” and complete the Registration Form.


**NNE-PTN – distributing Choosing wisely information on decreasing imaging for Low Back pain**

[Image of NNE-PTN – distributing Choosing wisely information on decreasing imaging for Low Back pain]
A Tri-State Collaborative Program Managed by Maine Quality Counts

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Thank you!

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Patients and Family as Implementation Partners
"At my clinic, Choosing Wisely Options are built into the EMR. Low Value Care is studied, many recommendations are implemented into clinical practice. Recently while at a clinic visit I noticed a Choosing Wisely subject matter flyer posted in the treatment room.

I have been involved with the PCORI funded ABIM/Academy Health "Low Value Care Research" Project where I participate as a Patient Partner Stakeholder.

If I am seeing a Physician / Clinician for a specific condition or treatment, I research the CW Patient list to see if there are recommendations pertaining to the issues."

http://www.academyhealth.org/about/programs/advancing-research-reduce-low-value-care

Inviting Patient and Family Participation

Patients and families bring insights about:

- How to introduce practice changes to better engage others
- What Choosing Wisely tools are most useful to them
- Where to place materials/tools to increase visibility
- Which messages will build shared decision-making partnerships
- How to evaluate success of implementation
Outcomes and Benefits

- Health care professionals & staff make fewer assumptions about what patients or families “want.”
- Advisors “see things differently” and ask “why do you do it this way?”
- Advisors challenge what’s possible.
- Patients/Families are motivators – provide hope and dampens cynicism
- Reduces burden for healthcare team
- Creates better tools to meet patient needs and “activate” patients as full partners
- Provides information to help make better business decisions
- Broadens perspectives – acting into new ways of thinking
Implementation of Choosing Wisely with Patient and Family Participation

Inviting Patient and Family Participation in Implementation of Choosing Wisely® Tools

The mission of Choosing Wisely (CW) is to promote conversations between clinicians and patients that help patients choose care that is supported by evidence, not duplicative of other tests or procedures already received, and free from harm.

Participating clinicians have identified more than 540 tests, treatments, and procedures that are unnecessary and performed too frequently. The Choosing Wisely website www.choosingwisely.org has many tools available to support these important conversations with patients and their families.

QUESTIONS TO CONSIDER WHEN IMPLEMENTING CHOOSING WISELY

• Which topics/tests/procedures are most relevant to our practice?
• How do we create a team-based workflow process that is efficient and effective in building partnerships with patients and their families? What is needed to make it sustainable?
• What CW tools (posters, brochures, rack cards, wallet cards, information on using the mobile phone app, etc.) should we select and how will they be used in the practice? Where should they be placed to achieve high impact and visibility?
• How can our clinic communicate our CW program to patients and their families?
• What messages will help start meaningful conversations with our patients and their families?
• How might we evaluate the success of our implementation efforts?

PATIENT AND FAMILY INSIGHTS CAN HELP YOU!

Patients and families can help answer the questions above and plan implementation strategies. Consider the ideas below to ensure that patient and family perspectives inform your implementation:

• Sit down with one patient and share a CW tool that is relevant to tests or treatments they have had. Ask whether and how the information could have been useful to them in making decisions.
• Provide a list of topics that could be addressed through CW, and ask patients to select items that would be most impactful from their perspective.
• Bring together a small group of patients and family members to review a small number of specific tools that could be implemented and ask them which they like best and why. Integrate that information into implementation decisions.
• Invite 2-3 patients or family members to join a workgroup planning the implementation of Choosing Wisely.
• Ask a few patient portal users to rate the value of receiving a Choosing Wisely link via the portal and to suggest what messages might engage other patients to review the information before an office visit.
• Walk through the clinic with a few patients and ask for suggestions on where CW materials would be most visible and accessible to patients and families.
• Ask a few patients and family members to help you develop scripts/messages for clinicians to use when they talk about the CW program to other patients and families.

GETTING STARTED

Determine which of the ways listed above you will use to involve patients/families. Ask staff and clinicians to help identify potential patient and family advisors—individuals who can listen and share their thoughts effectively, are naturally curious, can see more than one side of an issue, and want to make a difference who will partner with clinic on this effort. Create information for potential patient and family advisors about what you are hoping to accomplish, why it’s important and how they can help you. This information can be shared in a flyer/brochure posted in exam rooms or in a short letter/email. Select those individuals whose experiences and interests match your goals for CW implementation.

LEARN HOW OTHER PRACTICES INVOLVE PATIENTS AND FAMILIES AS PARTNERS IN TRANSFORMATION

Quality Counts first incorporated Choosing Wisely into its Patient Centered Medical Home as part of the Aligning Forces For Quality (A4Q) project. The strategic emphasis was on engagement and establishment of patient advisory groups and patient advisors at the e level. Four pilots in primary care practices had great success in recruiting patient advisors with the practices specifically on creating tangible ways to engage patients in their own rough Choosing Wisely. Read more about their efforts at http://qpcconsulting.com/BestPractices/MOMA-quality-counts.html.

Information about working with patient and family advisors to improve your practice is available at www.pcpcc.org/tcpi.
Join the Break Through Collaborative!

For more information email Kelly Rand at krand@abim.org
A free on-line learning community dedicated to partnerships with patients and families to improve and transform care across all settings.

http://pfcc.connect.ipfcc.org/home
Webinars, Tools, Resources to Strengthen Your PFE Efforts!

Improving Care Through Partnership with Patients, Families & Communities

The PCPCC's Support & Alignment Network (SAN) provides technical assistance to practice improvement teams to foster partnerships with patients, family caregivers, and community-based organizations to achieve common goals of improved care, better health, and reduced costs.

Our work is supported by the Centers for Medicare and Medicaid Services (CMS), through the Transforming Clinical Practice Initiative (TCPI). This four-year initiative (2015-2019) is designed to assist more than 140,000 clinicians achieve large-scale health transformation. Learn More

Patients & Caregivers

Clinicians & The Care Team

Administrators & The Qi Team

https://www.pcpcc.org/tcpi
THANK YOU!

www.ipfcc.org

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