

Mini Plenary: Faith-based Workforce: Engaging the Community and the Health System

Jeremy Moseley, M.P.H.

*Program Administrator for Community Engagement FaithHealth
Division, Wake Forest Baptist Medical Center (WFBMC)*



Faith-based Workforce: Engaging the Community and the Health System

Presented as a mini-plenary at "The 31st Annual Rosalynn Carter Symposium on Mental Health Policy"

November 13, 2015

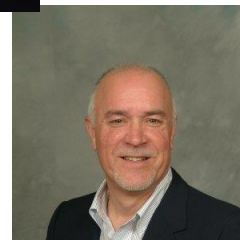
Jeremy Moseley, MPH, Program Administrator for Community Engagement

FaithHealth Division

Wake Forest Baptist Medical Center (WFBMC)



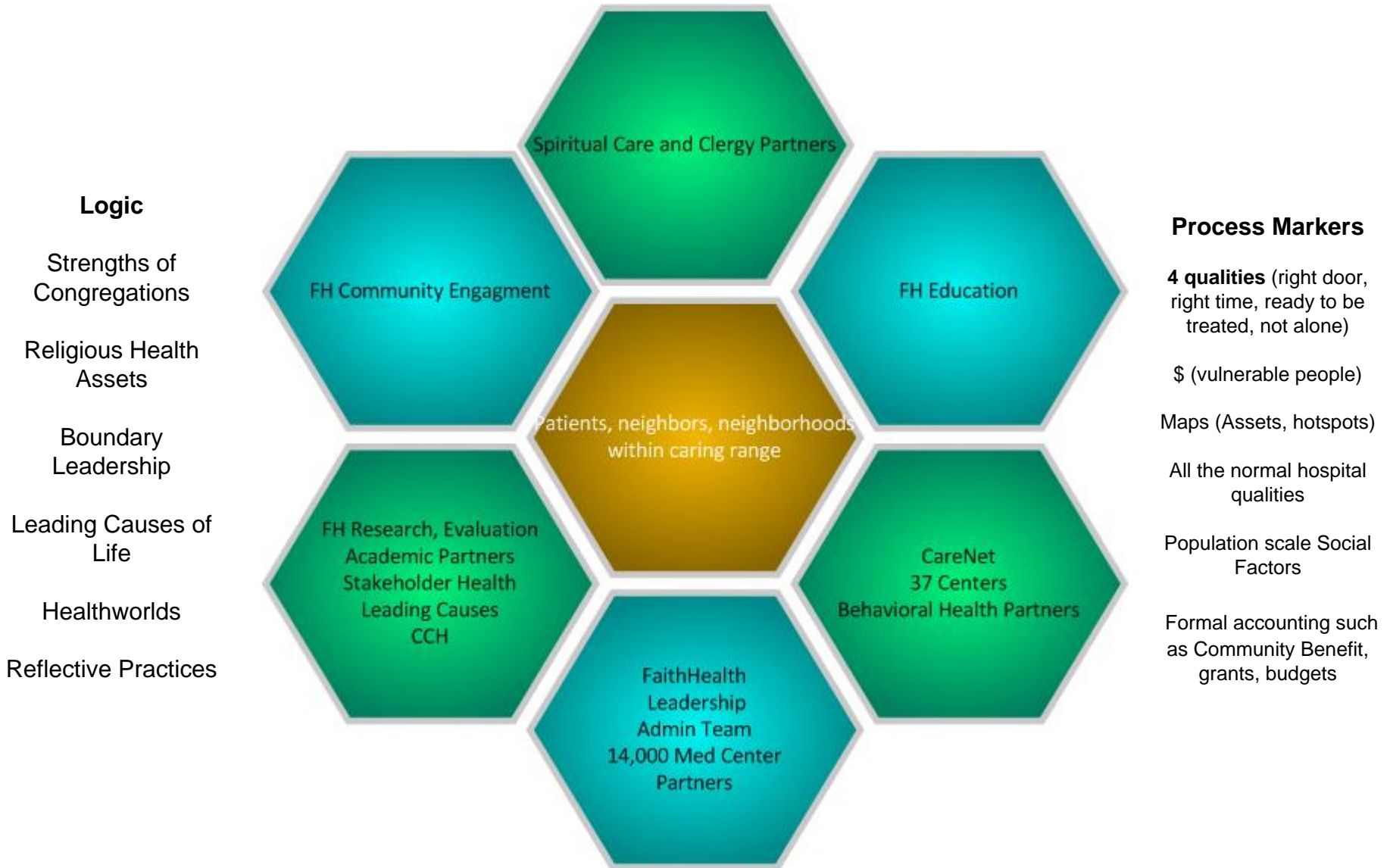
FaithHealthNC
A Shared Mission of Healing



