

# Concept Feedback Survey Results

based on 35 complete responses: 18 HCMC, 14 community org/gov., 3 other

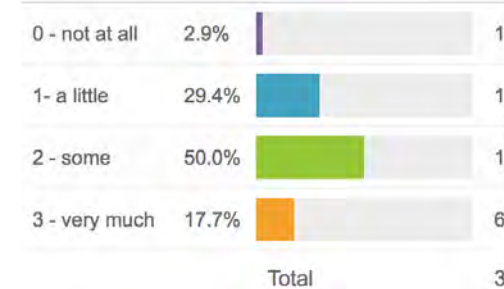
## Service Prescription



Clinics install health-related infrastructure and offer it to Members by Service Prescription. The provider is able to offer an immediate short-term solution, supporting Members to follow medical advice even when they lack access on their own. Use may be linked to pre or post appointment, to incentivize attendance.

## How much would this help Members?

**17%** say very much



“This will help those who are not too busy or too far away to visit the clinic regularly. I'm worried about whether this would be providing hope that would be unfulfilled. This would only work if we have the capability to seamlessly connect the individual to those services. This is complex and hard to guarantee. This feels like a bandaid on the bigger issues of poverty, not that we shouldn't try to meet the immediate issues.”

Recommend to

cut

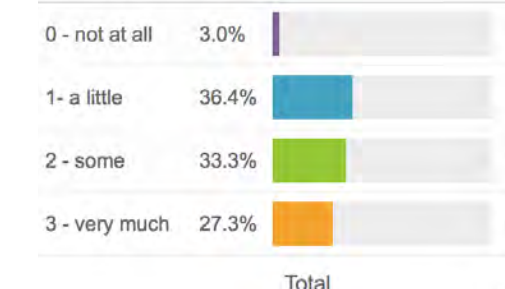
## Main Street



Main Street is a collection of businesses and services conveniently located within the HCMC hospital or clinics. Tailored to Members' needs, these could include mailboxes, computers, banking, phone services, legal services, and bill pay. Co-location can make use of waiting time and incentivize visits.

## How much would this help Members?

**27%** say very much



“Making HCMC as a nucleus for the local community to WANT to gather at makes sense. I have long brought up the idea of having branch businesses run by HCMC that will draw people here for other reasons and make them want to linger on campus. Would take a lot to implement and would think of this as a long term strategy. Need to coordinate movement of people & security for hospital. not much use in the library now for some of these sorts of services.”

Recommend to

cut

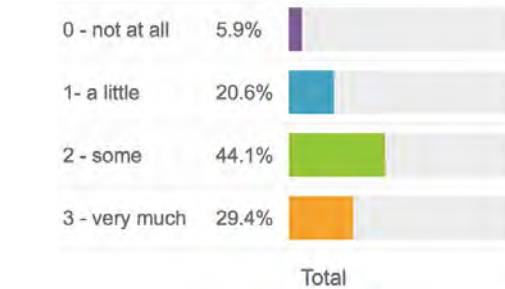
## Story Scribe



A Story Scribe is a professional who listens to Members, captures their life experiences, and translates that information into forms to be shared with providers. Conversation happens in a homey environment, before each health appointment. Members only have to tell their full history once, and can be confident it's shared with the right members of their team. Scribes can prompt for feedback and reflection on progress.

## How much would this help Members?

**29%** say very much



“This would be extremely useful and reduce the repetitiveness for the client in answering the same questions over and over again. However, based on my experience, sometimes clients will add to or change their responses with different interviewers. I have little confidence that this will result in members not having to share their stories multiple times. If providers don't visit the chart or have time prior to the visit to review a history now, they won't do it to read through this. Very complex to arrange this, how to house it, how to update when story changes, who has ownership (maybe the member?)”

