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DISRUPTIVE INNOVATION

- Affordable: reliable
- Simple: capable
- Accessible
- Process



BACKGROUND



Health Care Costs

Access



Vulnerable Population

BACKGROUND TO THE PROBLEM

Health Care Costs

Direct Costs: United States

- 18.0% GDP (2nd to Netherlands at 11.9%)
- 19.6% GDP by 2024
- Increased spending ≠ improved health outcomes

Access to Care

Decrease in Timely Access to \uparrow United States

- Primary Care Physician Shortage
- 9 million Uninsured Gained Access to Care
- Results in ↑ Use of ED/Urgent Care And ↓ Patient Satisfaction

Vulnerable Population

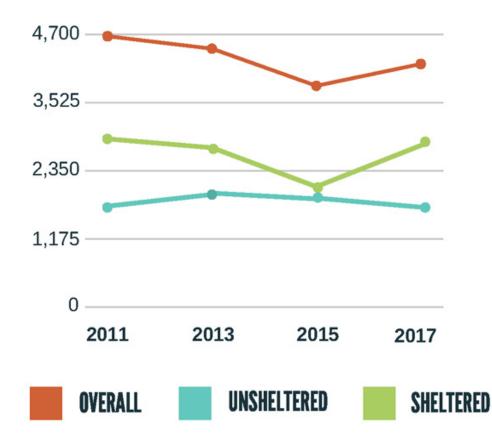
Homelessness in United States

- 553,742
- 14.4% since 2007
- **↑** Nationally 0.7% between 2016-2017
- 个 Use of ED
- Homeless persons account for 40% of frequent ED users

2017 HOMELESSNESS SNAPSHOT Portland, Oregon

HOMELESSNESS IN PORTLAND

Portland's number of people experiencing homelessness rose for the first time in 6 years.



HOW WE COMPARE

- Portland's chronic homelessness has increased at twice the national rate
- Oregon has the fourth highest rate of per capita homelessness (5.4%) in the U.S.
- Oregon has the second highest rate of unsheltered homeless families (52%) in the U.S.

