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Team Based Diabetes Care

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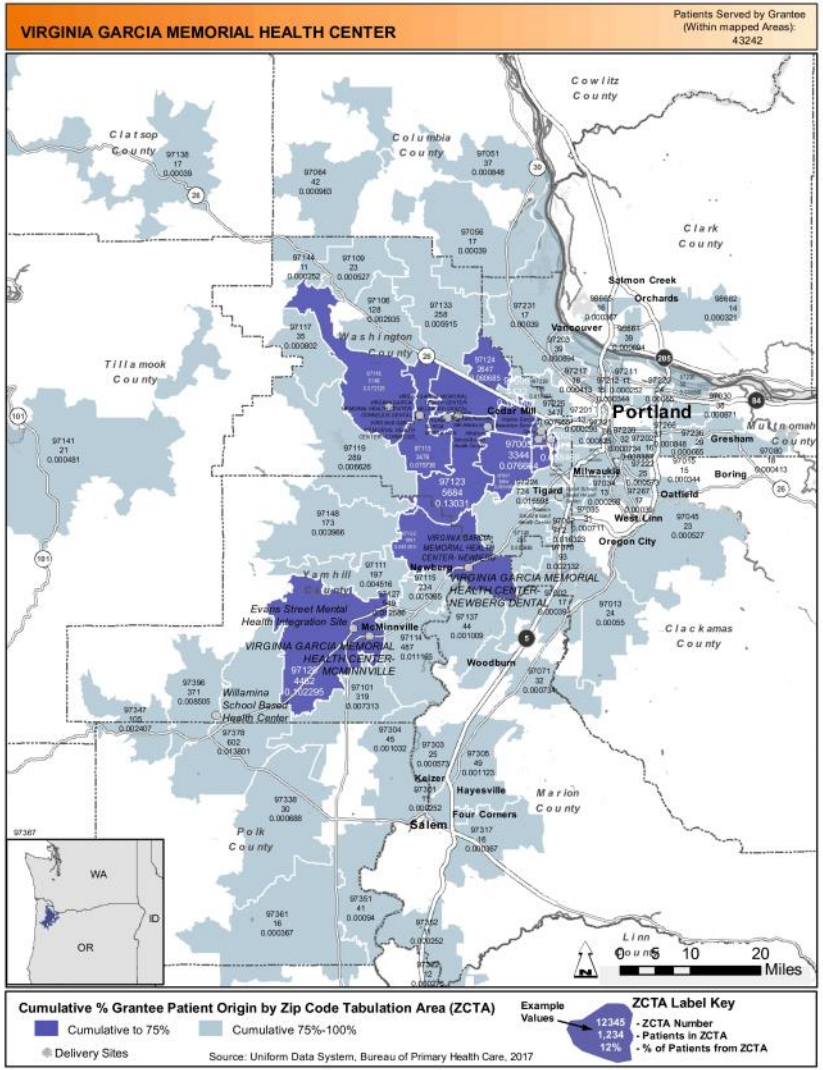
Eva Galvez, MD
Family Physician

Kevin Alfaro-Martinez
Primary Care Community
Outreach Worker



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Development of the Care Team

