Colorado Health Innovation Community (CHIC)
Monthly Webinar
October 1, 2019



Welcome!

- All participants will NOT be muted upon entry.
- To mute/unmute yourself to ask a question or comment:
 - Via computer: Click the microphone icon in your Zoom menu
 - On the phone: Press *6
- You may also chat in questions via the chat box in Zoom.
- Please Note: This webinar will be recorded.

While You're Waiting:

Please share your *name* and *organization*, and any *team members* who are with you, in the **chat box**.

By the end of this webinar, you will have...

- Reviewed the final agenda for October 23's CHIC Ecosystem Event and heard final updates about upcoming Catalyst webinar and workshop.
- Learned about the CCI Academy, human-centered design materials and resources you can find there, and how to sign up.
- Learned about how *Melissa Memorial* has reduced the number of opioids used and prescribed by changing their culture to one with stricter pain agreements, drug screening, and implementation of telemedicine for pain management and opioid reduction.
- Discussed how lessons learned might translate to your organization's work and goals.



Who is on the call?













Colorado Health Innovation Community (CHIC)









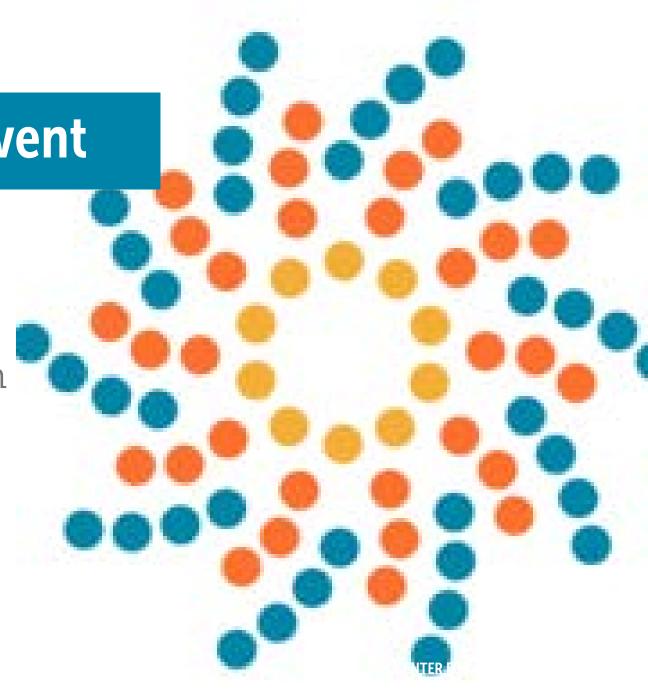


10/23 CHIC Ecosystem Event

Catalyst HTI,
 3513 BRIGHTON BLVD |
 DENVER, CO

• Registration starts @ 11:30am

• Meeting Time: 12-4



CCI Academy

- Overview
- How to sign up

Hey Juliane, welcome back!

munity Call on Friday,

Sept. 27th at noon pacific

Submit a question

Next Peer Workshop will be the week of Oct Day and time TBD. Stay tuned



T COURSES

es for every aspect of ntered design skills

To Courses



PEER WORKSHOPS

Video calls with experienced peers sharing what they've done.

Go to Peer Workshop



COMMUN

Monthly calls re

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October Catalyst Workshop

- October 3: Virtual Program
 Orientation Webinar
- October 24-25: Workshop #1
 Kaiser Permanente,
 10240 Park Meadows Dr.,
 Lone Tree, CO 8012

CHIC Spotlight



Trampas Hutches, CEO



CHIC Spotlight



Trampas Hutches, CEO

Needs Identified from June Co-Design Meeting

- 1. Supporting patients beyond the walls of the clinic (virtual care)
- 2. Social Determinants of Health data as relates to understanding risk & needs of patients
- 3. Pre-visit preparation for improved visits
- 4. Efficiency of patient interaction

CHIC Spotlight

- As you are listening, we invite you to...
 - Think about how this is relevant to your org's work and goals
 - Type in your questions in the chat box



Changing the Culture on Opioids in a Rural Setting

Trampas Hutches, MHA, BSRT (R)(CT)(MR)
Melissa Memorial Hospital

Organization profile

- Melissa Memorial Hospital (MMH) is a special district 15-bed hospital with a rural health clinic, dental clinic, eye clinic, retail pharmacy, surgical program including joint replacements, ER, imaging lab, EMS etc.
- MMH serves approximately 5,000 people located 175 miles
 Northeast of Denver 35 miles to the south and 15 miles to the
 West of the Nebraska border.

Spring of 2018

- The number of patients on dangerous levels of opioids at Melissa Memorial Hospital (MMH) and The Family Practice of Holyoke (FPH) was astounding.
 - 4% of patients served at MMH were on over 90 of morphine milligram equivalents (MME).
 - These patients were mostly in the primary care settings but were also consistently seen in the ER for problems consistent with chronic pain and opioid use.
 - Consistent pain agreements were not followed, nor were drug screening being performed to ensure compliance with these patients.
- Understanding the severity of the problem, an initiative was undertaken.
 - Goal #1: reduce the number of opioids used and prescribed while introducing alternatives to opioids in both the primary care and hospital settings.
 - Goal #2: A cultural change for use of strict pain agreements, drug screening and acceptance of telemedicine for pain management and opioid reduction was sought.

Plan of Attack

- A new pain management program was started at MMH led by Dr. Kajsa Harris
 - Dr. Harris specializes in family practice, emergency medicine, acupuncture, trigger point injections, manipulations, nutrition therapy, and suboxone
 - New pain agreements and processes were created and mandatory drug screening along with send-outs for confirmation were implemented
 - Training for primary care providers in acupuncture and other alternatives to opioids was done
 - Telemedicine processes were established for visits when Dr. Harris was not on site
 - CHA ALTO program was implemented in the ER
 - PR/marketing campaign was done to educate the community about the changes

Results

- Efforts were validated on day one; 100% of all patients failed drug screenings
- 72% of patients in the program have been tapered off completely, 100% of all patients are now below the 90 MME
- Use of alternatives, trigger points, acupuncture, behavioral health, different medications, chiro etc.
- Patient satisfaction rates high
- Future



Upcoming Dates to Remember



Monthly CHIC
Webinar (10/1)
You are here!

Oct 3: Virtual Program Orientation

Oct 23: First ecosystem event (Catalyst HTI)

Oct 24-25: Catalyst Training #1 (KP Lone Tree)



Monthly CHIC Webinar (11/5)

NOV



No Monthly Webinar

Dec 3-4: Catalyst Training #2

(Catalyst HTI)



NEXT STEPS

Register for:

- Oct 3 Virtual Program Orientation
- Oct 23 Ecosystem Event
- Oct 24-25 Catalyst Training #1



