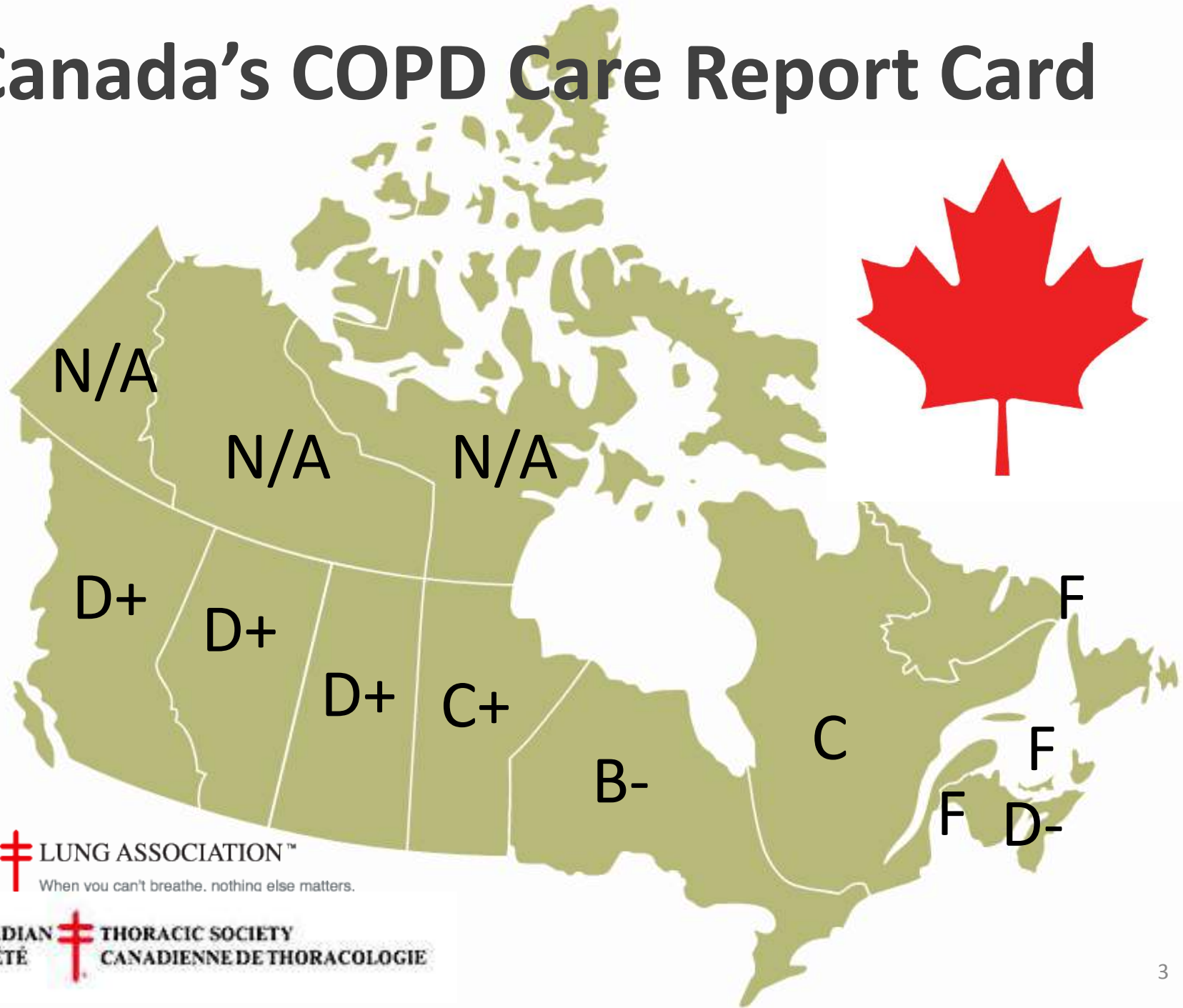


# Working at the edges of the system

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Division Head, Respiriology, Capital Health  
Clinical Improvement Advisor, CFHI