2007

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Care Teams Initiated

A referral coordinator, patient care coordinator, nurse, 2 FTE providers

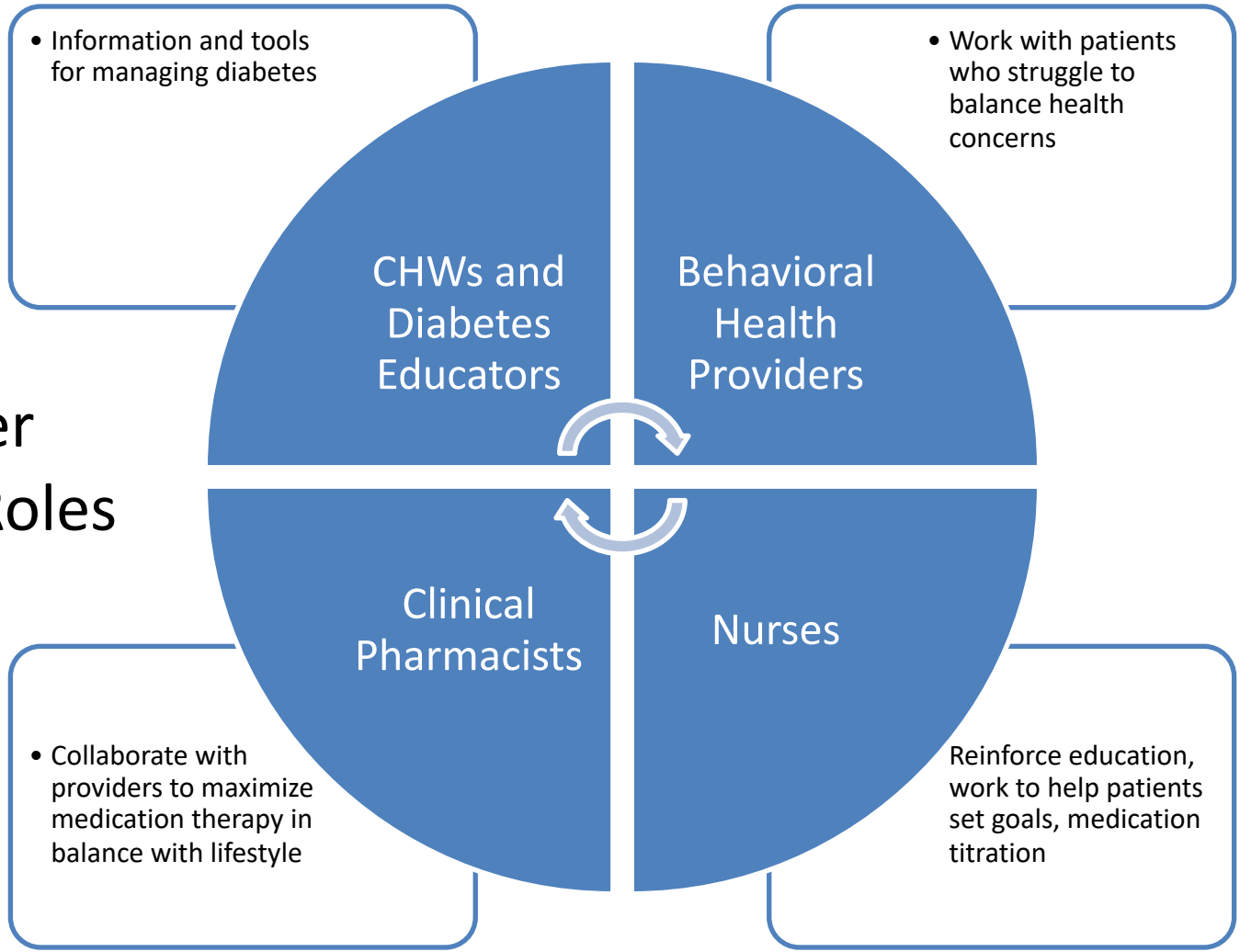
Additions

Clinical pharmacists and behavioral health providers

More recently…

Community Outreach Workers and more structured patient self-management programs

Non-Provider Care Team Roles



Referrals

- Referrals to clinical pharmacy and behavioral health are ordered in the patents chart and involve warm-handoffs.
- Others through chart routing and staff messaging
- CHW involved in warm hand-off referrals

Role of the Community Outreach Worker

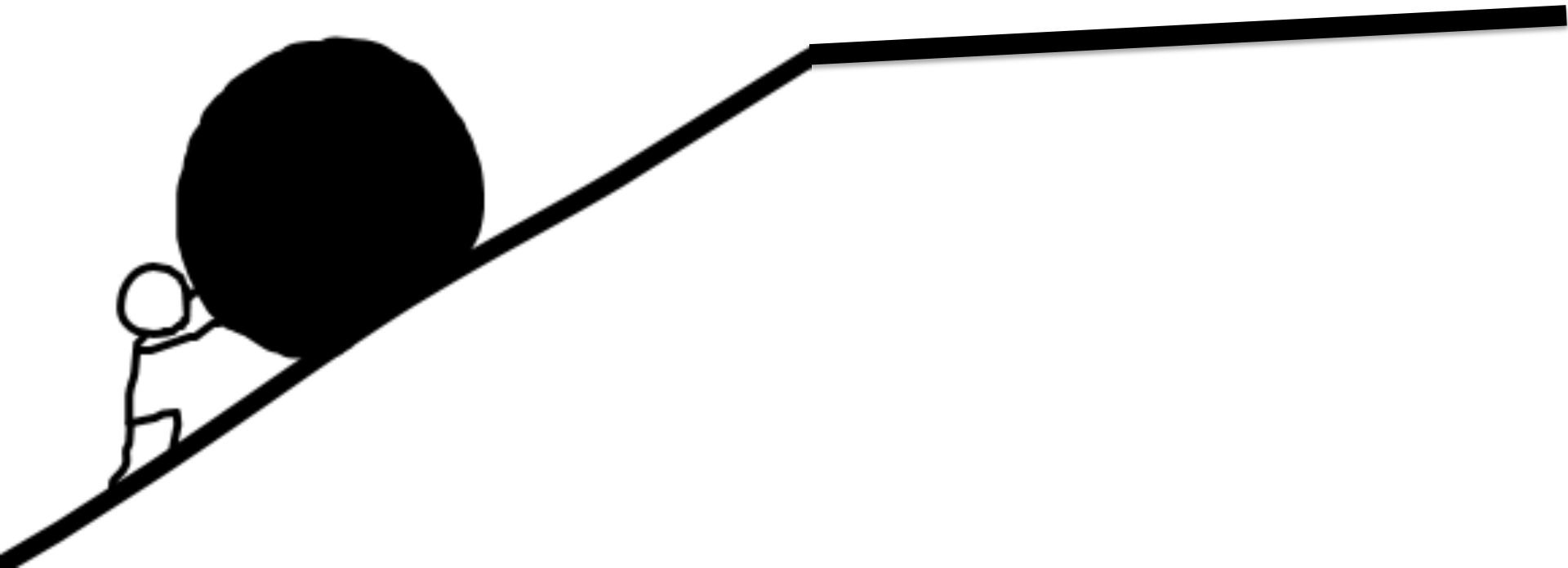
CHW Supervision and Support

Work independently for day-to-day activities.	Report directly to the Clinic Manager and meet once a month.	Share cases with social workers and the Behavioral Health manager for guidance and advice	New CHWs shadow more experienced CHWs.	Standardized documentation and work with the Operations Manager to ensure work is within scope of practice.