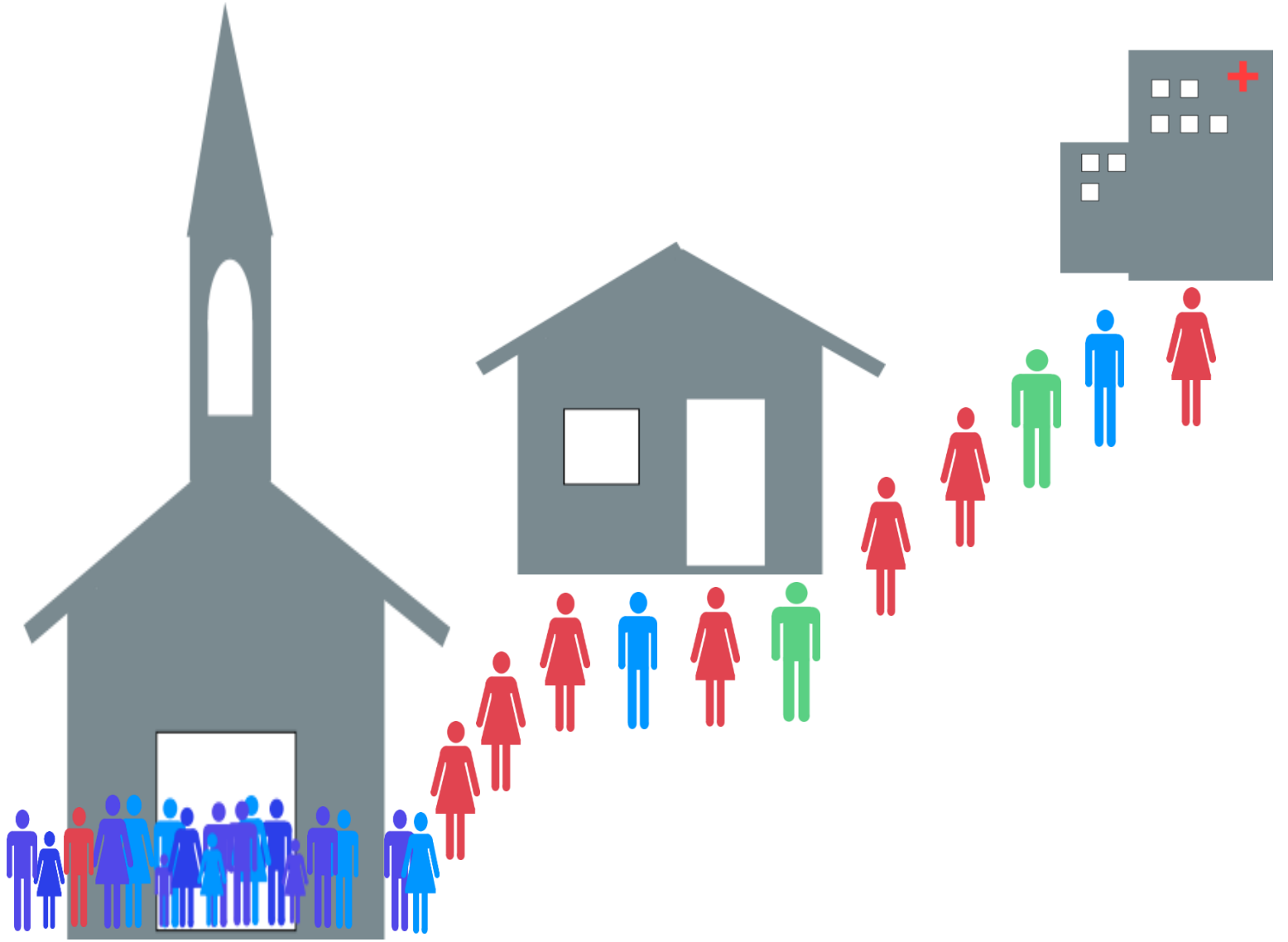


Inside Out,
Upside Down at
Community Scale

FaithHealth @ Wake Forest Baptist Medical Center



Stories and histories, especially those of our neighbors and partners, in which we can see our emergence in living context.



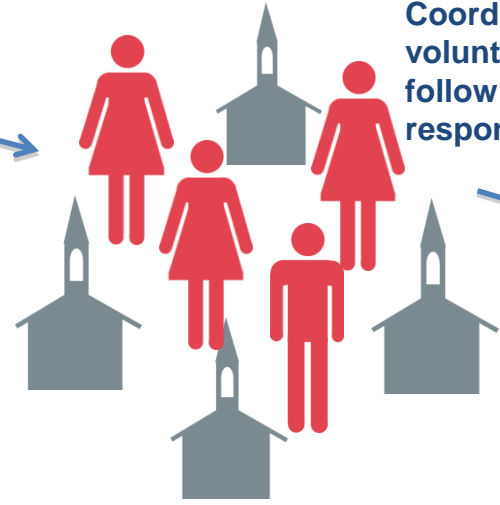
Alignment by denomination, county, or local ministerial affiliation
- Network Builders
- Patient Referral Pathway



Connectors

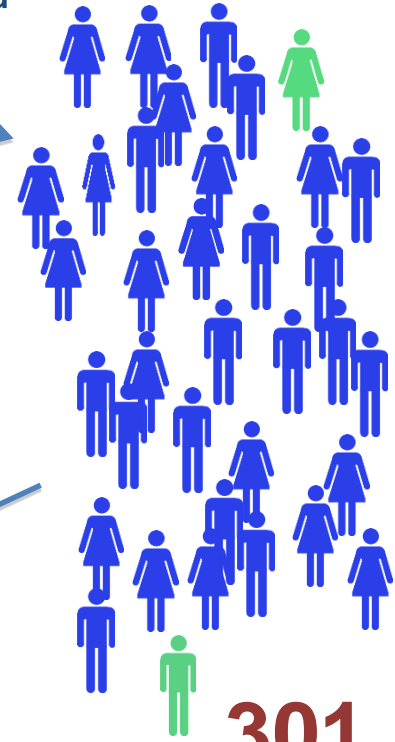
12+ Part-time contract staff

Congregational Coordinators



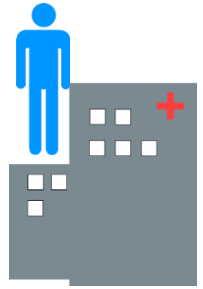
Coordinate volunteer follow up and response

Trained Volunteers



301

Liaison and other staff



Supporter of Health

5 Full-time staff



Focused on Vulnerable Communities
-High Charity Costs
-Target Zip Codes/Census Tracts

Community Chaplains

- SNFs
- Homeless
- Clinic for underserved
- Dialysis centers



Community Roundtable

- Nonprofit Partners
- Congregations
- Connectors
- Supporters of Health
- Hospital departments

Sept. 2015
93 congregations/organizations affiliated
42 signed agreements
301 participated in congregational caregiver training

Paid Staff

Volunteers

Right Side Up: FaithHealth Supporters of Health



Flipping the power dynamics between community
and medical systems and decentering traditional
power roles