Recommend to

fold into Care Team

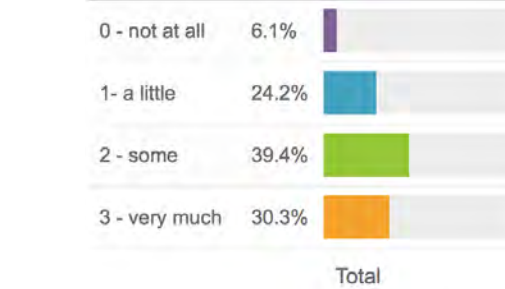
## The Parlor



The Parlor is a store-front space in a neighborhood, offering socializing and programming sponsored by HCMC and community partners. These opportunities offer an easy and personalized way for Members to contribute and feel more valued: helping out others, exploring an interest, spending their time with purpose. The system coordinates between Members, providers, and organizations, smoothing any barriers to participation and making contributing seamless.

## How much would this help Members?

**30%** say very much



“I like this but am worried about the logistics. Staffing without a billing or payment source is very difficult. HCMC has not typically financially supported interventions that are not billable. Depends on location and accessibility. Encourage building on what already exists in the community. I haven't seen this sort of programming work for chronic disease management at HCMC, members lives are scattered for set programming. Most important to feel part of the community”

Recommend to

test offers gateway to healthcare engagement

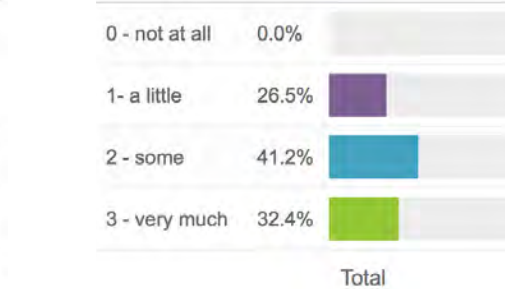
## Members Give Back



Members Give Back is a system that curates relevant community volunteer opportunities and paid gig-based work and matches them with Members based on interests and availability. These opportunities offer an easy and personalized way for Members to contribute and feel more valued: helping out others, exploring an interest, spending their time with purpose. The system coordinates between Members, providers, and organizations, smoothing any barriers to participation and making contributing seamless.

## How much would this help Members?

**32%** say very much

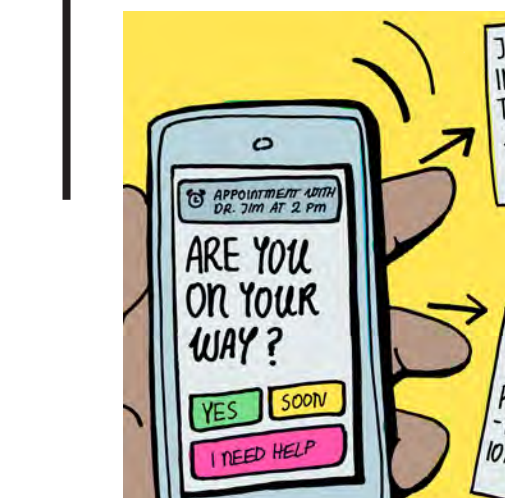


“New studies show volunteerism, and other forms of generosity, important to healing and well being. I love the idea of tapping into people's interest in meaningful time and work. What needs do we have within HCMC that patients/families could help fill? very difficult to implement. Would be more helpful if it also provided work opportunities that would qualify as STS”

Recommend to

fold into Resource & Referral Engine

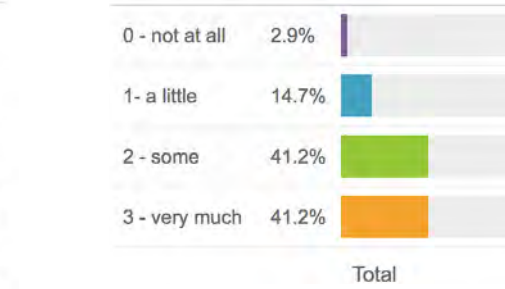
## Reminders for Life



Reminders for Life is a system of text or phone call reminders for Members, set up by request, that also offers "on-my-way check-ins." Providers or community partners can input reminders via an app or website, for things like appointments, taking medicine, job interviews, meetings, and wake-up calls. Members are pinged at the set time and offered an option to connect if they need help or a change of plans.