Other CHW Considerations

- Standardization of work and documentation is critical.
- CHWs should network with other agencies that provide services
- Consider panel size for CHWs (at Virginia Garcia two CHWs see approximately 100 patients/month)
- Avoid promising too much, remember that CHWs cannot solve all patient problems.

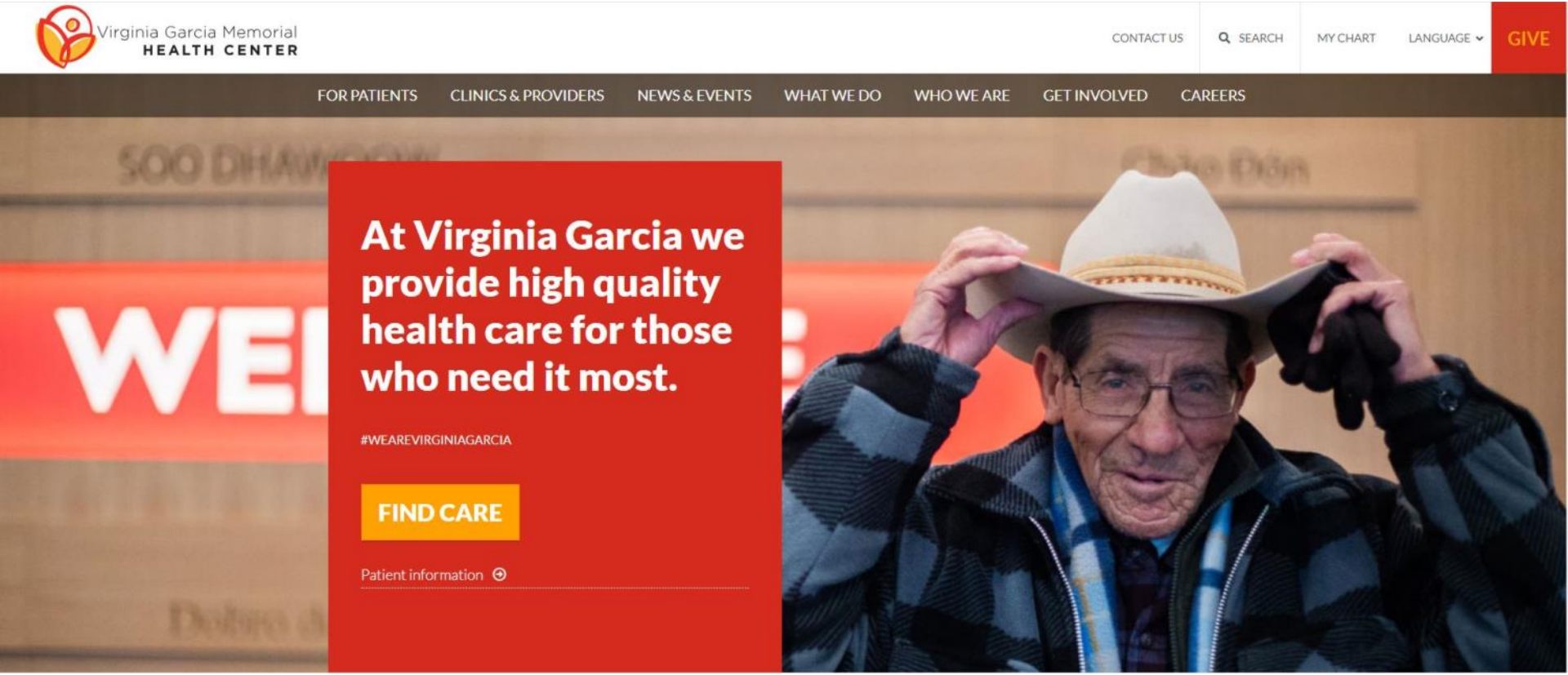
Diabetes Care Team Challenges



Pitfalls and Solutions

Knowing when patients are ready to engage with support and remembering who and how to refer	Early involvement of behavioral health (especially for patients with A1c >9).
Clinical pharmacy struggled with large number of referrals for low-risk, low-complexity patients	Changed to referral protocol to patients with complex medication regimens including insulin.
Low attendance and no-shows to diabetes education classes.	Continuing to explore how to address this issue
Patient life circumstances make it difficult to maintain them in care (homelessness, lack of communication and/or transportation)	Better accommodating same-day patients and bundling services (provider, referrals, labs, pharmacy, and social services)

Has Virginia Garcia seen improvements since implementing team based care?



https://virginiagarcia.org/

Questions and Discussion