

# Consumer-Provider Partnership to Promote Health (C3PH) Planning Project

Rural Economic Assistance League (R.E.A.L ,INC)

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# Original Goals of the Project

- Flow/Continuity of transportation to/from clinics
- Joint scheduling
- Guarantee ride home
- Viable for any person using dialysis services
  
- The Consumer-Provider Partnership to Promote Health planning project focused on bridging the gaps and developing a transportation system that aligns transit services with needs to assist in increasing access to health care for transit dependent dialysis users.

# Logic Model

Inputs	Activities	Outputs	Short-Term and Intermediate Outcomes	Long-Term Outcomes
<ol style="list-style-type: none"> <li>1. REAL, Inc.</li> <li>2. Transportation Coordination Network</li> <li>3. South Coastal AHEC</li> <li>4. Coastal Plains CPCC</li> <li>5. Nephrologists</li> <li>6. Dialysis Provider partners across 5 county area</li> <li>7. Kidney Foundation</li> <li>8. Dialysis Care Advisory Committee</li> <li>9. Dietician</li> <li>10. Service provider social workers</li> </ol>	<ol style="list-style-type: none"> <li>1. Review of Partner Identified Issue – Dialysis Transportation Care Delivery Model</li> <li>2. Monthly Partner Meetings</li> <li>3. Conduct partner site environmental and practice scans</li> <li>4. Dialysis Care Advisory Committee review</li> <li>5. Community Consumer Forums</li> <li>6. Dialysis Consumer Interviews</li> <li>7. Consumer Representation at full Partner Meetings</li> <li>8. Develop Coordinated Dialysis Transportation Care Delivery Model Strategic Plan</li> </ol>	<ol style="list-style-type: none"> <li>1. Monthly Partner Planning Meetings</li> <li>2. Quarterly Partner Planning Meetings</li> <li>3. Quarterly Care Advisory Committee Meetings</li> <li>4. Number of Community Consumer Forums</li> <li>5. Number of Consumer Interviews</li> <li>6. Development of Partner Environmental Scan Report</li> <li>7. Development of Consumer Needs Report</li> <li>8. Number of Consumer participating in Planning</li> <li>9. Development of Coordinated Dialysis Transportation Care Delivery Model Strategic Plan</li> <li>10. Identification of Integration of Coordinated Dialysis Transportation Care Delivery Model and protocols into practice</li> <li>11. Identification of metrics for evaluation of Dialysis Care Delivery Model</li> </ol>	<p>Increase Partner engagement in Coordinated Dialysis Transportation Care Delivery Model Planning</p> <p>Increase Advisory Committee Meeting participation - Coordinated Dialysis Transportation Care Delivery Model</p> <p>Increased buy-in on adoption of Coordinated Dialysis Transportation Delivery Model into practice</p> <p>Percent of Organizations supporting Planning</p>	<p>Improved dialysis care management through system level practice changes</p> <p>Improved consumer use of coordinated transportation services</p> <p>Sustainable technology and coordination of transportation for dialysis care</p> <p>Organization level changes for coordination of transportation</p> <p>Increased consumer quality of life and health outcomes</p>
<p><b>EXTERNAL FACTORS:</b> Partner programs maintain funding and able to serve the community.</p>			<p><b>ASSUMPTIONS:</b> Advisory board members remain healthy and able to participate in the planning activities.</p>	

# Project Activities

- Consumer
  - Consumer Surveys
  - Individual Consumer Communication On Transit Needs
- Clinics
  - Clinic Surveys
  - Transportation Coordination with Social Workers
- Transportation
  - Holiday Scheduling
  - Extended Hours Based On Coordination Requests From Clinics
  - Discounted Cost Model

# Project Activities Continuation

## Service Coordination

### Goals of Partnership:

- Identify Barriers
- Create Affordable Rates
- Improved Treatment Visits
- Quality of Life (QOL)

### Results of Partnership

- Flow/Continuity of Transportation To and From Clinics
- Joint Scheduling
- Viable For Any Person Using Dialysis Services

## Service Coordination into Practice

### Standard Participation:

- Operating hours 8AM to 5PM
- Cost to rider based on origin and destination of trip
- 1<sup>st</sup> shift return home, 2<sup>nd</sup> shift to dialysis and return home and 3<sup>rd</sup> shift to dialysis are most used by transit dependent patients
- Dialysis appointment time is consistent while return time is rarely consistent

### Coordinated Dialysis Transportation:

- Training for transit staff to ensure greater knowledge of dialysis care
- Travel training for consumers and dialysis clinic staff
- Discounted cost model
- Extended operating hours available with 4 or more individuals requiring transportation to accommodate early and/ or late shifts
- Examine possibility to designate staff for dialysis return trips because of large time variances

# Project Outcomes

- Transit worked in partnership with all three dialysis treatment centers (DaVita, Fresenius, and US Renal Care) to now coordinate schedules and make arrangements to provide transportation on Agency holidays throughout the year when normally it would not be available.
- Dialysis Centers provided educational tours of clinics and gave general information on Dialysis Treatment to Transit Staff.
- Implement call in and scheduling changes; train of call schedule center staff; changes in scheduling; roll out of C3PH model to additional sites. Transit has developed a discount formula to use for Dialysis Consumers when the cost of transportation is a barrier; transit and Dialysis Clinics worked together to ensure chair time.
- Revise training of all transit staff and scheduling.

# Obstacles, Issues, Resolutions

- Lack of communication between transit site, dialysis treatment clinics, and dialysis consumers on chair times and changes that occur.
- Increasing understanding about kidney disease and knowledge about treatments to dialysis consumer, consumer family members, and transportation service providers.
- Consumer engagement and interaction.
- Understanding of service pricing.
- Understanding how changes in dialysis treatment services effects transportation.
- Increase in understanding the importance of not missing treatments.

# Lessons Learned

- Communication between dialysis clinics and transportation is extremely important to provided the correct needed services to dialysis patients that are transit dependent.
- Education is needed for everyone who is in connection with dialysis consumers.
- Transportation plays a key role in the lives of dialysis patients who do not have means of mobility.
- Days and times given to the patient by the treatment facility are not “set”. Days and times change based on availability.



# Current Status of Project

- Currently R.E.A.L ,INC. provides continuous transportation for dialysis consumers who are transit dependent.
- Constant one on one interaction and communication with dialysis consumers, so that needs are heard and met.
- Daily communication with social workers, nurses, and other staff members from the dialysis clinics.
- Any changes in chair times or treatment days are communicated across transit site and clinics.

# Steps for Project Sustainability

- This project gathered information to help resolve the problem that dialysis users have because of the time of clinic appointment and the time that transportation is available.
- Partner and consumer engagement continues to build and focuses on long term organizational level changes to better serve dialysis consumers that are transit dependent.
- Changes to transit service delivery have been made based off of dialysis consumer appointment to the treatment center.
- Additional funding sources are constantly being looked into, so that transportation can be paid, for transit dependent dialysis users.