



The Art and Practice of Complex Care

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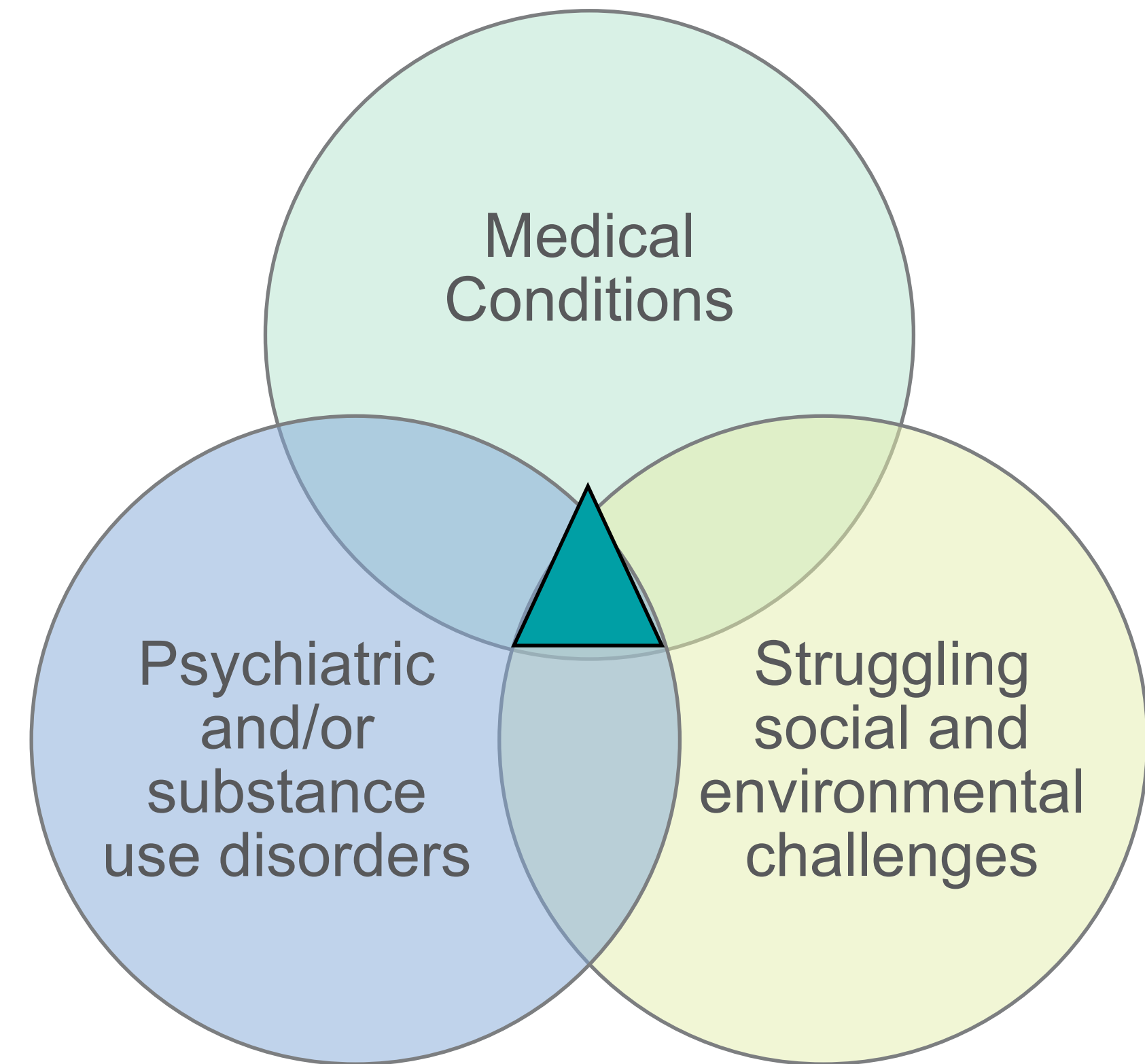


