News

Care Coordination At Telecare
April 22, 2014

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Care coordination is the deliberate organization of patient care between different systems, providers and services. It facilitates the appropriate delivery of care across systems, keeping those services coordinated and aligned for both the person served and for providers. Care coordination can make a dramatic impact in the lives of people with serious mental illness and complex needs - while saving money and improving outcomes.

The Challenge
The people who are often the most difficult to serve well are those with extraordinarily complex needs. They show up in ERs with serious mental illnesses, substance abuse issues, and significant but often preventable health problems. They often have housing issues and very little money. They've burned out friends and family relationships. They often lack any meaningful connections to doctors or vital community supports. These individuals can cost a great deal to serve - and they consume a disproportionate share of available resources. Providers and systems struggle to serve these individuals in a way that is both effective and financially sustainable.

The Potential Benefits of Care Coordination

For Health Plans
Care coordination enables health plans to enrich their utilization management and cost control by extending their resources and services into the community. It allows them to reach their members in a more tangible, hands-on way - cultivating personal connections and relationships, helping clients set and achieve health goals, and keeping them connected to the care and services they need.

For Persons Served
Care coordination enables patients to access care, stabilize their issues, reduce use of emergency and crisis services, improve their health, and take proactive steps towards healthy, hopeful lives.

As an example, prior to coming into the Telecare IEHP program "Melanie" (a pseudonym) was admitted to hospital behavioral units at least twice a month for suicide attempts, and had been admitted to the ICU at least once for overdosing on medication. Initially, she struggled to stay out of the hospital for even a two-week period of time. After working closely with her
case manager, doing one-on-one work, Melanie reached her goal of four weeks with no hospitalizations. She has started therapy, is participating in a day program, attends groups, participates in a women’s self-care group, and held a part-time job during the holiday season. She recently accomplished a milestone goal of going more than six months with no psychiatric hospitalizations. Her goals for the future include going to school to become a peer support advocate and starting karate lessons.

Care Coordination At A Glance
In general, the care coordination model incorporates these key elements:

- It's patient-centered and partnership-driven.
- It's population-based, serving a select group of targeted individuals.
- It's measurement-based and "treats to target." It aims to make an impact in specific, well-defined ways.
- It's evidence-based, using proven approaches that flex according to the patient's needs.
- It's accountable for results.

Care Coordination In Practice
Care coordination is the deliberate organization of patient care between different systems, providers, and services. It facilitates the appropriate delivery of care across systems, keeping those services coordinated and aligned for both the person served and for providers.
What Care Coordination Looks Like At Telecare

We build a virtual health network around the person being served. We blend physical and mental health care by providing a dedicated, holistic approach. We work to ensure tight coordination between plans, community resources, and mental health providers.

Care coordination thrives on connecting members to a more independent life by helping them manage their care effectively. Our care coordination services:

- Are currently offered in community-based programs
- Aim to be time-limited in duration (enrollment can run anywhere from 3 to 18 months)
- Focus on getting people stabilized, on track, and moving towards a more independent life as quickly as possible
- Work in closely aligned partnership with health plan care managers, including monthly reviews to ensure that care is coordinated, collaborative, and continually adapting to successfully manage shifting patient needs

By increasing a patient's choice in living, learning and working, we are tackling their complex needs by motivating recovery from within while reducing costs.

Using Our Recovery Focus to Build Trusting Relationships

All of Telecare's services are based on a strong recovery foundation focusing on person-centered services, strengths-based interventions and non-coercive communication. We reach out to a client directly from the hospital to start building trusting and non-judgmental relationships with them from the start. We work with their immediate needs and goals, guiding them by using our Recovery-Centered Clinical System (RCCS) conversations to gently spark discussion about key areas that can help awaken hope and bolster internal motivation for change.

Staff are trained in how to communicate empathy and build trusting collaborative relationships with clients, leading to improved treatment adherence. Many clients who are not initially interested in "mental health treatment" ARE interested in and motivated by improving family relationships, going back to school, getting a job, finding housing, and building life skills that will lead to successful outcomes for their personal goals.
What kind of results have we seen?
Telecare has been working with Inland Empire Health Plan (IEHP) on a care coordination pilot in San Bernardino County. Initial results are highly promising.

In next month’s newsletter, we’ll further explore the IEHP pilot program and share further insights, outcomes and future plans from Dr. Peter Currie, Clinical Director of Behavioral Health for IEHP.

For more information on any of Telecare’s programs, please contact Faith Richie, SVP of Development, at frichie@telecarecorp.com or 510-337-7950.

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