## How much would this help Members?

**41%** say very much

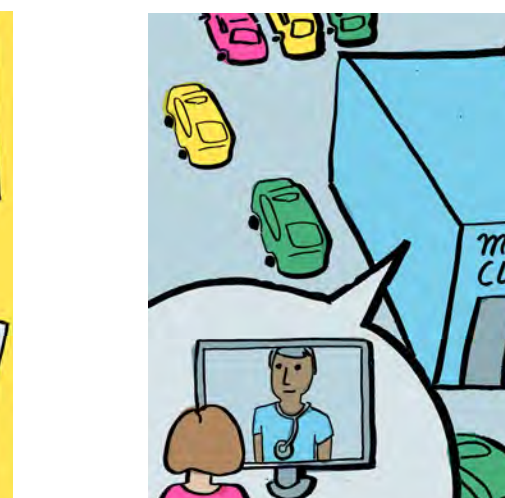


“Great way to keep patients aware of appointments, medications, therapies, etc. It is only helpful to individuals who have a cell phone and ability to keep their phone charged. We just need to better tailor the existing text reminder model. This is innovative and is a great use of existing technology that can help our patients with compliance and us with efficiency. Allows member to get quick answers to problems and determine if they need to spend the time necessary to go to the emergency department.”

Recommend to

test combine with Pop-Up Clinics

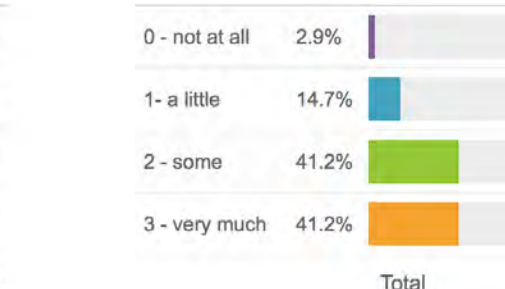
## Micro-Clinics



Micro-Clinics serve as HCMC's "front doors" across the city and connect Members with doctors and nurses via telemedicine. The many locations emphasize low-access neighborhoods and are co-located with existing gathering spots (e.g. church parking lot, McDonald's). Minimal staff supports video connections to available doctors and nurses, offering convenient and immediate attention.

## How much would this help Members?

**41%** say very much

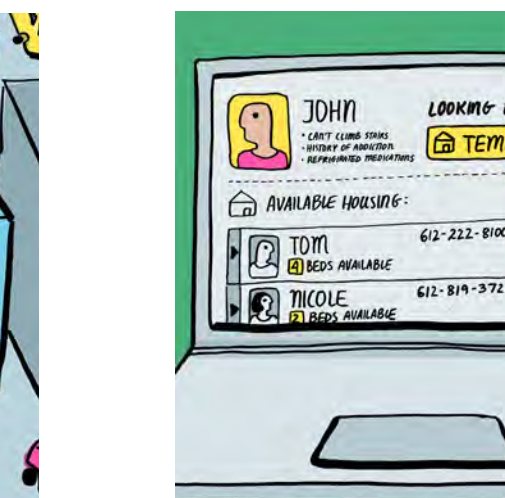


“Going into the community to provide care has been shown to be effective on many levels. Would this be for urgent needs or routine care? How does this align with the need for consistency in the care team? Interesting idea, sounds massively expensive. Putting equipment and vying for space in low-access neighborhoods is going to guarantee vandalism and theft. This is done- the county has an assessment, United Way First Call for Help, Handbook of the Streets. The databases are really hard to maintain and is a fulltime job. I think it would be better to work on accessing and connecting with an already created database.”

Recommend to

test combine with Pop-Up Clinics

## Resource & Referral Engine



The Resource & Referral Engine is a digital tool that allows any provider, organization, or members themselves to find the most relevant resources, at the click of a button. The system combines information from a Member's profile with real-time data from resource agencies, and tailors and accurate. Referrals are managed to ensure warm handoffs and follow through.

## How much would this help Members?

**45%** say very much



“This would be powerful if it was fully connected to the county and partner agencies that could act on the referrals and close the communication loop. Addresses the issues immediately most complicated members know about the resources it is getting access to them (transportation, completing applications, follow up, etc) that they lack assistance with. This is done- the county has an assessment, United Way First Call for Help, Handbook of the Streets. The databases are really hard to maintain and is a fulltime job. I think it would be better to work on accessing and connecting with an already created database.”