Agenda

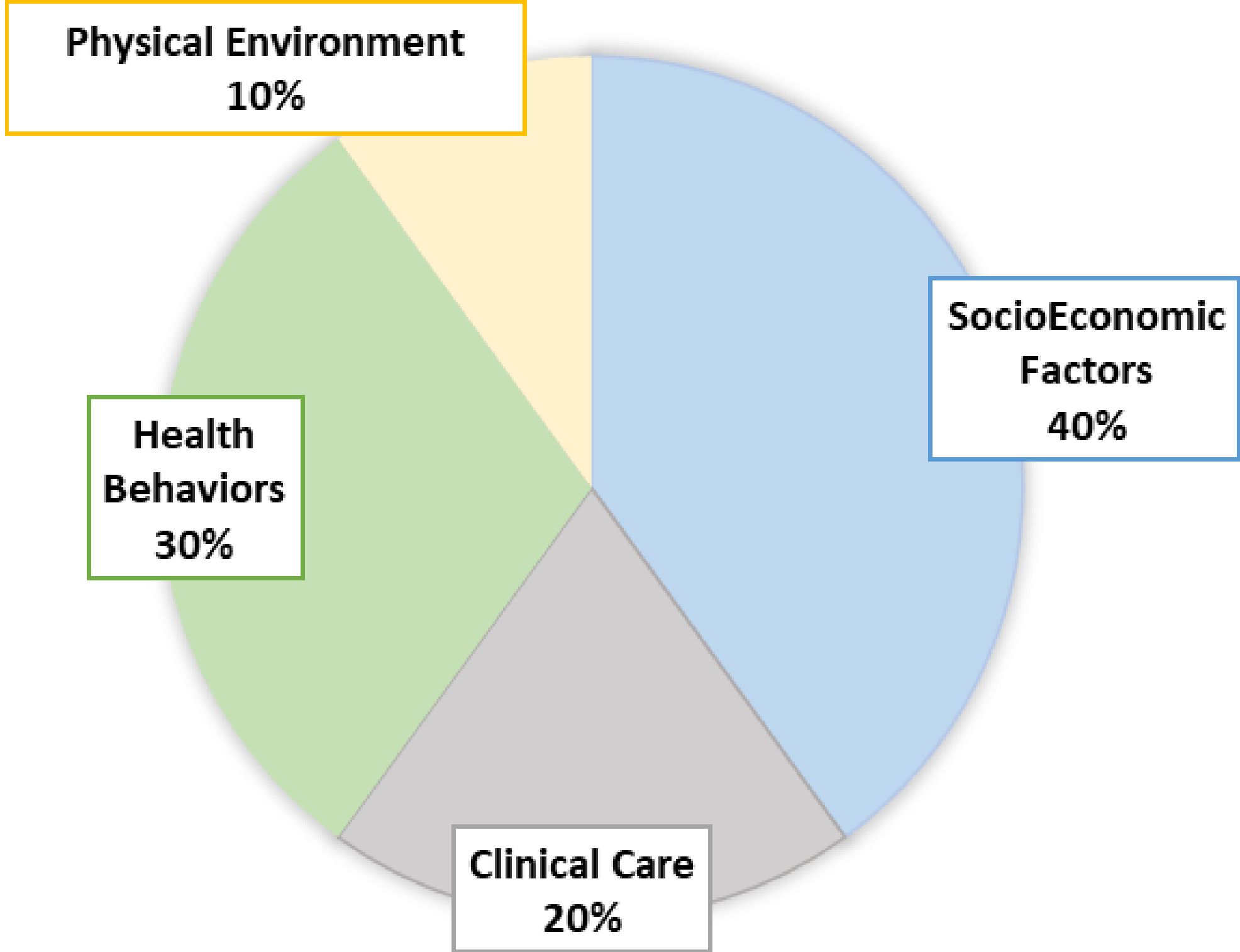
- Definition
- Components of complex care needs
- Goals of Complex Care
- Stories
- Creative care delivery programming

What is Complex Care?

- Definition
- Complex care in a person -centered approach to address the needs of people whose combination of medical, behavioral health and social challenges result in extreme patterns of healthcare utilization and cost
- -The National Center for Complex Health & Social Needs