# Relationships

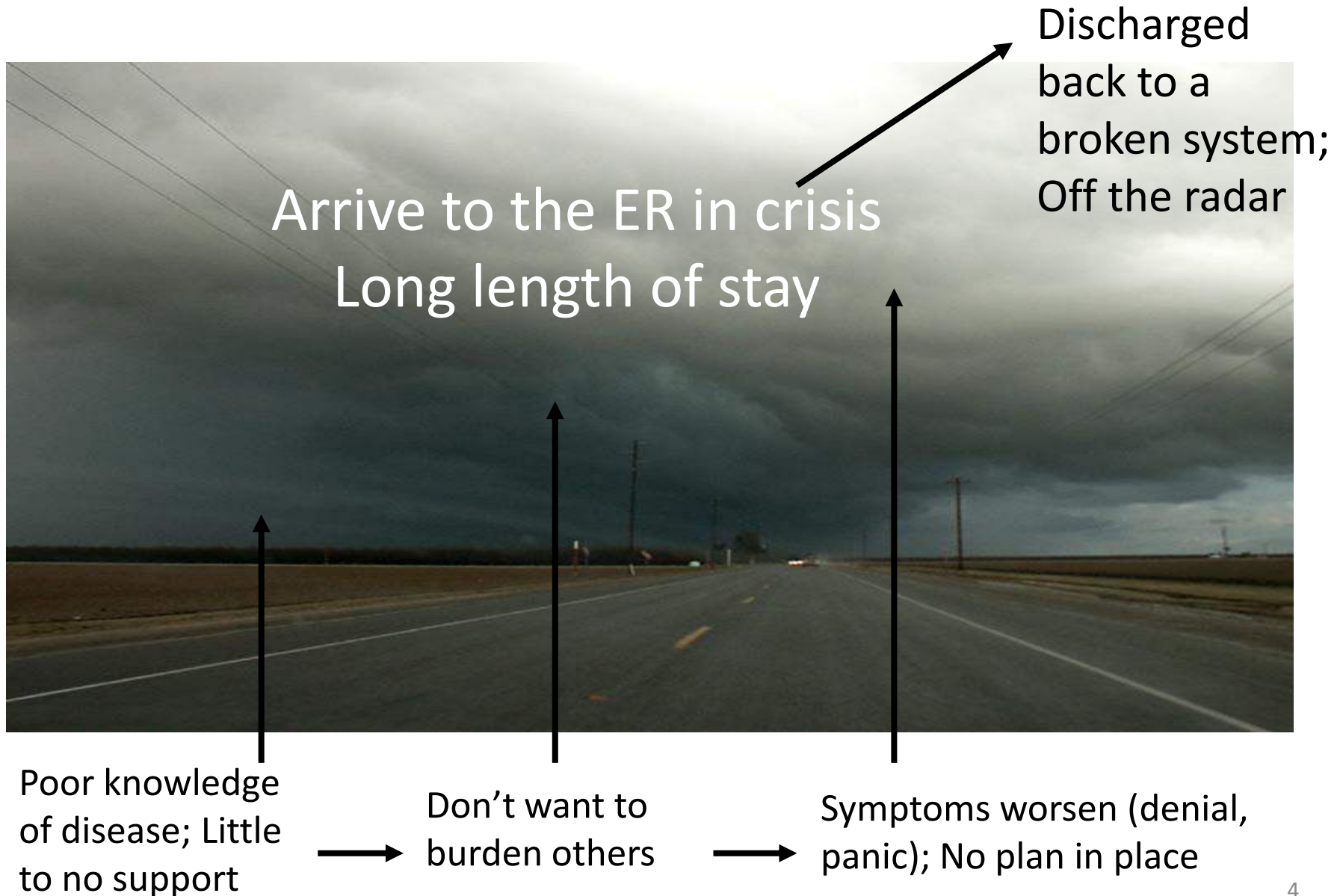
# Canada's COPD Care Report Card



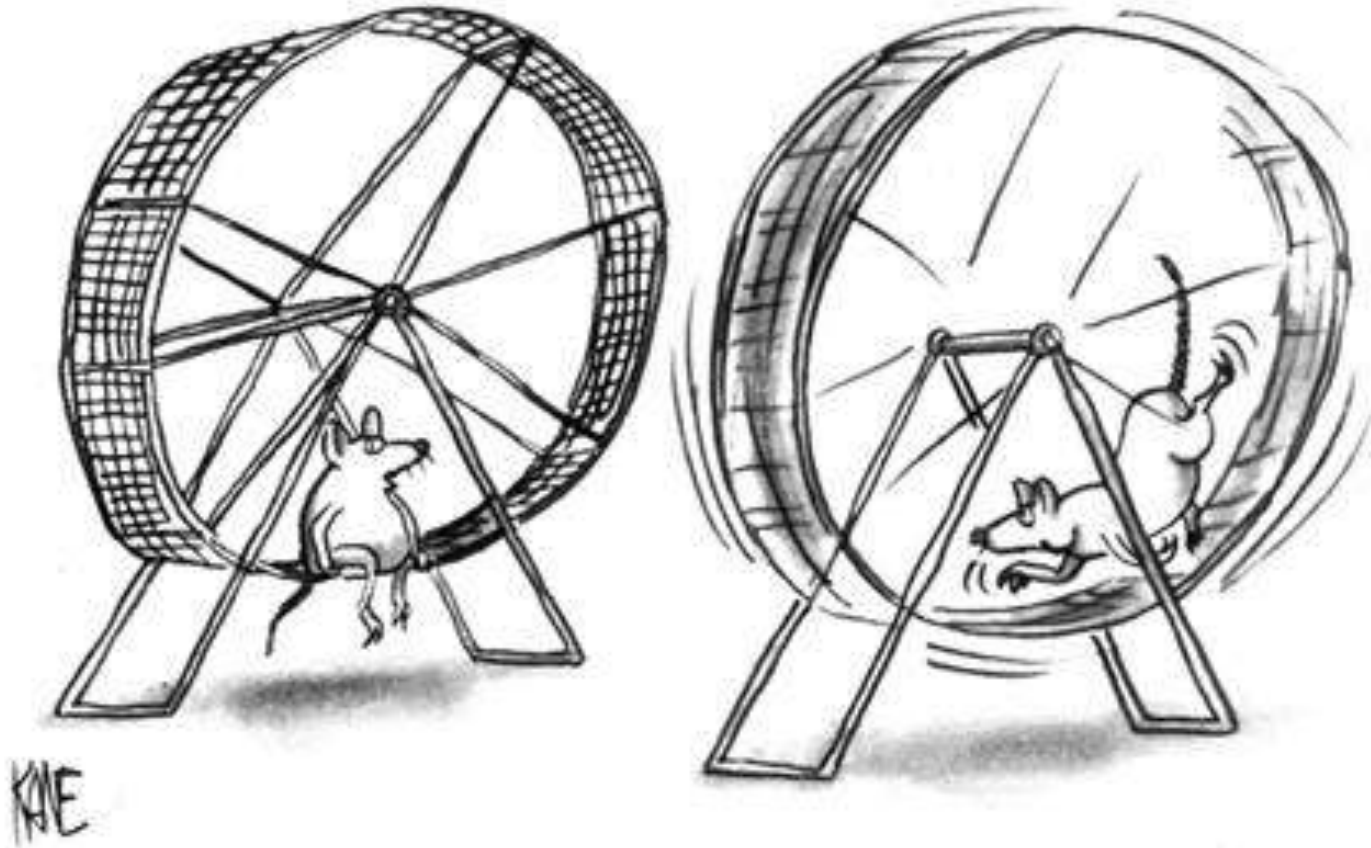
THE  LUNG ASSOCIATION™  
When you can't breathe, nothing else matters.

CANADIAN  THORACIC SOCIETY  
SOCIÉTÉ CANADIENNE DE THORACOLOGIE

# What would the worst care look like?



# What if we could design a system of care that exceeds patients needs?



*"I had an epiphany."*

# My epiphany ...

## THE LEFT ATRIUM

*Room for a view*

### Defining moments: End-of-life care in the back of a truck

**P**rofessor of medicine, head of respiratory, end-of-life researcher — that's my life as a physician. My last official home visit was nearly 30 years ago. Recently though, I spent a few days as "visiting professor" in a remote rural area, seeing patients with a respiratory therapist connected to the New Brunswick Extra-Mural Program, the "hospital without walls." I had forgotten, and needed to be reminded, that defining moments in our work sometimes take place when we care for patients in their own space, and on their own terms. And their space does not always mean their home.