Supporter Expertise

- **Relational, Life Experiences**
- Medical resources and health information
- Behavioral health resources and basic assessment
- Social and community resources and referral processes
- Spiritual support and connection

Integrate INTERNAL PROGRAMS with FaithHealth Referral Streams and Processes

Community Service Providers

Community residents

PCPs

Chaplains Service Lines

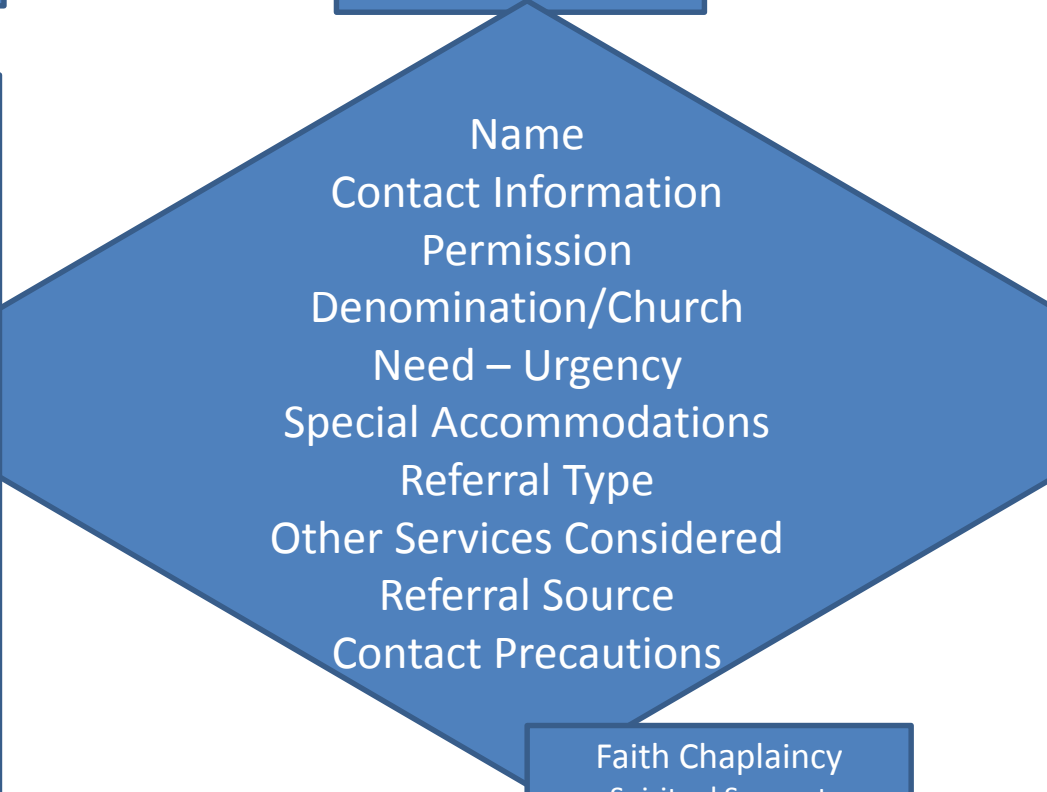
Transitional Care Hospital Case Managers

Community Referrals for Assistance

FaithHealth Liaisons

Health System Referrals for Assistance

HealthCare Liaison – any other zip codes
 Liaison makes referral to Denominational Connectors
 Connectors contact Congregational Caregivers