Recommend to

test combine with Pop-Up Clinics

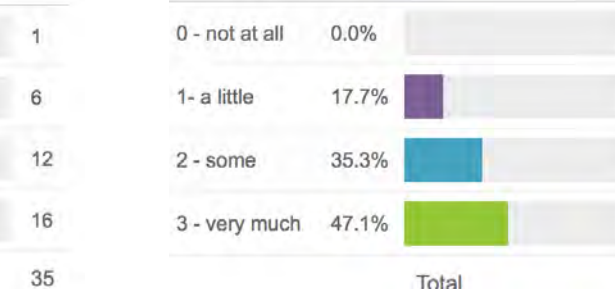
## Priorities Conversation



Priorities Conversation is a protocol and visual tool for Members to share their short and long-term context with their provider. When they arrive for an appointment, Members receive a set of pre-printed and blank Priority Pieces. Members may choose the pieces which best describe their priorities and display these in their exam room. Providers then facilitate a conversation with the Member about each priority. Members build engagement by feeling heard and providers gain insight into their motivations and decision making, allowing for more tailored care.

## How much would this help Members?

**47%** say very much



“Most important is allowing time for the conversation. The conversation seems more important than the tool. I like this- simple, sustainable, low cost, reinforces the importance of listening and asking questions to the provider. nice idea, who is accountable? Patient or Provider? Might combine this with a burden of treatment approach or minimally disruptive medicine what are their personal barriers. This gives members a new way to communicate and will help providers see that the services they provide may not address the member's highest concerns.”

Recommend to

test

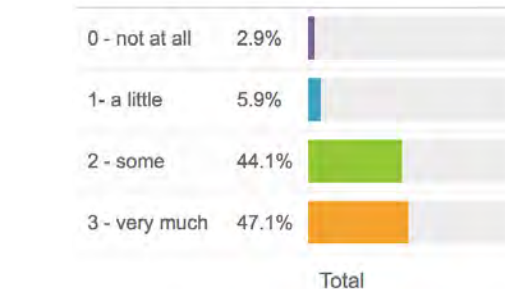
## Pop-Up Clinics



Pop-Up Clinic is a 24-hour mobile care center that can address primary and urgent-care needs at neighborhood sites. It may pop up during regularly scheduled hours at community partner locations or respond dynamically to needs around the city. The location and availability are communicated via text message and social media. The team has access to standard clinic equipment, including X-ray and lab.

## How much would this help Members?

**47%** say very much



“Excellent - how about if the mobile food truck partners with it. Given the chaotic, unscheduled nature of patients lives, a pop up clinic could be amazing (if the timing/location was understood) or terrible as it would be just another sporadically available service that didn't meet the convenience/access that our patients need. to add x-ray may make the truck concept very cumbersome and expensive. This would be great at the local shelters, after hours. It would have to be either on-demand or very well scheduled, maybe beyond social media, so that individuals could count on it.”

Recommend to

test combine with Micro-Clinics

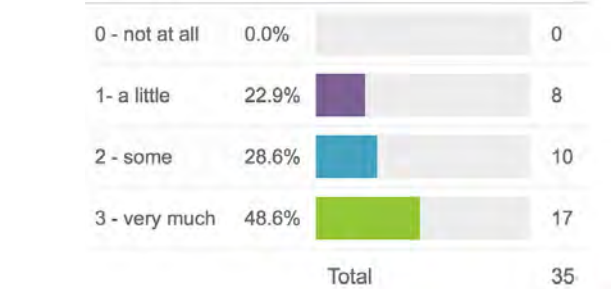
## Personalized Welcome & Check-Out



Personalized Welcome & Check-Out is a tool and protocol to support clinic front desk staff in tailoring the first and last moments of a Member's visit to their needs. This is a Member's first call when a need arises, getting to the front desk, review of prescription pick-up plan at exit, first visit introductions) and staff have the access and authority to address them before issues arise. These positive and personalized moments at both the start and end of a visit set Members up to feel well cared for, lays the foundation for trust building, and incentivizes their return.