Dan had an advanced malignancy, with multiple metastases and lymphedema of his arm, causing secretions. He was on his fourth course of chemotherapy, and had just started to use oxygen for exertion. Dan was a truck driver who used to drive a 70-foot tractor-trailer all over North America. With obvious emotion in his voice, he told us that his only journeys these days were to medical appointments. Between appointments the "hospital without



Paul Hester

# The Program (the mechanics of it all)

5 year Research Program  
(CIHR et al)

Identify patients.  
In hospital: consent,  
optimize treatments,  
link with staff, action  
plan(s) written

Pre-evaluation  
phone  
interview/questionnaires

Home visits ( $\approx 4$ )  
every 2 weeks:  
assessment,  
education, review  
action plan(s),  
support, ACP

Post-evaluation  
Repeat measures  
Follow admin  
data

Follow up call  
monthly for 3  
months

## Advantages:

- Cross-sector communication
- Expertise
- Focused (lean)
- **Evaluation**

# Outcomes: Qualitative

Participants felt: more confident in managing symptoms, less anxious/stressed, willing to discuss goals of care, including those related to end-of-life



*I used to feel so alone with my illness, now people check on me and I know there's someone I can call if I'm having a problem. I would feel so much more isolated, frustrated and apprehensive without this support.*

INSPIRED Patient



***Relationships:*** fostered between patient, family, providers

***Emphasis*** on wellbeing

***Locations*** are convenient

***Access*** is optimized

***Together:*** patient/family active partners

***Intentional*** redesign of system

***Outcome/process*** measures evaluated continuously

***Not complicated,*** simple

***Services:*** financially sustainable

***Hub*** of system is the family


***Interests*** of patient drives what we do and how

***Population-***based system and services



# ER, Admissions, Length of stay (bed days)

6 month pre/post data (113 patients)/ Proxy costing measures

	Pre-INSPIRED	Post-INSPIRED		
	6 /12	6/12	 6 /12 (n, % reduction)	Total approx. Cost "savings"
ER visits	251	96	-155 (62%)	* \$900,000
Admissions	138	49	-89 (64%)	
Bed Days	1439	539	-900 (63%)	

\*Attributable to reduced length of stay (at \$1000/day) and ED visits using cost estimates from Mittmann N, Kuramoto L, Seung SJ, Haddon JM, Bradley-Kennedy C, Fitzgerald JM. The cost of moderate and severe COPD exacerbations to the Canadian healthcare system. *Respir Med.* 2008 Mar;102(3):413-21. PubMed PMID: 18086519. Epub 2007/12/19. eng.

# Lessons Learned (i)

- Organizationally, the importance of innovation funds (even at a time of fiscal constraint)
  - Requires senior management with a vision for improvement; those who ask what if?, then how?
- Team-wise, the importance of respect (horizontal decision-making), prioritizing the patient voice & working to the fullest scope (e.g., RRTs, SCPs)
- Champions are vital (MDs & CEOs/VPs) “If you want to go fast, go alone, if you want to go far, go together”



# Assets vs. Deficits

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## Assets Thinking:

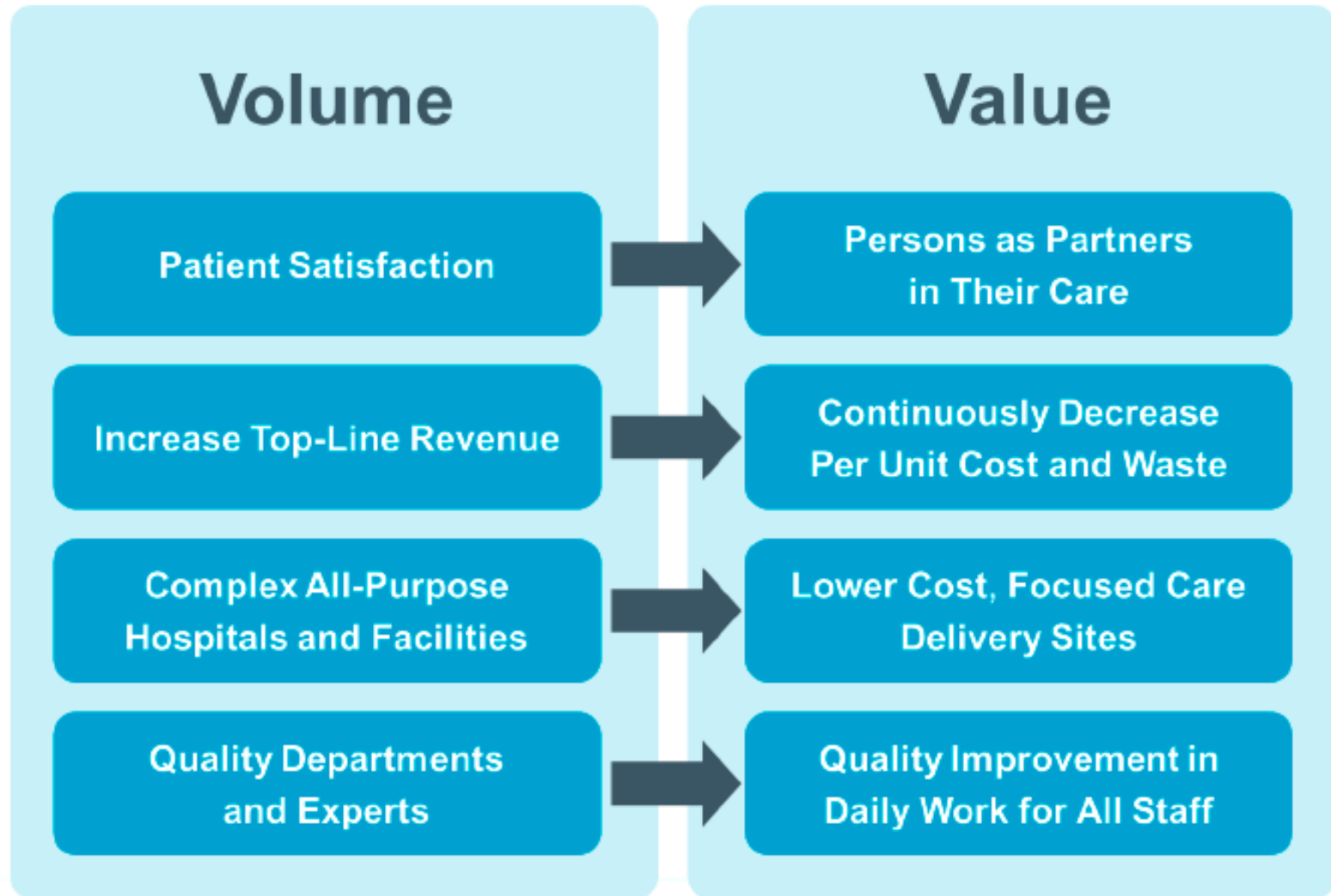
- Strengths based
- How can we create community spirit?
- What can I do?
- We're all in this together
- We're getting there
- Work with engaged people
- People have the answers
- People control their lives

## Deficit Thinking:

- Problem orientated
- How to fix this problem?
- Someone needs to sort this
- Us versus them
- Problems are embedded
- Do things to people
- People are a problem
- People can't be trusted to make decisions or be in control



# Transitioning from Volume-based to Value-based Systems Requires New Mental Models



# High-Impact Leadership Behaviors

What leaders do to make a difference

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## 1. Person-centeredness

Be consistently person-centered in word and deed

## 2. Front Line Engagement

Be a regular authentic presence at the front line and a visible champion of improvement

## 3. Relentless Focus

Remain focused on the vision and strategy

## 4. Transparency

Require transparency about results, progress, aims, and defects

## 5. Boundarilessness

Encourage and practice systems thinking and collaboration across boundaries



How can we best prepare the next generation of clinicians to lead such organizations?

Are the Boomers soul weary and unable to see how things can be different? Maybe...

Seek out Gen X and Y (*& not just MDs*):

The natural innovators & the opinion formers

Appeal to their interests, make them feel valued (for their ideas!), mentor them, and expedite the process!

# 'INSPIRED' Approaches to COPD: Creating Value and Improving Care



Canadian Foundation for  
**Healthcare  
Improvement**



**Improvement  
Online**

**'INSPIRED' Approaches to COPD: Creating Value and Improving Care**

Language of instruction: English

April 22 – June 26, 2014



Canadian Foundation for  
**Healthcare  
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Fondation canadienne pour  
**l'amélioration des  
services de santé**