FACTORS IMPACTING HEALTH



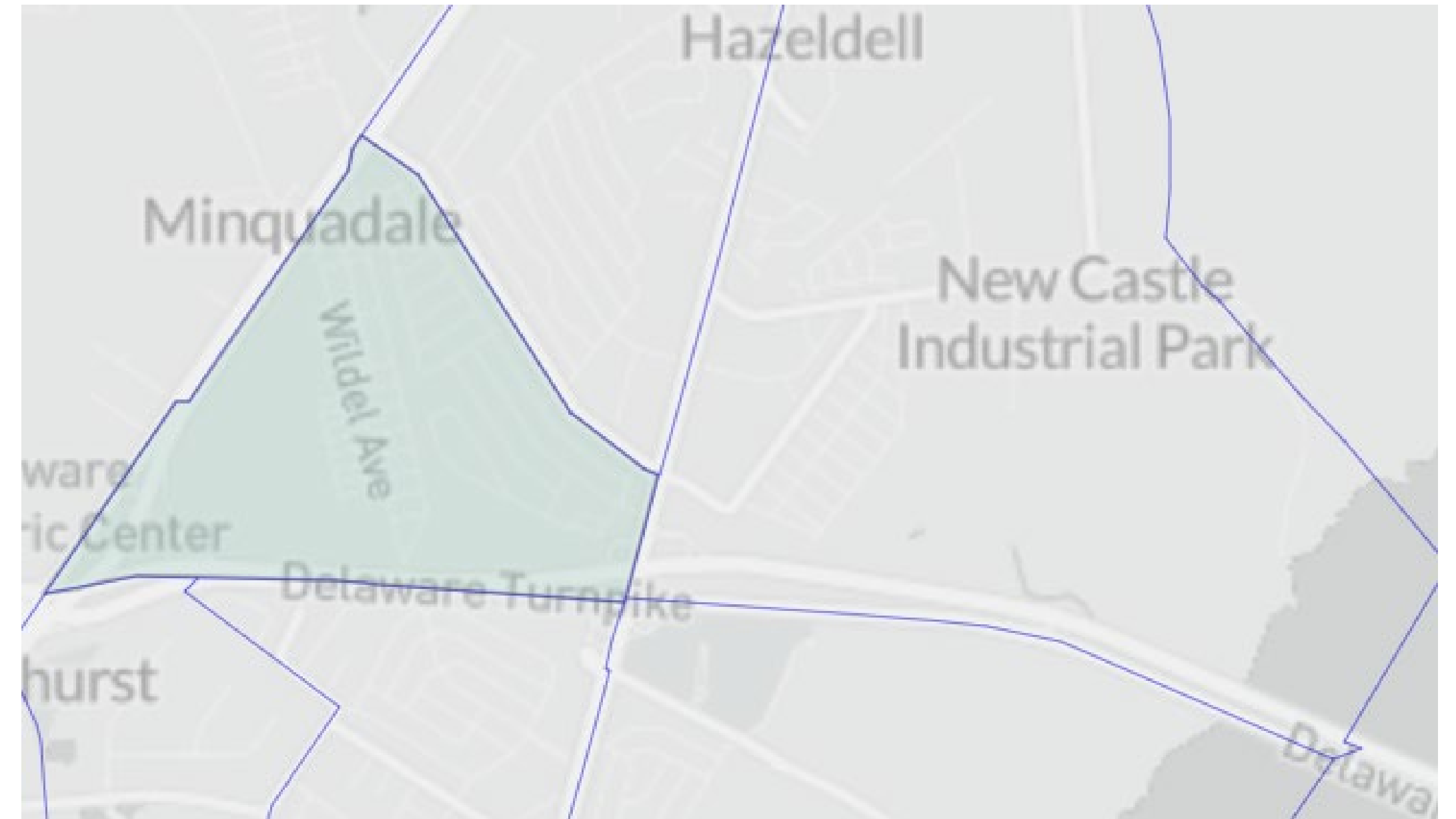
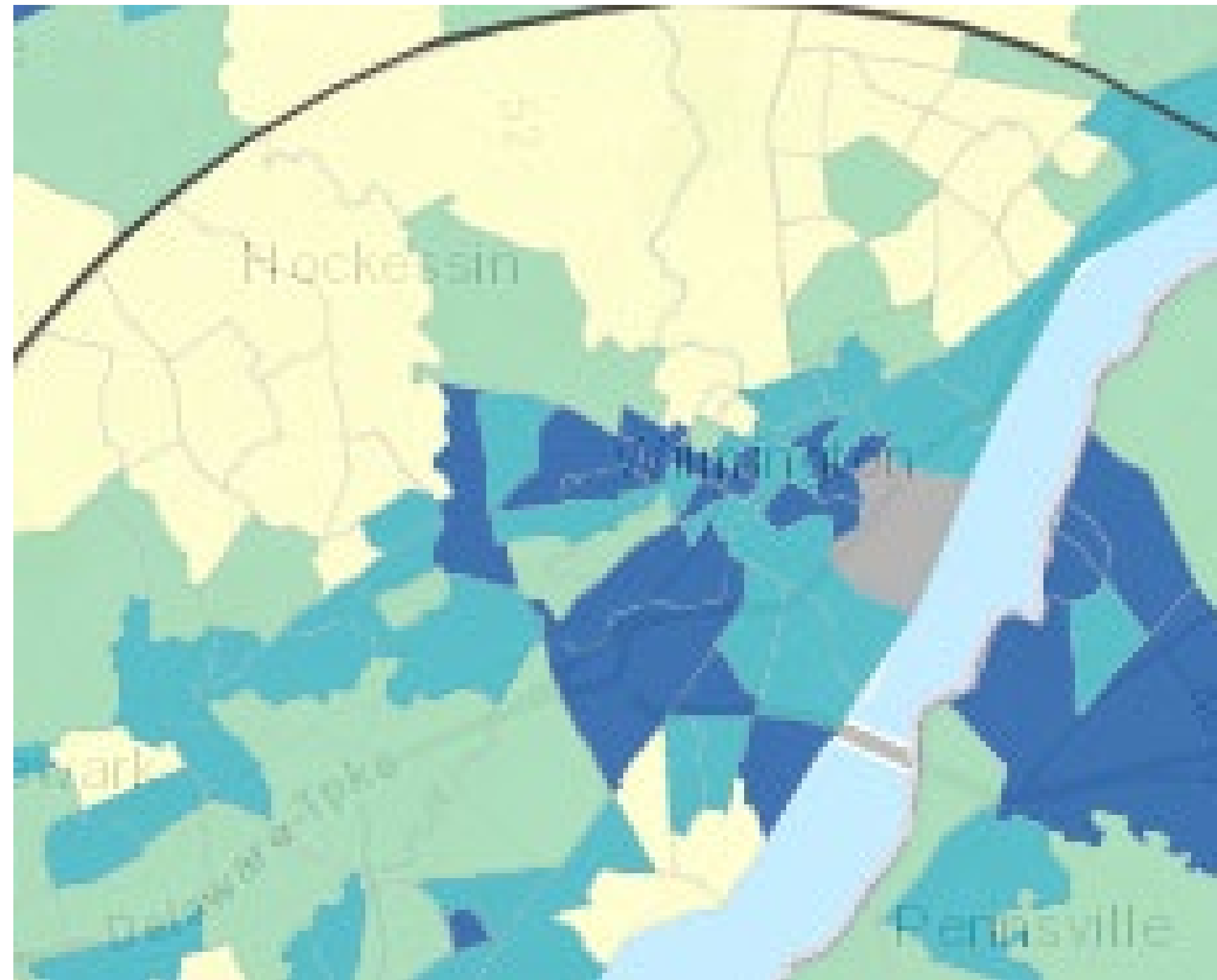