## How much would this help Members?

**48%** say very much

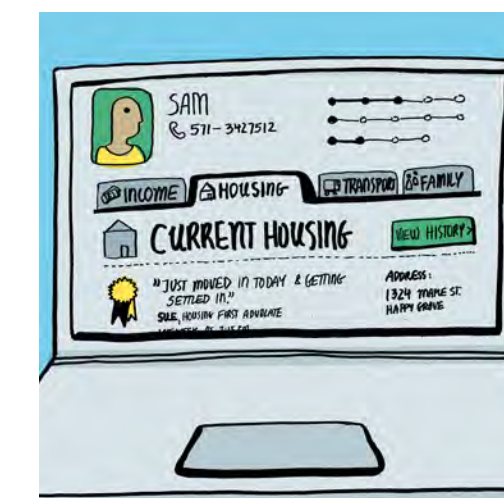


“I think we should do this for everyone. Especially for the frequent patient. And helpful to provide welcome and check out personnel with additional tools. Would have to be very careful about judgmental statements- I think a patient could easily feel anxiety that "everyone knows my business" or that they are being segregated or stereotyped. Staff would have to be well trained and need to know specifically how to respond to the information. This is something that other industries utilize and the downside I see to this is the technology cost for initial equipment and continuous upkeep and maintenance.”

Recommend to

test

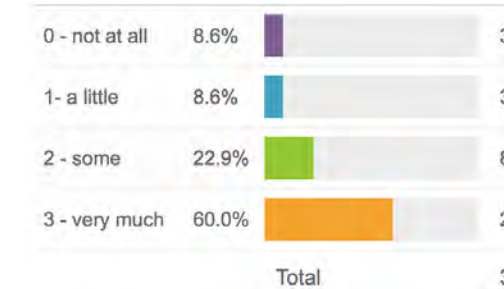
## Social Determinants Dashboard



The Social Determinants Dashboard is a shared record system for HCMC providers and community partner organizations. Anyone working with a Member can read and add notes to their log, removing knowledge silos and facilitating coordination across agencies. A Member's current challenges as well as successes and progress can be viewed at a glance.

## How much would this help Members?

**60%** say very much



“Great way to coordinate services across the spectrum. Very few people have time to "blog". This would seem to add only another layer of busy work on the computer to our daily work routines. I think some members will be very worried about who gets to see what information. With Chemical health programs having to conform to not only HIPAA but Rule 42 as well, this may cause some issues. As a provider, it would be nice to know some of these things that my patient may not share during their visit.”

Recommend to

test

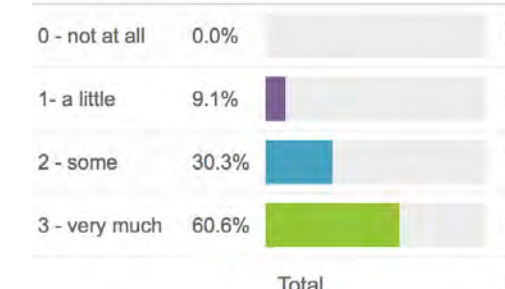
## Point Person



A Point Person is a remote or in-person support professional who provides one-stop customer service, across a spectrum of resources (e.g. health, housing, basic needs.) This is a Member's first call when a need arises, getting to the front desk, review of prescription pick-up plan at exit, first visit introductions) and staff have the access and authority to address them before issues arise. These positive and personalized moments at both the start and end of a visit set Members up to feel well cared for, lays the foundation for trust building, and incentivizes their return.