HOMELESSNESS INCREASED ACROSS MAJOR WEST COAST CITIES FROM 2015-2017



POWER OF PARTNERSHIPS





SCHOOL OF NURSING

POWER OF PARTNERSHIPS: Vision of One



POWER OF PARTNERSHIPS: Disruptive Thinking





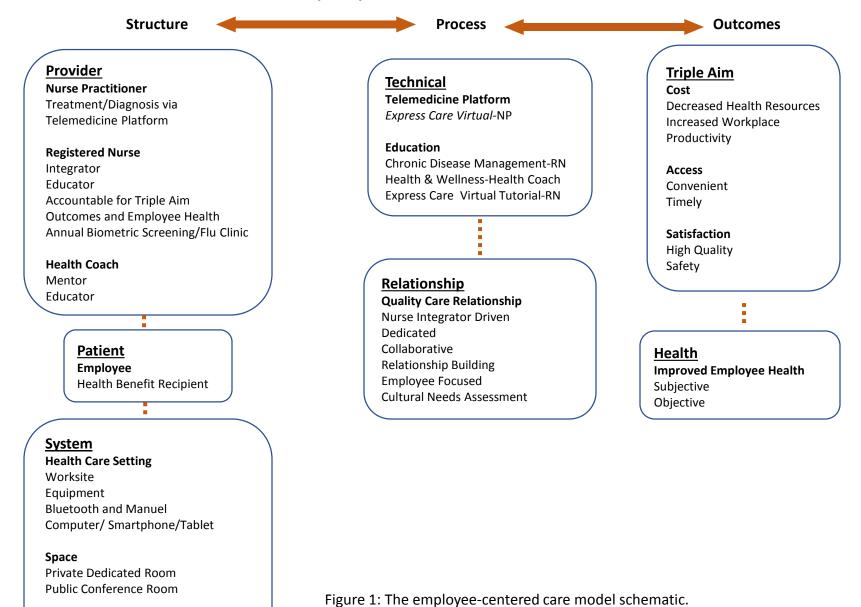




EVIDENCE TO SUPPORT THE MODEL

- Fox, K., McCorkle, R. (2018). An employee-centered model of care responds to the triple aim: Improving employee health. *Workplace Health and Safety, 62, 162-164.*
- Comprehensive Literature Review: SCOPUS, PUBMED, CINAHL
- Content Specific: Worksite Clinics; NMHC; NP Role; NP Quality/Safety Outcomes; Telemedicine; Patient-Provider Relationship
- Inclusion: National And International Articles Between 2005-2016
- Exclusion: Articles Published in Languages Other Than English
- Total Articles: 20
- Articles Grouped Into 4 categories:
 - Worksite Clinics
 - Nurse-Managed Health Centers
 - Telemedicine
 - Quality Care Relationship/Nurse Integrator

Employee-Centered Care Model



Resources

Telemedicine/Educational

Note: Using Donabedian's Framework Figure 1 shows the relationship of the structure, process, and outcomes of the model acknowledging the goals of the Triple Aim.

PILOT TRENDS

- <u>Satisfaction</u>
- Employee
 - > Express Care Virtual Data Analytics
 - ➤ 90% or greater satisfaction
- <u>Access</u>
- Employee
 - > 89% would have sought care elsewhere
 - ➤ 10% utilization
- <u>Cost</u>
- Employee
 - > no cost (telemedicine appointment covered by employer)
- Employer
 - Total Cost Avoidance: 91%
 - $\succ \downarrow$ in corporations 12-month rolling medical claims average

POWER OF PARTNERSHIPS: Disruptive Thinking



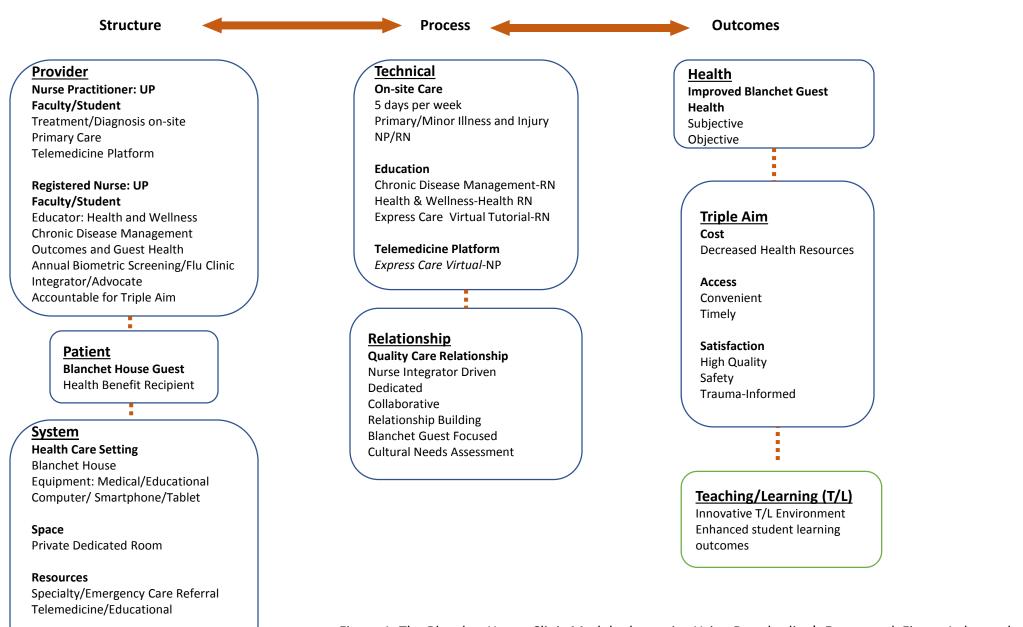
POWER OF PARTNERSHIPS

Telemedicine: Express Care Virtual

- Virtual, Private, Secure Appointments
- Staffed by Licensed Board Certified Health Professionals: Nurse Practitioners
- Diagnosis And Treatment of Minor Illness and Injury
- Computer, Smartphone, Tablet
- \$49.00 Flat Fee: With or Without Insurance
- 7 days per week 8am-midnight
- Increased Patient Satisfaction
- o **2014**
- 98% Satisfaction Rate
- 96% = Just as Good, or Better, Than Traditional Visit



Blanchet House Clinic Model



Financials Partners/endowment/Insurance Figure 1: The Blanchet House Clinic Model schematic. Using Donabedian's Framework Figure 1 shows the relationship of the structure, process, and outcomes of the model acknowledging the goals of the Triple Aim.

