Improving Healthcare Encounters for Individuals with IDD through Customized Care Communication Cards

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Objectives

• Describe the development of a continuity of care and quality improvement initiative (4C Initiative) for individuals with IDD

• Review the components of the Customized Care Communication Card

• Discuss the challenges and opportunities for utilizing and evaluating this resource in the field
Background

• US-wide survey has shown that most dental and medical students and residency program graduates report inadequate experience and comfort with treating the population

• Medical → Social model of care

• Community-based access to preventive and therapeutic services remains a challenge

• DSP/Support Agencies’ expertise is underutilized
  • High turnover
Context

• Continuity of Care and Quality Improvement initiative
  • Patient-centered on unique behavioral/communication strategies and treatment goals

• Partners
  • Systems Unlimited, Inc
  • University of Iowa Hospitals and Clinics
    • Department of Psychiatry
    • Geriatric & Special Needs Dental Clinic
Initiative Aims

• **Improve the quality of healthcare visits** for individuals with IDD
  • Improve communication between residential support staff and the broader community-based healthcare team

• **Foster collaborative relationships** between healthcare providers, direct support professionals (DSPs), residential support staff, and the individual being supported/treated
  • Encourage providers to seek out the expertise of DSPs
  • Empower DSPs to share their expertise and advocate on behalf of the individual who they are supporting
Methods

- Needs Assessment focus group interviewing
  - Global understanding of healthcare visit challenges
  - Identification of key barriers/facilitators
  - Discussion of possible intervention components
- Drafting 4C resource in consultation with three healthcare providers
- Piloting 4C resource in focus group setting
  - Revising sections/content
  - Determining implementation plan
# Customized Care Communication Card

**Bill Smith**  
**Medical Provider:**  
**Nurse:**  
**Dental Provider:**  
**Phone Numbers:**  

## In-Office Communication Strategies

<table>
<thead>
<tr>
<th>Type</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Environmental</td>
<td>Use of mobility devices, room size/lighting considerations, trigger objects</td>
</tr>
<tr>
<td>Behavioral</td>
<td>Elopement, waiting/exam room considerations, behavioral expressions/signals, effective response to disruptions, staff intervention cues</td>
</tr>
<tr>
<td>Tactile</td>
<td>Aversion or soothing with physical touch, staff assistance with passive restraint, distraction object, blanket/jacket preferences</td>
</tr>
<tr>
<td>Verbal</td>
<td>Trigger words, favorite conversational topics, preferences for addressing staff, aversion to high-pitched voices, etc</td>
</tr>
<tr>
<td>Procedural</td>
<td>Specific strategies/medication regimens for eye exams, dental cleanings, lab tests, etc</td>
</tr>
</tbody>
</table>

## At-Home Care Strategies

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diet</td>
<td>Strategies for encouraging healthy food choices (not keeping soda pop available, etc)</td>
</tr>
<tr>
<td>Exercise</td>
<td>Routines to encourage physical movement (after-dinner neighborhood walk, weekly park visit, indoor bicycle use twice weekly, Special Olympics soccer practice weekly, etc)</td>
</tr>
<tr>
<td>Oral Care</td>
<td>Independent brushing with supervision (twice daily with fluoride toothpaste), flossing nightly after dinner, monthly oral health check by staff (absence of ulcers/chipped teeth)</td>
</tr>
<tr>
<td>Management of specific conditions</td>
<td>Weekly blood pressure and daily blood sugar checks, limited salt intake, etc</td>
</tr>
</tbody>
</table>
Methods

• Development of a Technical Assistance Fact Sheet
• Creating individualized 4C resource for each client in SU pilot cluster
• Creation of baseline and visit surveys
**4C Initiative Guide**

**Customized Care Communication Cards**
A continuity of care quality improvement initiative for individuals with intellectual/developmental disability

**Goals of the 4C Initiative:**
1. Optimize quality of healthcare encounters for individuals with IDD
2. Improve the continuity of care for individuals with IDD
3. Strengthen communication between Direct Support Professionals and healthcare providers

**Strategies:**
1. Complete Baseline Survey for each individual:
   https://www.surveymonkey.com/r/4CBaseline
2. Complete a Customized Care Communication Card for each individual
3. Utilize Care Card during healthcare visit (tips below)
4. Complete Visit Survey for each individual after each healthcare visit:
   https://www.surveymonkey.com/r/4CVisit

**Tips for Utilizing Care Cards**

**Prepare for the Healthcare Encounter**

Bring a color-printed copy of the updated Care Card in a plastic sleeve to the check-in counter and ask the secretary to scan it into the patient chart along with medication/health history/insurance information updates. Inform the secretary of the 4C Initiative and resource, asking whether the provider would like to see a copy of the card before the individual is taken back to the exam room/operatory.

**Actively Engage in the Healthcare Encounter**

Use the 4C Initiative as a tool to actively engage in the healthcare encounter of the individual who you are supporting. Hand the provider the color-printed Care Card in its plastic sleeve at the beginning of the visit, describing that the resource is a continuity of care quality improvement initiative that you hope will help the provider during the visit. As helpful, point out the key components of the Care Card relevant to the visit and recommend that the provider add their input in the appropriate sections if indicated.

**Document and Communicate Healthcare Encounter Outcomes**

Complete the Visit Survey: https://www.surveymonkey.com/r/4CVisit

Update the Care Card in electronic version if healthcare provider added input. Place updated Care Card into individual’s binder where it will be seen by daily support staff, verbally alerting them of any major changes.

**Verify Care Card Accuracy Routinely**

Update the Care Card after each ISP revision and healthcare encounter. Utilize Care Card in preparing for ISP revisions. Maintain accurate revision date on Care Card. Ensure that the color-printed copy is in a plastic sleeve.

For more information about this initiative, please contact Lyubov Slishcheva, DDS
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Progress so far

- Pilot cluster has created 4C resource for each client
- UIHC providers have been alerted to the utilization of 4C resource
Next steps

- Evaluation
  - Baseline and Visit surveys
- Adaptation
  - Focus group interviews with pilot cluster and providers
- Dissemination
  - DSP and provider networks (AADMD, SCDA, NADSP)
- Emerging Partnerships
  - MagnusMode: Magnus Card mobile phone application
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Questions, comments?

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