Social Determinants of Health

The conditions in the environments in which people are born, live, work, play, worship and age that effect a wide range of health risks and outcomes



Census Tract 156 - Extremely High social vulnerability





Delaware Census Tract 156

New Castle

Income

\$21,208

Per capita income

about three-fifths of the amount in New Castle County: \$37,532

about three-fifths of the amount in Delaware: \$35,450

\$52,522

Median household income

about two-thirds of the amount in New Castle County: \$73,892

about three-quarters of the amount in Delaware: \$68,287

3.3

Persons per household

about 25 percent higher than the figure in New Castle County: 2.6

about 1.3 times the figure in Delaware: 2.6

Poverty

13.3%

Persons below poverty line

about 20 percent higher than the rate in New Castle County: 11.4%

about 10 percent higher than the rate in Delaware: 11.8%

\$1767/mo

\$4376/mo

Person in Family/Household	Poverty Guideline/year	Per Month
1	\$12880	\$1073
2	\$17420	\$1451
3	\$21960	\$1830
4	\$26500	\$2280

Citation: U.S. Census Bureau (2019). *American Community Survey 5-year estimates*. Retrieved from *Census Reporter Profile page for Census Tract 156, New Castle, DE* <<http://censusreporter.org/profiles/14000US10003015600-census-tract-156-new-castle-de/>>



Tenants			
	Kent	New Castle	Sussex
2-Bedroom Rent (Fair Market)	\$812	\$1,077	\$750
Full-Time Minimum Wage Jobs Required	2.2	2.9	2.0
Affordable Rent (extremely low-income family)	\$468	\$603	\$464
Gap between Fair Market and Affordable Rents	– \$344	– \$474	– \$286

(See “About Cover Statistics” on back.)

\$1767-\$1077 = \$690/month for everything else

Annual Report on Housing Affordability in Delaware

housingforall.org | Delaware Housing Coalition | whynimby.org





Medical Conditions

- High blood pressure (stroke and heart disease)
- High blood sugar, diabetes (stroke, heart and kidney disease)
- Chronic Obstructive Pulmonary Disease –emphysema (smoking)
- Heart disease (see above all associated)
- Reduced access to medical care
- Reduced access to healthy food

Causes of Death

	City of Wilmington	New Castle County
Diseases of the heart	28.0	27.9
Malignant neoplasms (cancer)	20.8	24.3
Cerebrovascular diseases	6.1	6.1
Chronic lower respiratory	4.0	4.8
Accidents	3.8	4.2
Diabetes mellitus	3.7	2.8
Influenza & pneumonia	3.4	2.4
Alzheimer's disease	2.3	2.0
Septicemia	2.2	2.0
Nephritis, Nephrotic Syndrome, & Nephrosis	2.0	1.5
Other	23.7	22.1

Table 9.2. Cause of death as percentages of all deaths in the year 2002, for the City of Wilmington and New Castle County.