Supporter of Health Zip Codes
 27101
 27103
 27105
 27107
 27127

Faith Chaplaincy
 Spiritual Support
 Advanced Care Planning
 Crisis Ministry

Community Referrals for Assistance

SUPPORTERS OF HEALTH ACTIVITIES: Embedded Formative Evaluation: First 18 months



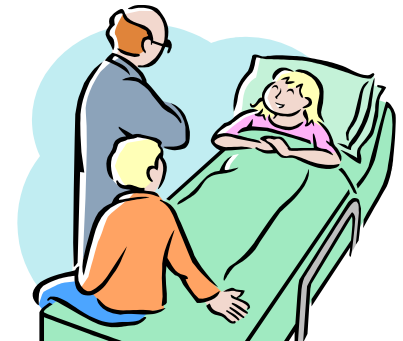
928 PHONE CALLS



458 HOME VISITS

**1484 TOTAL
ENCOUNTERS**

98 HOSPITAL VISITS



Two Tiered Data Approach

Supporters of Health Cohort

- Measure impact of the Supporters of Health work, within their small cohort: process and financial metrics (with other partners' work)
- Case studies, combining qualitative and quantitative data

Overall Charity Care

- Measure Overall Aggregate Self-Pay Costs to the system, trending by FY, comparing our 5 target zip codes to other zip codes

Supporters 18 Month Findings

- **Encounters:** Supporters have had 320 encounters (287 unique persons)
- **Referral Sources:** 73% of referrals come from the community and 27% are from internal health system staff
- **Past Hospitalizations:** **90% of the referrals** have been seen in the Wake Forest system within the last 5 years.
- **Readmission rates** are **10%**
- **Majority (93%) claim no faith home**
- **Primary needs met: healthcare coverage, food, home care assistance, utility/bill assistance**
- **Payer Status: Un-insured (62%), Medicaid (16 %), Dual (9%), Medicare (8%), 3rd Party (5%)**
- **Medicaid, potential ROI:** Enrolling persons for Medicaid was a large part of service, especially collaborating with Patient Financial Services. Estimated potential ~\$145, 431 in revenue, based on benchmarking **one** future annual inpatient encounter of self-pay patient (\$318) vs. average Medicaid payment per inpatient encounter (\$4,725).

IHI's Kathy Luther blogged about the Supporters' story:

<http://www.ihl.org/communities/blogs/layouts/ihl/community/blog/itemview.aspx?List=7d1126ec-8f63-4a3b-9926-c44ea3036813&ID=111>

Supporters of Health Cohort (N=132): Financial Data, Six Months Prior and After Enrollment

	6 Months Prior to Enrollment	6 Months After Enrollment
Total Encounters	875	877
Patients	132	130
Average Encounters Per Patient	6.6	6.7
Average Cost Per Encounter	\$2,208	\$1,846 (16%↓)
Average Cost Per Patient	\$14,634	\$12,451 (15%↓)
Charges	\$5,514,374	\$4,624,047 (16%↓)
Charges Per Inpatient Encounter	\$19,293	\$18,794 (3%↓)
Charges Per Outpatient Encounter	\$1,927	\$1,741 (10%↓)

