Pursuing Perfect Depression Care: A Model for Eliminating Suicide and Transforming Mental Healthcare

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Pursuing Perfect Depression Care:
Outline of Presentation

- Case Presentation
- A Health Care System in "Shambles"
- A Roadmap for Transformation –
  The IOM "Chasm Report"
- A Model for Transformation –
  HFHS Behavioral Health Services
- From Perfect Care to Perfect Health
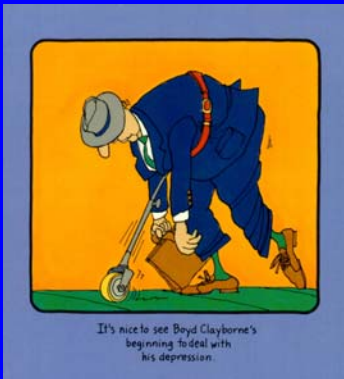
Pursuing Perfect Depression Care:
The Current System is Broken

"In its current form, habits, and environment, the health care system is incapable of giving Americans the health care they want and deserve… The current care systems cannot do the job. Trying harder will not work. Changing systems of care will."

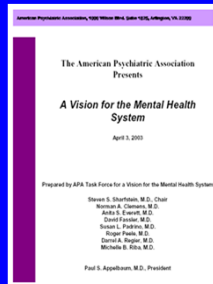## Pursuing Perfect Depression Care:
There Are No Toyotas

"The current US system produces exactly what it was designed to … highly variable care, widespread failures to implement best practices, and inability to change patterns of practice."

Molly Joel Coye
Health Affairs, 2001

Pursuing Perfect Depression Care:
"Business as Usual Will Not Work"

The current system is "in shambles… a patchwork relic – the result of disjointed reforms and policies" that cannot be fixed by traditional reform measures.

The American Psychiatric Association Presents

A Vision for the Mental Health System

April 3, 2003

Prepared by APA Task Force for a Vision for the Mental Health System

Steven S. Sharfstein, M.D., Chair
Norman A. Clemens, M.D.
Anita S. Everett, M.D.
David Fassler, M.D.
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Darrel A. Regier, M.D.
Michelle B. Riba, M.D.

Paul S. Appelbaum, M.D., President

Pursuing Perfect Depression Care:
The Institue of Medicine Chasm Report

Six Dimensions of Perfect Care

- **Safe**
- **Effective**
- **Patient centered**
- **Timely**
- **Efficient**
- **Equitable**

Pursuing Perfect Depression Care:
A Roadmap for Health Care Transformation

10 Rules for Perfect Care
- Care = relationships
- Care is customized
- Care is patient centered
- Share knowledge
- Manage by fact
- Make safety a system priority
- Embrace transparency
- Anticipate patient needs
- Continually reduce waste
- Professionals cooperate

Pursuing Perfect Depression Care:
The Perfect Depression Care Initiative

Goal: Develop a system of perfect care in 2 years
Competitive Application Process
Coordinated by IHI

- **3000 applications downloaded**
- **~300 applications submitted 2001**
- **25 semifinalists**
- **12 finalists**
- **Henry Ford Medical Group –**
  Depression Care and Prostate Cancer Care

Pursuing Perfect Depression Care:
Why "Perfection?"

If 99.9% accuracy is good enough …
- **2 million records will be lost by IRS**
- **12 babies will be given to wrong parents**
- **18,322 pieces of mail will be mishandled in the next hour**
- **2 landings at Detroit Airport will be unsafe today**

Henry Ford Health System

Pursuing Perfect Health
HFHS Behavioral Health Services

- **2 Hospitals**
- **9 Clinics**
- **419 Employees**
- **$55M GPR**
- **Education Programs**
- **Research Programs**
- **A "system" within a "system"**

Pursuing Perfect Depression Care:
HFHS Behavioral Health Services

Pursuing Perfect Depression Care:
Why Depression?

Pursuing Perfect Depression Care:
The Perfect Depression Care Initiative

- Form a team, and create a name and logo
- Map our care processes and identify high leverage OFIs (Planned Care Model)
- Set specific "perfection" goals and manage by fact
- Ensure the voice of the customer in care design (the Consumer Advisory Board)
- Develop and implement rapid tests of change (PDCA Cycles)
- Continuous learning
- Celebrate our successes

Henry Ford Behavioral Health as a System of Care

How We Improve

Vision
We will work with you to achieve perfect care, always respecting your individual wants and needs.