## How much would this help Members?

**60%** say very much

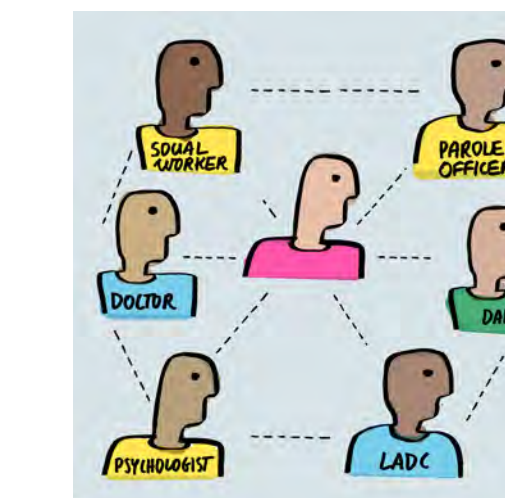


“model of Community Health Workers - could this not be expanded? Could be very helpful, but very difficult to train and keep a point person to meet the needs. How is this the same or different than a care coordinator? Watch for many people involved in care coordination and role confusion. While I like this idea (kind of like citywide 311 services), I doubt we have the ability to deliver. We have tried something like this with our "Call Center" and in my opinion, after 7 years of continuing to try to make this better, we still haven't figured it out well enough to make it bulletproof.”

Recommend to

test

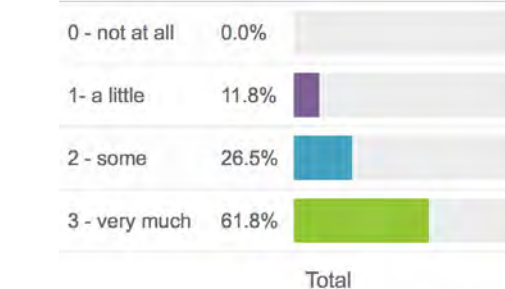
## Care Teams



Care Teams bring together professionals across industries (e.g. health, social services, legal) to provide coordinated, tailored care for each Member. The team may coordinate remotely, but Members meet each in person and receive an introduction to the team as a whole. Teams form relationships with Members and build in redundancy and warm handoffs if transition is necessary.

## How much would this help Members?

**61%** say very much



“I think getting all team members to coordinate will be a challenge, but if it happens the results would be great. expensive and time consuming, but used to work well when everyone's caseloads were smaller: wraparound, ACT teams etc. supposed to work like this. This is very much what Henn Health has been trying to accomplish, many of the HCMC staff agree this is the right way to provide care to members with complex needs. Health Information exchange with other organizations is a huge barrier. Yes please!!!”

Recommend to

test

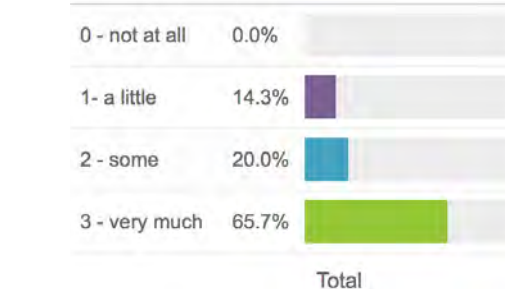
## "Uber" Health



"Uber" Health is a network of cabs that Members can request in the moment and track as they approach. Requests and real-time tracking happen via text message or an app. Like medications today, membership is verified and payment is covered. In-the-moment booking and real-time tracking offers Members reliable transportation to and from appointments exactly when they need it, decreasing anxiety and eliminating today's taxing cancellation penalties. Members can also choose to check in to appointments on route.

## How much would this help Members?

**65%** say very much



“Transportation is a major issue for our patients. There are so many problematic logistics to this. While I like the idea, there are any state regulations re: transportation and contracting with providers, I think this would be very hard to execute. Great idea. Put the tech requirements on the system and cabs, not the patient. In other words, make sure we create a model that doesn't expect/require patients to have any form of technology in order to participate with providers. Any backlash from our current taxi services providing medical rides?”

Recommend to

test

## Of the 15 ideas we shared, which would you most strongly recommend we pursue?

care teams	48.4%	15
pop-up clinic	45.2%	14
point person	35.5%	11
"Uber" health	35.5%	11
resource & referral engine	35.5%	11
social determinants dashboard	35.5%	11
micro-clinics	35.5%	11
priorities conversation	32.3%	10
reminders for life	32.3%	10
members give back	22.6%	7
personalized welcome & check-out	22.6%	7
the parlor	22.6%	7
main street	16.1%	5
story scribe	12.9%	4
service prescription	9.7%	3
<b>Total</b>		<b>31</b>