Novel Interventions in Children’s Healthcare (NICH)

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Disclosure

☐ Nothing to disclose
NICH

☐ NICH or Novel Interventions in Children’s Healthcare is the intellectual property of Drs. Michael A. Harris and Kim Spiro.

☐ While not trademarked, a tech transfer application has been filed with the OHSU Office of Technology Transfer by the NICH program principals, Drs. Michael A. Harris and Kim Spiro.

Medicaid and CHIP

☐ Top decile of spending accounts for 72% of all healthcare spending

☐ Top three deciles of spending accounts for 90% of all healthcare spending

☐ 30% of children enrolled receive no medical services

☐ Of the children in the top decile of spending, 84% are children with chronic health conditions
Bending the Curve

- 4% of patients utilize 50% of medical resources
- Triple Aim:
  - Reducing costs
  - Improving health
  - Improving care

WHAT (Info & Resources)

HOW (Behavioral Interventions)

WHY (Social Ecology)
Who is NICH (worthy)

Socially Vulnerable
- Ethnic Minorities
- Immigrant Families
- Low Education
- Low Income
- Rural
- Non-English Speaking
- Lack Support
- Single Parent
- Insecure Housing
- Food Insecurity

Medically Vulnerable
- Chronic Health Condition, Medical Complexity, and/or Special Health Care Needs
  - High Cost
  - High Utilization
  - Multiple Medical Conditions
  - Adolescents
  - Infants and Neonates
  - Mental Health Issues
  - Substance Abuse

NICH

Health Affairs, Vol 31, No 8, 1777-1785, 2012
NICH in the Context of Existing Resources

Chronic Illness, Complex Medical Conditions, Special Health Care Needs

NICH (plus Tier 3)
1% - youth, (Tier 4 or 25% of expenditures for Medicaid)

PCPs, Specialty Docs, Medical Social Workers, Care Coordinators, Home Health Nurses, Community Health Workers, and Behavioral Health Providers

12% - youth (Tier 2 or 12% of expenditures for Medicaid)

PCPs, Specialty Docs, Medical Social Workers and Behavioral Health Providers

4% - youth (Tier 3 or 23% of expenditures for Medicaid)

PCPs

1% - youth, (Tier 1 or 40% of expenditures for Medicaid)

The NICH Model

Youth and Family

Strategic Family and Systems Interventions
24/7 Real-Time Access
Problem Solving
Proactive Skills Training
Therapeutic Support
Family and Systems Change Management
Role Stratification

Health Systems Integration and Patient Needs Alignment
24/7 Real-Time Access
Liaison with Healthcare Team and PCPs
Navigate Healthcare System
Transport to Clinic
Medical Supplies
Attend Clinic Visits, ED Admits and Hospitalizations

Resource Access for Family and Patient Optimization
24/7 Real-Time Access
School and Juvenile Justice Interface
Child Protective Services
Obtaining Drug/Alcohol Treatment
Address Food, Housing and Economic Insecurity
Navigation Across Cultural and Language Barriers
Why NICH?

8760 Hours in a Year

- Other Hours of Living
- Hours with Health Care Providers

Medical Complexity

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Social Complexity

- Truant/Not in School
- CPS/DHS Involvement
- Food Insecurity
- Unreliable Transportation
- Limited Support Family/Friends
- Unemployed/Underemployed
- Insecure Housing
- Single Parent
- Caregiver w Medical Condition
- >20 miles from Hospital

Reducing Costs

- Average Yearly Cost per Patient
  - Before: $35,000.00
  - During: $15,000.00
  - After: $0.00
Improving Care

Days Hospitalized per Year

Prior to NICH | During NICH | After NICH
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NICH Today

- **Ongoing contracts**
  - CareOregon
  - WV CCO
  - Trillium CCO
  - AllCare CCO

- **Single-case allowances**
  - MODA Health
  - Kaiser
  - CUP Apple (Washington Medicaid)

- **Counties Served**
  - Multnomah
  - Washington
  - Clackamas
  - Marion
  - Polk
  - Lane
  - Douglas
  - Josephine
  - Jackson
NICH Today

☐ Patients and Staffing
  ☐ 160 youth served or being served since Dec of 2011
  ☐ 10 Interventionists
  ☐ 3 Clinical supervisors
  ☐ 3 New referrals per day

☐ Research
  ☐ 4 Peer-reviewed publications
  ☐ 2 Manuscripts in press
  ☐ 4 Manuscripts in preparation

☐ Outside of Oregon
  ☐ The Foundling (NYC)
  ☐ Stanford
  ☐ Texas Children’s Hospital

☐ Awards
  ☐ 2015 Clinical Innovation Award (AAMC)
  ☐ 2015 EPIC Award
  ☐ 2016 EPIC Award

Keys to Success

☐ Patient Engagement and Building Relationships
☐ Tackling Social Determinants of Health
☐ Bridging Silos
☐ House Calls
☐ Providing Real Time Access
☐ Harnessing Existing Resources
☐ Empowering Physicians (and Patients)
☐ Building Skills
Lessons Learned

- There are “no shortcuts.”
- Anyone can be a “SMART rat.”
- People are EXHAUSTED!
- Our healthcare system is broken.
- The answer isn’t medical.
- Relationships mean everything.
Identifying feeding difficulties

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