Source: Delaware Health and Social Services, 2004



Behavioral Health

- Commonly seen psychiatric disorders
 - Schizophrenia -break from reality; their interpretation of reality is not “normal”
 - Bipolar disorder -mania and depression swings
 - Post traumatic stress disorders from severe childhood and ongoing trauma
- Consequences of Uncontrolled serious mental illness
 - Stresses family, community and workplace relationships
 - Unable to keep employment
 - Frequent homelessness, near homelessness
 - Targets for others -robbery, assault
 - Unable to navigate traditional systems of help -healthcare, social
 - Stigma, Marginalization

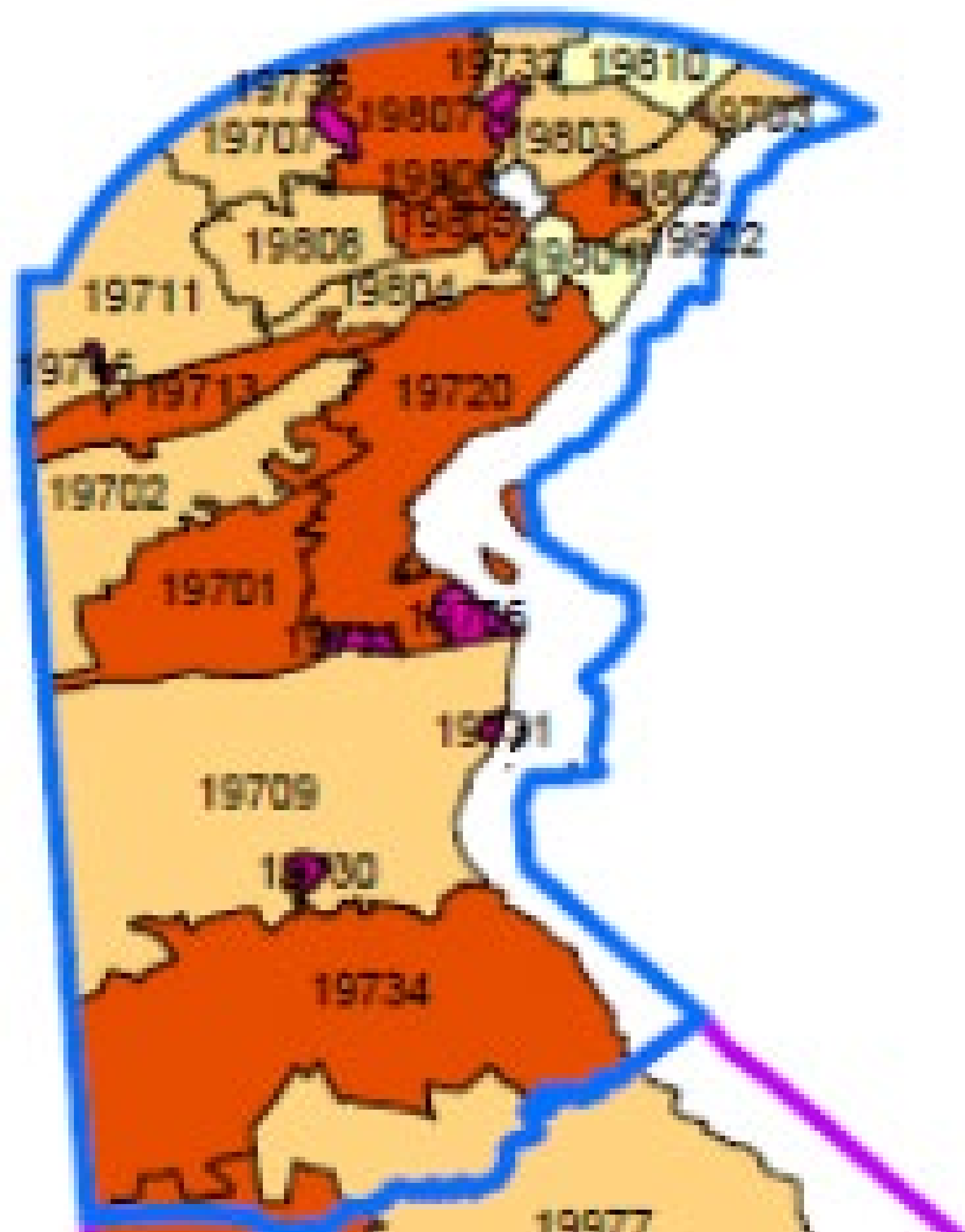


Behavioral Health

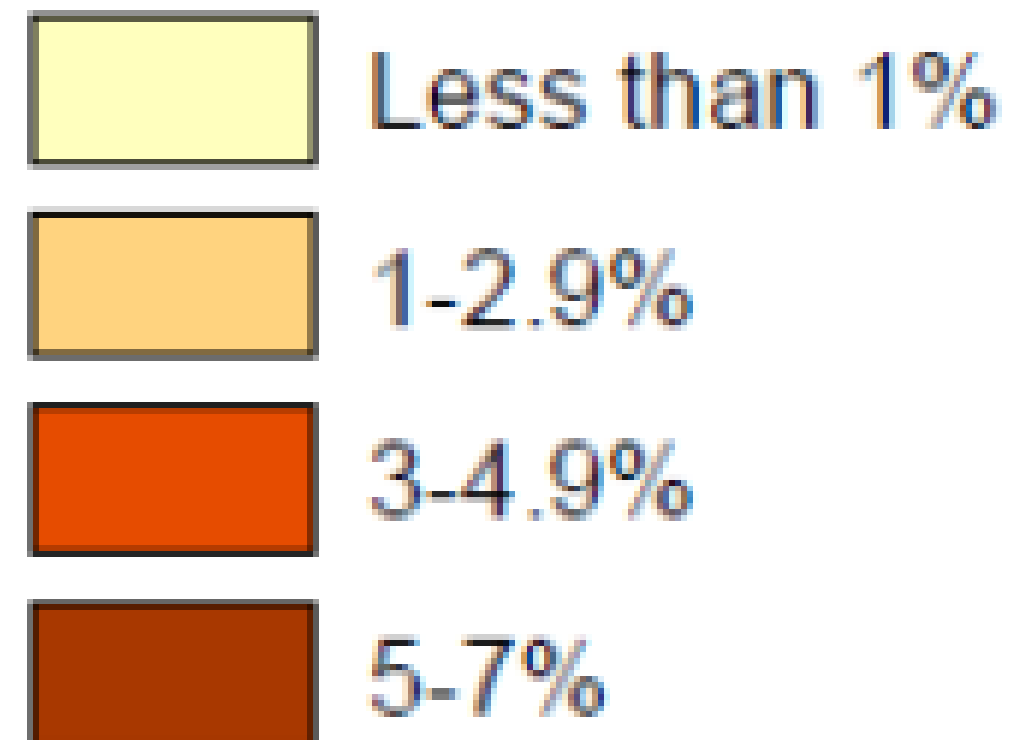
- Common Substance Use Disorders
 - Heroin
 - Street and/or prescription opioids
 - Intentional and unintentional fentanyl
 - Alcohol
 - Cocaine
 - Marijuana
- Consequences
 - Addiction focus on obtaining drugs to feel normal
 - Theft, sexual exchange for drugs
 - Overdose
 - Stigma and marginalization



Reported Past Year Prescription Pain Killer Use Without a Prescription Among Delaware 8th Grade Public School Students: 2016-2017