Why We Make What We Make

Customer Knowledge
How they judge quality and why?

Design, Redesign
Planned Care Model
Cognitive Behavior Therapy
Medication safety
Care Paths
Treatment planning process
Open access, DIGMA
Website, Patient Registry,
  Home Health Page

Plan to Improve
(Themes)
Improve access
Improve/enhance treatment
Improve IT
Improve support services
  (for better care, better management)

Community Need
Life and vitality
Revenue
More jobs
Lower health care costs
Healthier society
Model of superior care

Customers
Patients
Families
Referral sources
Community
Employees
Trainees
Research scientists
HFHS
Employers
Other payers
Suppliers/vendors

Suppliers
Staff
HFHS
Community resources
Patients
Families
Employers
Insurers/other payers
Vendors

How We Make What We Make

Core Processes
Prevent | Provide Access | Assess | Treat | Follow up | Prevent

Outputs
Therapeutic environment
Plan for patient services
Jobs and work environment
Diagnoses
Pharmacotherapy
ECT
Psychotherapy
  (Group & Individual)
Education
Family programs
Information/reports

Inputs
Symptoms
Health care history
Expectations
Knowledge
Skills
Attitudes

Support Processes
Leading
Managing
Planning
Budgeting
Improving

Building Customer Knowledge
Measuring Performance
Marketing
Transferring Information

Recruiting
Rewarding
Hiring
Training

Recognizing
Evaluating
Listening
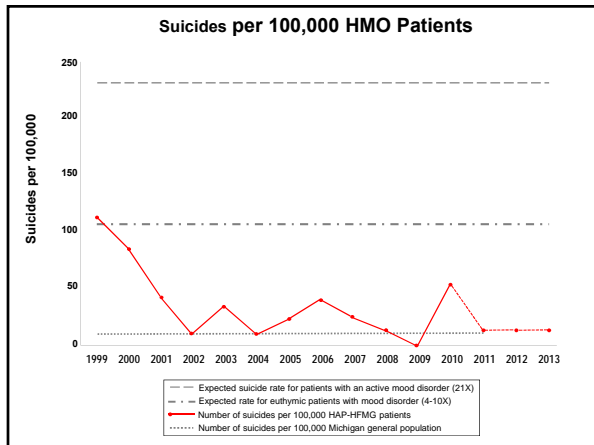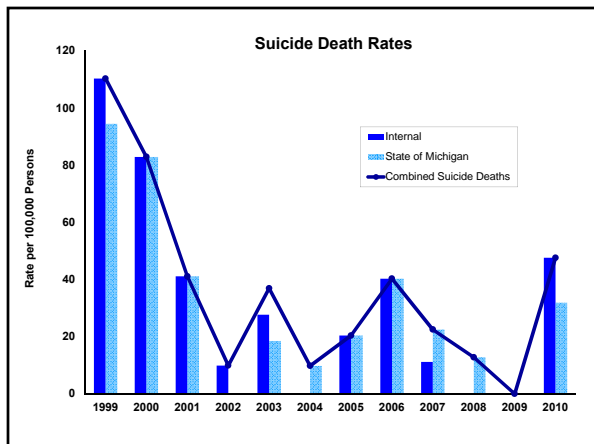Integration

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Pursuing Perfect Depression Care:
The Perfect Depression Care Initiative

- **Safe Care: Eliminate inpatient falls & med errors**
- **Effective Care: Eliminate suicides**
- **Patient-Centered Care: 100% of patients will be *completely satisfied* with their care**
- **Timely Care: 100% complete satisfaction**
- **Efficient Care: 100% complete satisfaction**
- **Equitable Care: 100% complete satisfaction**

HEINZ PRECHTER 1942–2001

A life of bold vision — and demons

Industrialist battled depression as he built a worldwide empire

Planned Care Model

Community
Resources and Policies

Health System
Health Care Organization

Self-Management Support | Delivery System Design | Decision Support | Clinical Information Systems

Informed, Activated Patient

Productive Interactions

Prepared, Proactive Practice Team

Improved Outcomes

Patient-Centered, Timely, Efficient, and Equitable

Safe, Evidence-Based, and Coordinated

Suicides per 100,000 HMO Patients

Suicides per 100,000

1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013

- Expected suicide rate for patients with an active mood disorder (21X)
- Expected rate for euthymic patients with mood disorder (4-10X)
- Number of suicides per 100,000 HAP-HFMG patients
- Number of suicides per 100,000 Michigan general population