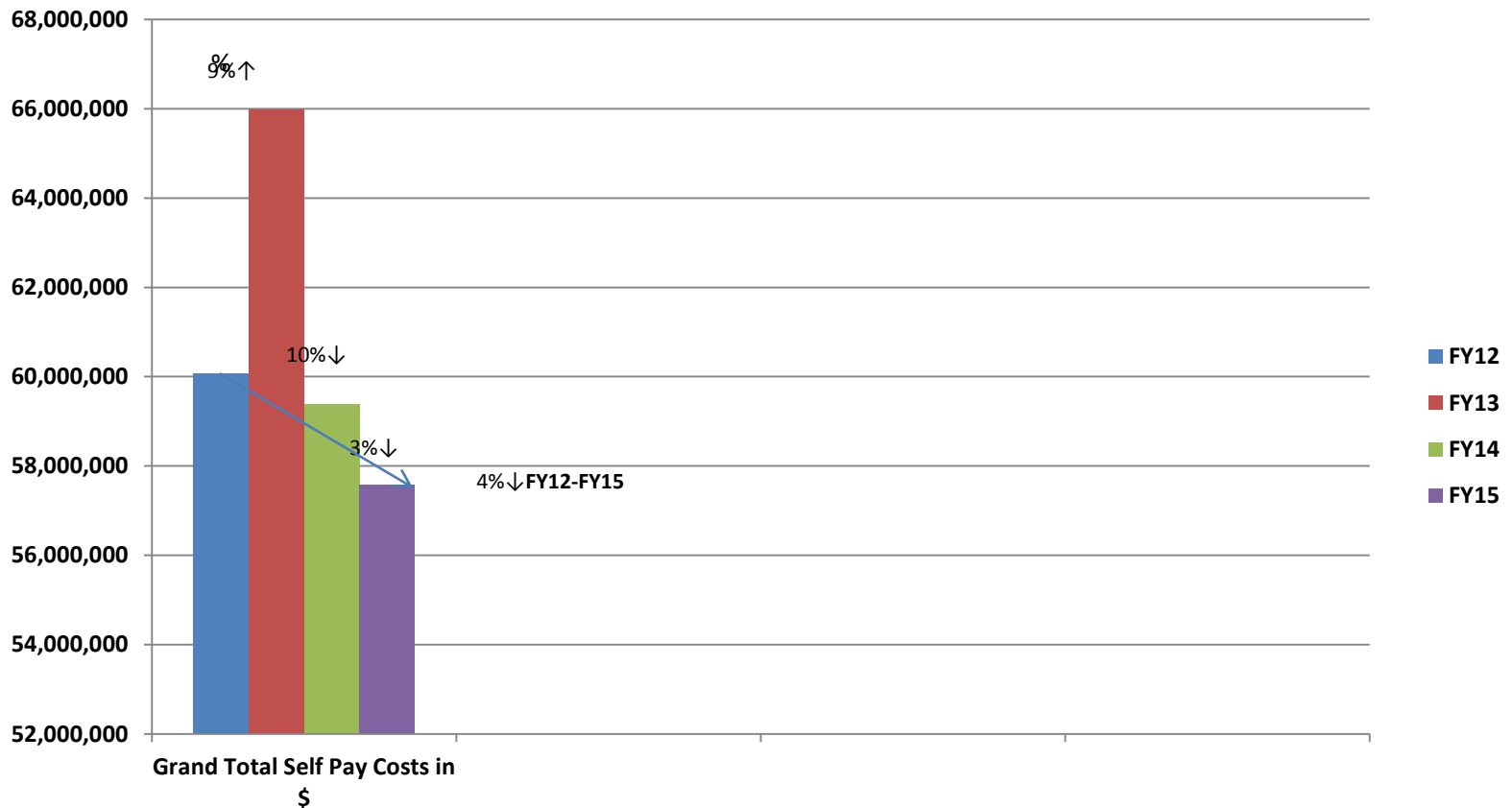
Place-Based Charity Care Findings

FY12-15 Self Pay Patients Only: 5 target zip codes

- Total self pay patient costs represented ~\$60m in FY12
- 5 Winston-Salem zips accounted for roughly 30% of those losses
- Populations in these neighborhoods growing, median income dropping, and, we are getting a large share of the growth in terms of unique patients and total encounters
- Overall FY self-pay costs have decreased 4% for the system