Rate of Pain Killer Misuse

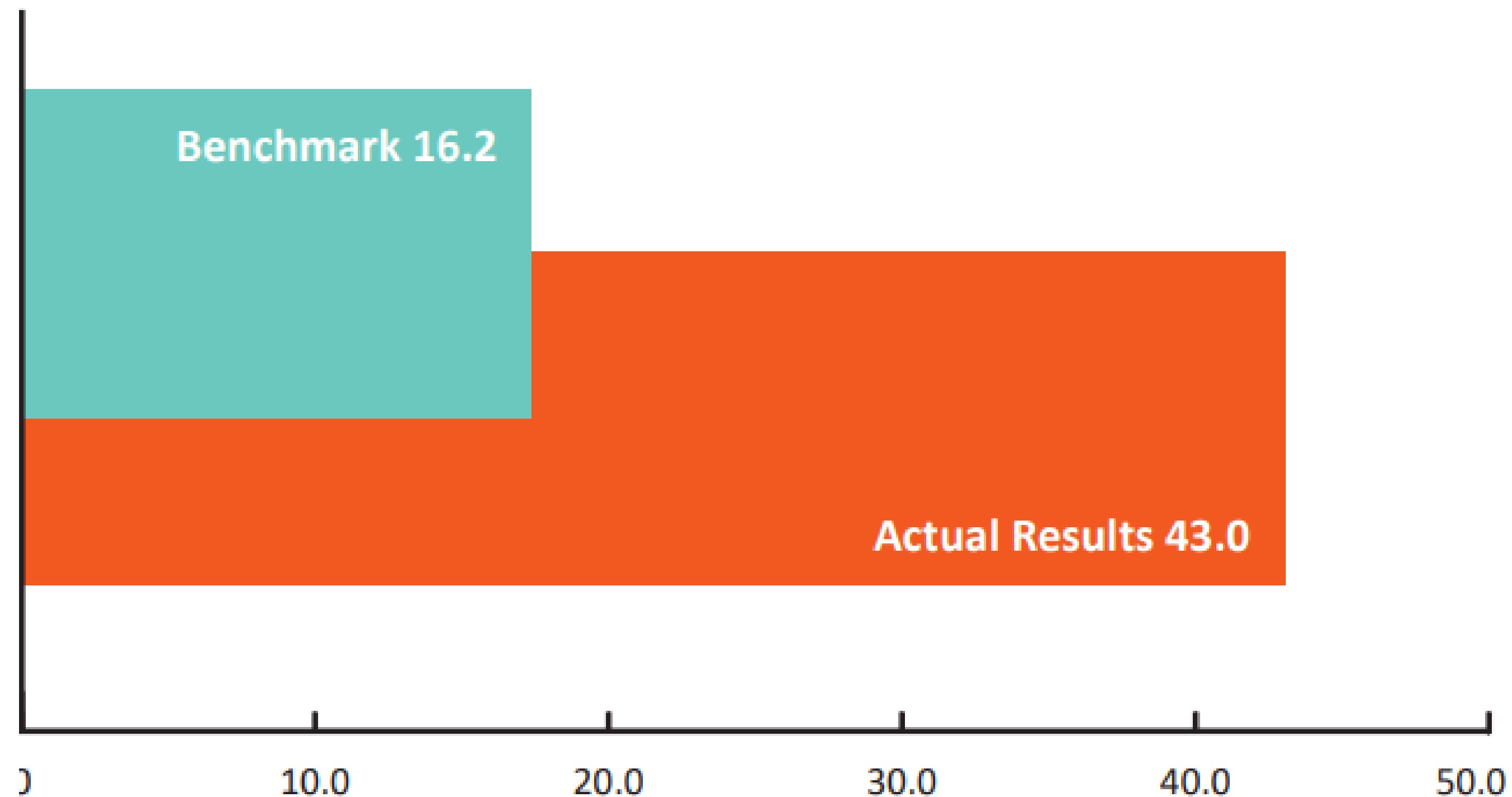


2018 Delaware State Epidemiological Profile – prepared for the