California Health Improvement Project (CHIP) **NEURO-NET: A Continuum Partnership for Catastrophic Care**

Ann Perkins, MA Santa Clara Valley Medical Center, San Jose

Problem Statement and Underlying Causes

Fragmented care for persons with catastrophic injury results in high cost and reduced quality of life for the patients and places undue burden on the family.

Estimates of healthcare costs in the US per year for persons with moderate to severe Brain Injury: \$76.5 billion with 2.5 million new cases per year (CDC), for persons with Spinal Cord Injury: \$14.5 billion with about 11,000 new cases per year (NIDRR Model Systems database). The majority of these patients are treated in a system with no clinical integration or meaningful outcome measurement.

Project Description

We created a care continuum that emphasizes the overall patient health outcome and responds to the complex needs of patients. NEURO-NET will utilize providers currently in the marketplace, and offer services from trauma care to home and community based services. The network will maintain clinical alignment via a nurse case manager.

Goal and Objectives

Goal:

Improve the overall health and quality of life of individuals diagnosed with Acquired Brain Injury and Spinal Cord Injury, while also reducing lifetime medical costs through the provision of continuous, coordinated, rehabilitation through all levels of treatment.

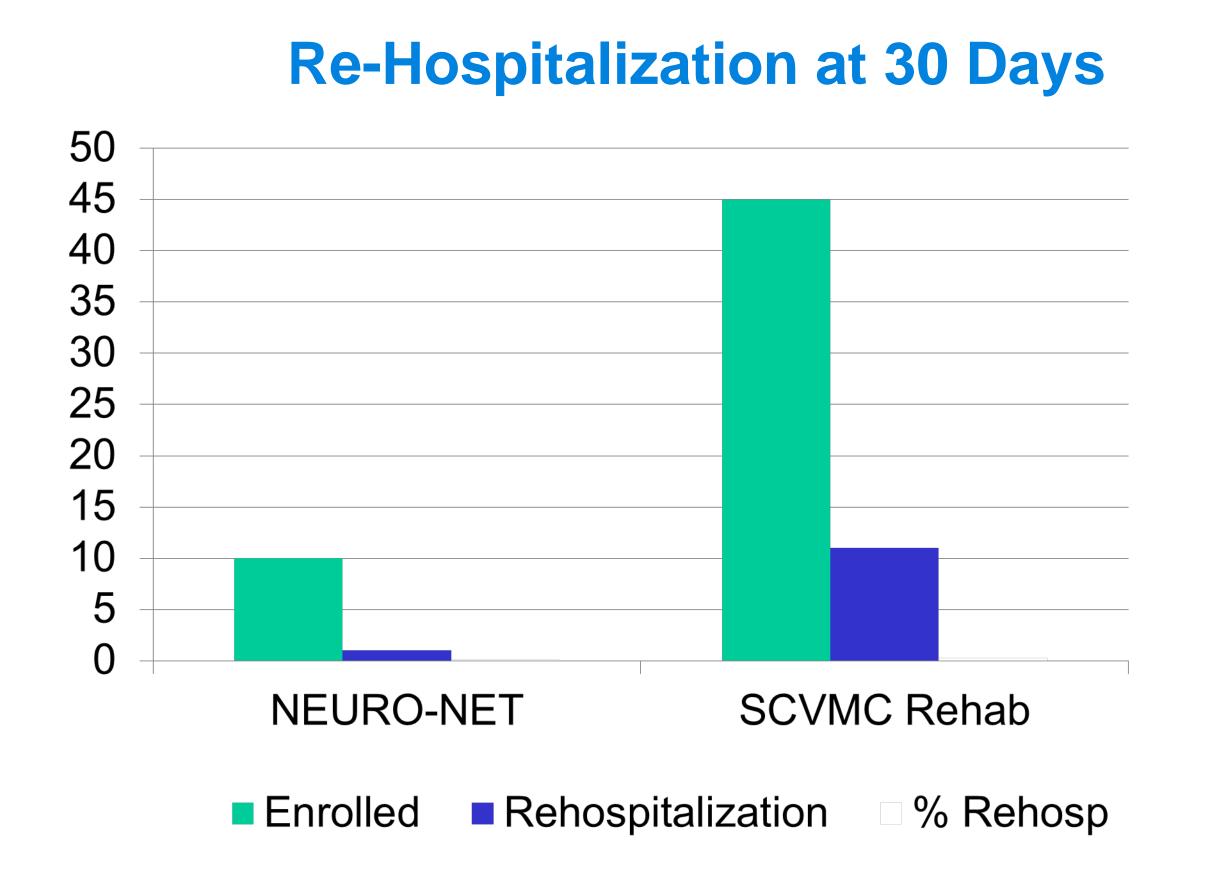
Output-oriented Objective:

- A) To develop la set of outcome metrics applicable to all phases of the continuum to be gathered in the first year NEURO-NET pilot by 5/1/2014.
- B) To successfully fund the pilot phase via an Innovation Grant by 4/1/2014.