Suicide Death Rates

Rate per 100,000 Persons

1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010

- Internal
- State of Michigan
- Combined Suicide Deaths

Pursuing Perfect Depression Care:
Perfect Care in "Real Time"

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Perfect Care in "Real Time"

Pursuing Perfect Depression Care:
Perfect Care in "Real Time"

January

	Emot	Phys	Suic	Hurt Oth	Soc	Occu	Safe	Cntrl	Time	Effic	Equi	Over
Max	99	99	100	100	100	100	100	100	100	100	100	100
Min	9	62	73	99	14	1	90	90	90	90	90	90
Median	55	81	96	100	56	53	99	100	100	100	100	100
% ≥ 90							100	100	100	100	100	100

Pursuing Perfect Health
Award Winning Care

- **2002 RWJ Foundation *Pursuing Perfection* finalist**
- **2003 APA Administrative Psychiatry Award**
- **2003 AHRQ Nominee "National Best System Practice"**
- **2004 ACMHA National Model of Care**
- **2004 AMGA *Acclaim Award* Honoree**
- **2006 APA Gold Achievement Award**
- **2006 TJC Codman Award**
- **2008 TJC National Model of Excellence**
- **2009 Commonwealth Fund Case Study for Excellence**
- **2011 Baldrige Award "Best in Class" Innovation**
- **2012 NAASP National Suicide Prevention Guidelines**
- **Best Docs and Top Spots for many consecutive years**

2012 National Strategy for Suicide Prevention:
GOALS AND OBJECTIVES FOR ACTION

A report of the U.S. Surgeon General
and of the National Action Alliance for Suicide Prevention

Goal:
"Promote the adoption of 'zero suicides' as an aspirational goal by health care and community systems. The HFHS Perfect Depression Care program provides an example of this promising approach."

Pursuing Perfect Health
Perfect Care and Business Viability

Henry Ford Behavioral Health Services
2013 Performance Indicators

The Pyramid of Perfection

- Continuous Learning and Spread
- Organizing Care Using the Planned Care Model
- Pursuing Perfection in a Just Culture
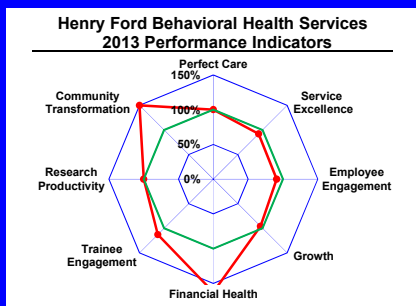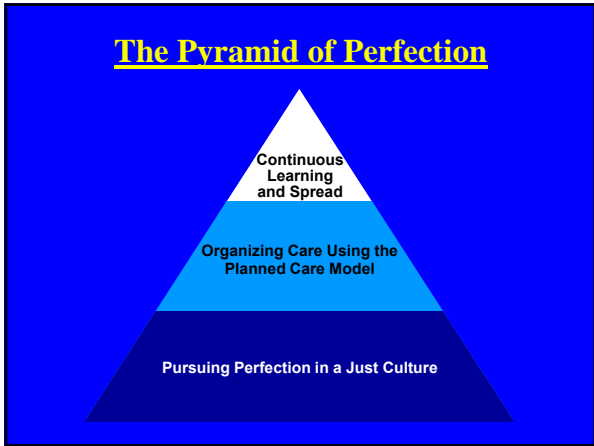
Pursuing Perfect Depression Care:
Lessons Learned and Next Steps

- The Chasm Report is a viable model for care
- Perfection is the goal
- Involved leadership is key
- Data are essential – manage by fact; challenges of large databases
- IT support crucial – workflow is next step
- The science of spread
- The business case for perfect care
- The toxic effects of "pursuing perfection"

Pursuing Perfect Depression Care:
Do We Have the Will to Change the World?
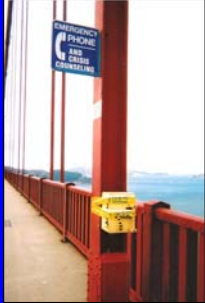
"If zero is not the right goal, then what is?"