SEOW by the [Center for Drug and Health Studies](#)

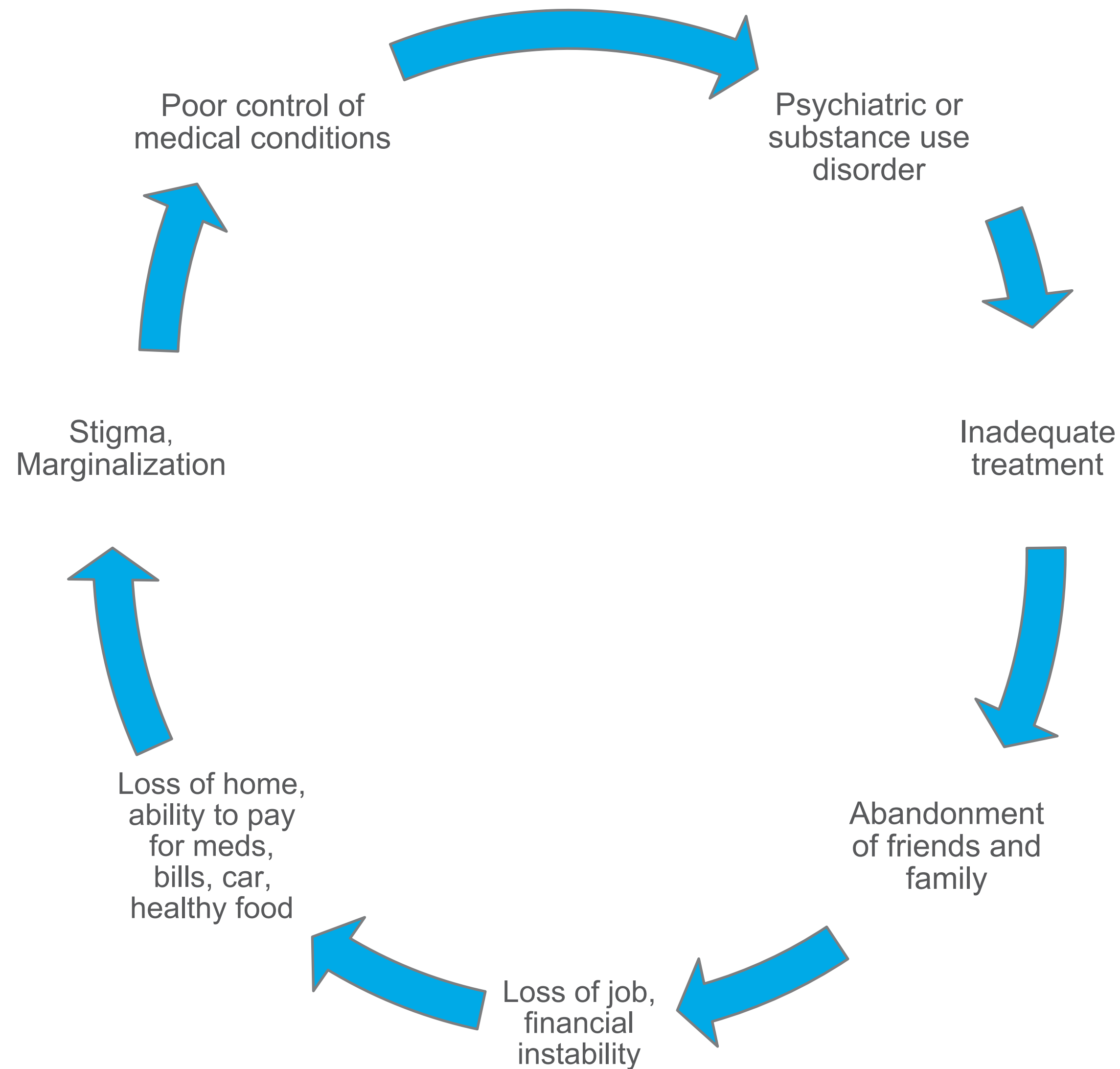
Opioid-related Overdose Deaths per 100,000