Outcome-oriented Objective:

- A) Reduce 30 day re-hospitalization rates of patients who have suffered ABI and SCI by 10/2014.
- B) 90% of NN patients will report their customer satisfaction as very high by 10/2014, as compared to the SCVMC benchmark of 82%. (Data collected and benchmarked by MedTel).

Outputs

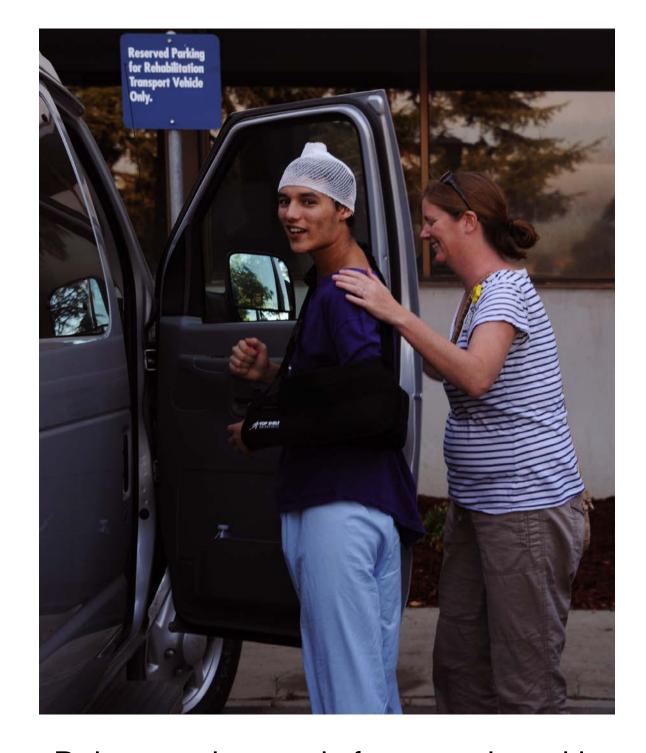


Outputs Achieved

- I. NEURO-NET pilot began enrolling patients May 2014 and has enrolled 12 patients as of August 2014. All patients have the benefit of an experienced catastrophic nurse case manager for one year.
- 2. A collaborative set of outcome data points has been developed with input from all levels of care.
- 3. The pilot phase was fully funded by an Innovation Grant administered through the VMC Foundation on 4/1/2014.



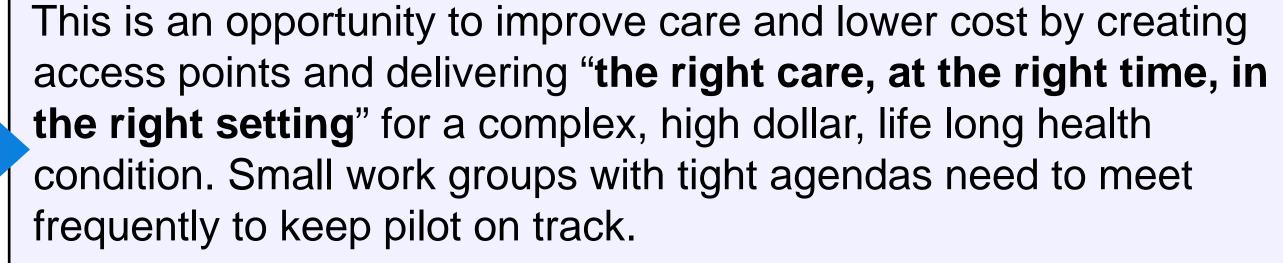
Young Women's Spinal Cord Injury Support Group at Santa Clara Valley Medical Center



Robert getting ready for an outing with Christine, a SCVMC brain injury Recreational Therapist.

essons Learned

Understand the time commitment to launch the project.



Pilot project does not have a full time director, but rather many people giving some of their time with other full time jobs. Group process and slow response times have kept some aspects from being implemented as soon as they should have.



All partner meeting along with Doug Ardley, NEURO-NET

Communication plan is like painting the Golden Gate Bridge: as soon as you get to the end: start again. Consistent communication up and down the chain in every organization about the pilot is crucial.

About My Organization

Santa Clara Valley Medical Center is a 500 bed community hospital with specialty services including Level 1 Trauma, Rehabilitation, Burn, and NICU dedicated to the health of the whole community.



The Rehabilitation Center is a 76-bed specialty hospital located within Santa Clara Valley Medical Center. It offers not only a full range of rehabilitation services and programs, but also the comprehensive resources of a major medical facility, including a Level 1 Trauma Center. The Rehabilitation Center began providing physical rehabilitation services in 1971 and helped pioneer a number of procedures and protocols - including the multidisciplinary team approach to care - that are now used worldwide.

Contact Me