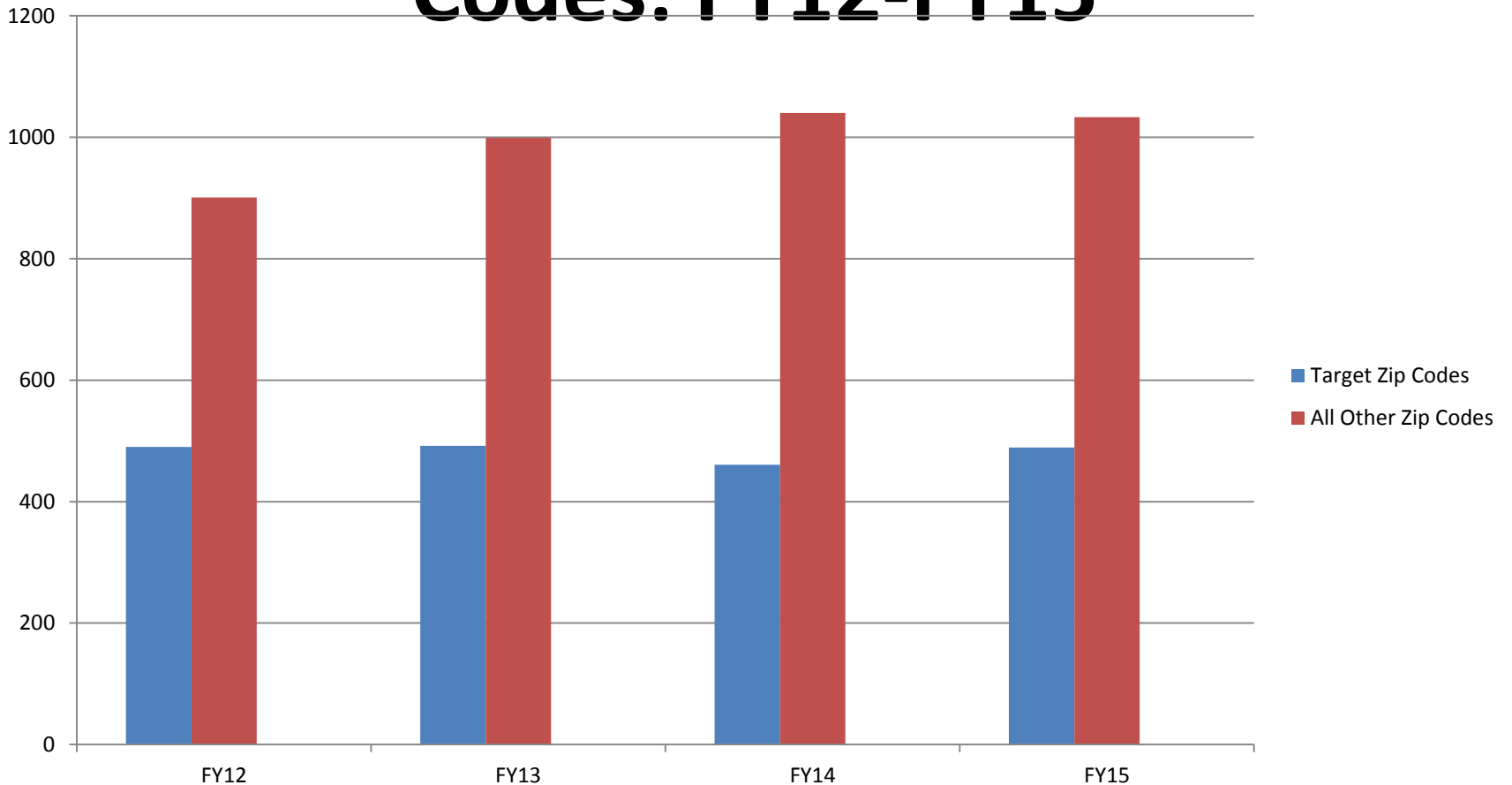
Data compiled by Greg Bray and Justin Meier, Wake Forest Baptist Medical Center

Grand Total Self-Pay Costs from FY12-FY15



Overall total self-pay costs to the system have dropped by 4% from FY12 to FY15, resulting in a savings of \$2,508, 460

Self-Pay Costs (\$) Per Encounters for 5 Target Zip Codes vs. All Other Zip Codes: FY12-FY15



4 Year Charity Care Findings in 5 Zip Codes

Fiscal Year	Unique Patients (N)	Total Cost (\$)*	Total Cost Per Encounter (\$)	Direct Variable Cost Per Encounter (\$)	Total Population	Median Income (\$)
FY12	11,661	18,552,721	490	202	175,551	36,386
FY13	13,500	19,899,214	488	200	176,938	36,011
FY14	12,316	18,622,795	483	201	178,324	35,636
FY15	12,218	17,512,262	489	200	178,324	35,636

Grand Total Self Pay Costs FY12=\$60,073,940; FY13= \$66,964,592; FY14= \$62,021,620; FY15=\$57,565,480