This quality measure evaluates the number of age-adjusted opioid-related overdose deaths per 100,000 person at the State level only. Opioid overdose deaths were identified using underlying cause-of-death codes related to drug/alcohol induced causes, drug-induced causes with ICD-10 codes of T40.0, T40.1, T40.2, T40.3, T40.4 or T40.6 as defined by the CDC. Delaware's CY 2019 benchmark was set at 16.2 deaths per 100,000. For this quality measure, a lower result is better.

Figure 7-3: Opioid-related Overdose Deaths per 100,000 Quality Measure: CY 2019 Actual Results versus Benchmark



The Cycle of Complex Care Struggles



How can the cycle be disrupted long term?



Goals of Complex Care

- Establish a trusting relationship
 - Non-judgmental, authentic
- Understand the holistic life of the person
- Understand the goals of the person
- Support self management
- Exercise patience, tolerance, flexibility and creativity
- Think long term -what will assist this person into long term stability



Story 1

- Chris P is a 60 y/o male with a complex medical, mental health and substance use disorder, none of which are being treated. The police bring him into the emergency department frequently with confusion and alcohol intoxication.
- He has high blood pressure which is not well -controlled and his drinking makes this worse.
- He drinks heavily through out the day, and if he doesn't, he has withdrawal, so he is unable to hold down a job.
- He drinks to stop hearing the voices which are hallucinations related to his schizophrenia.
- He is homeless and has been assaulted in the shelter.

Story 2

- Mr. D was a middle -aged gentleman with end stage heart failure and end stage kidney disease (dialysis) whose focus was on his quality of life and not necessarily taking him medication or going to doctors
- When engaged his goals were independence and mobility
- Team assisted with
 - Repair of motorized scooter
 - Setting up his smart phone
 - Getting more home aides
 - Getting new clothing
 - Talking about his end of life wishes
- Mr. D has passed away, but prior to his death was roaming the neighborhood on his scooter, living life on his own terms.

Story 3

- Ms. J is a 55-year-old female with uncontrolled high blood sugars, and high blood pressure who was admitted to the hospital with severe depression.
- Ms J suffers from schizoaffective disorder -both an odd relationship with reality and hears voices and with associated severe depression. She has suffered severe trauma as a child with abandonment, physical and sexual assault, and marginalization.
- Ms. J cannot read, lives in low -income housing with a substantial drug culture
- Ms. J using crack cocaine regularly



Creative Programming

- Center for Hope and Healing
 - Riverside
 - Wilmington Hospital
 - Hope Center
- CareVio Complex Care
 - Community
 - Embedded Social Workers



**“The best way to find yourself is to lose yourself in the service of others.”
-Mahatma Gandhi**





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