POWER OF PARTNERSHIPS: The Team



Blanchet House Project Design Team

Operational:

- Define purpose/goals/mission
- Assign and design roles and responsibilities
- Design of clinic model: structure/process/outcome
- Resources
- Partnerships
- Sustainability

POWER OF PARTNERSHIPS: The Team



Blanchet House Clinic/Guest/Student Design Team

Operational:

- Design of clinic space
- Guest Assessment/Needs
- Educational Needs for UP Students

BLANCHET HOUSE NURSE MANAGED HEALTH CENTER: Pilot Launch

Phase 1

- Acute Care of Minor Illness and Injury via Telemedicine: Providence Express Care Virtual
- University of Portland School of Nursing: Undergraduate Students on-site
- Go Live: November 1, 2018

Phase 2

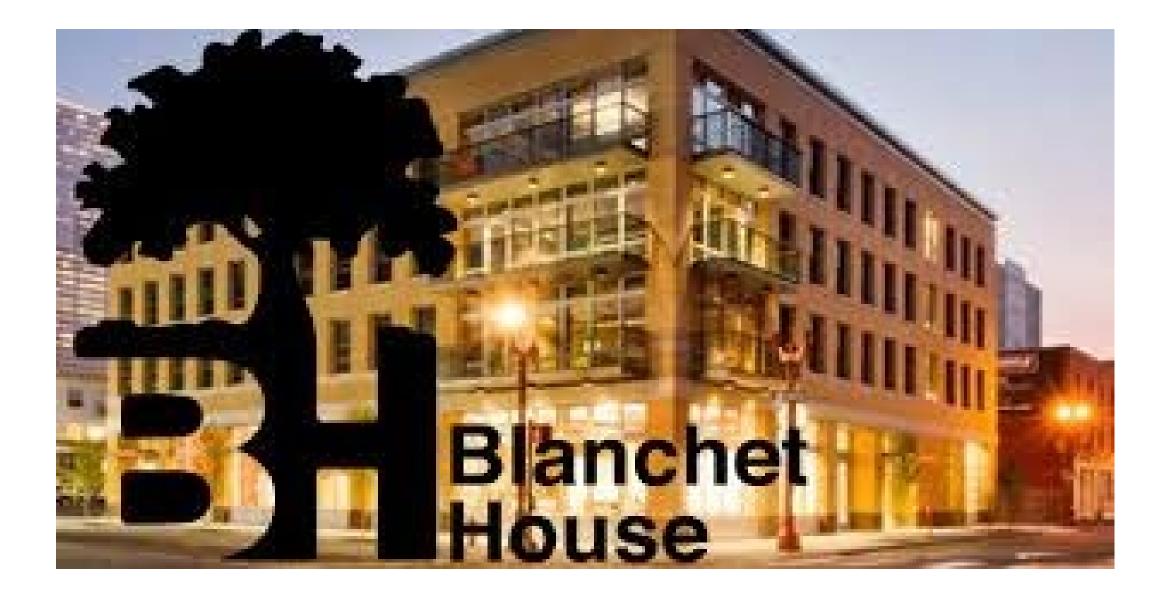
- Primary Care Services via Nurse Practitioner
- University of Portland School of Nursing: Graduate Students on-site
- Go Live: Winter 2018-2019



POWER OF PARTNERSHIPS: Disruptive Innovation

- 3 Goals of **Disruptive Innovation**
 - 1. Accessible, high quality, cost effective care of vulnerable population
 - 2. Innovative teaching-learning environment
 - 3. Promotion of the nursing profession





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