Data compiled by Greg Bray and Justin Meier, Wake Forest Baptist Medical Center

Expanding the Supporters of Health

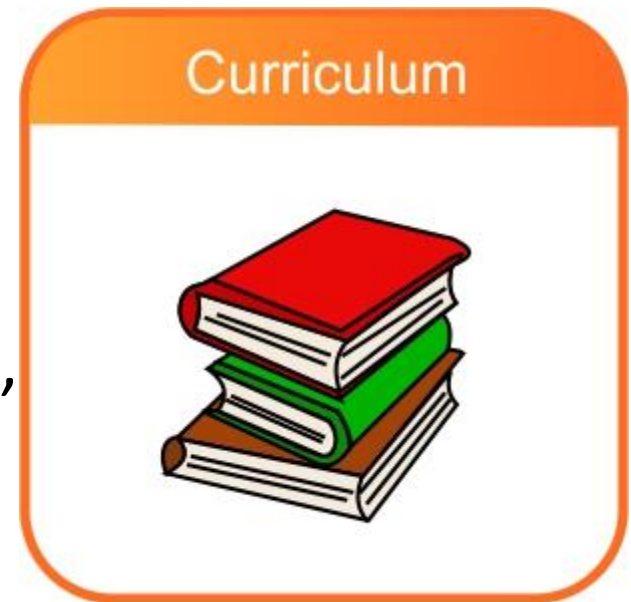
2015: AHEC grant awarded to FaithHealth to refine curriculum and train 30 more Supporters statewide, across many counties, including:

- Forsyth
- Davidson
- Surry
- Randolph
- Wilkes



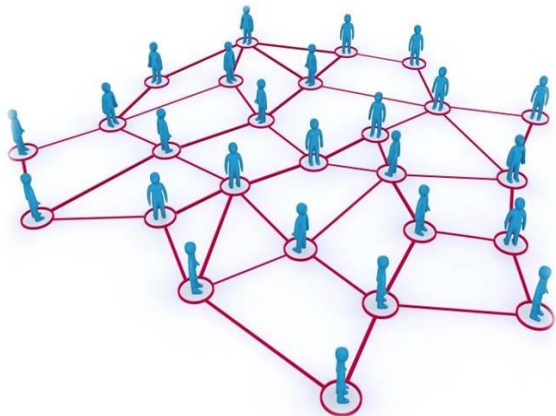
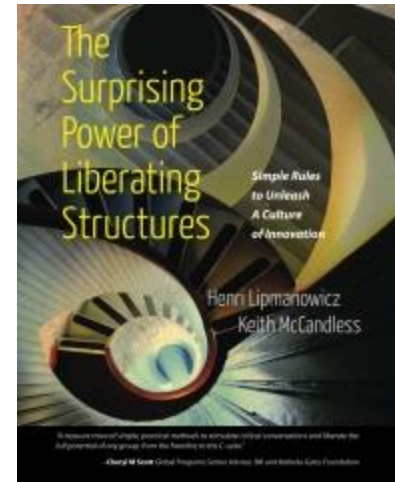
Curriculum Design

- Built upon wisdom of current Supporters
- Values relationships and building trust
- Integrates care management skills, community health advocate training, **motivational interviewing, basic health/behavioral health management (pain management, sleep)**
- Promotes building relationships with safety net resources including faith communities



Pedagogy

- Liberating Structures
- Case Studies
- Role Plays/Practice
- Hands on networking



Ongoing Questions



- How much of our current Supporters' skills can be taught? (How much of their success is personality-driven?)
- How do we choose the “right” people?
- What will be learned and/or need to be refined from the educational mix offered?
- Where are the best placements for Supporters?

Next Steps: Chronic Care Management clinics in partnering faith communities, building on Triad Free Health Clinic



Join us as we all work toward creating Optimal
Health in our Communities!

THANKS for Being a Leader in this work!

mmoselely@wakehealth.edu

336.716.7838

