



Care Manager Meeting Highlights 03/01/2018

Handouts from presentations are attached to email and on website (handouts and highlights under Care Manager User Group, handouts also under Care Manager Resources)

Objective: Provide a setting for Care Managers (CM) to

- Connect with other CMs
- Gather supportive and helpful information
- Share resources and information about upcoming events and other information (training, documentation, etc.).

Agenda:

3:00 – 3:10	Welcome and introductions
3:10 – 4:30	Lynn Bryant will present a case Kevin DeBruyn will present motivational interviewing technique – in depth
4:30 – 4:45	Cherie Bostwick present MiCCSI case

Adaptive Care Counseling:

- Lynn Bryant presented – brief case summary
 - Lynn shared a pediatric case involving a child and her single Mom. Child had sleep and behavioral issues, including night terrors. Lynn discussed treatment plan in attempting to discover the root of the child's issues and her challenges in working with a mother who was not amenable to care management. Mom insisted that child was doing this "on purpose" and could control her behaviors. Mom was insisting on unnecessary tests and radiographs. Lynn was finally able to get Mom to admit to her own traumatic past, and she then became more open to her own therapy when Lynn said that this would help her to be a better Mom and be able to help her daughter.
 - Lynn discussed how Care Management and team work, as well as incorporating Motivational Interviewing, was instrumental in helping this family.
 - Question:
 - Are there any online CBT (Cognitive Behavioral Therapy) programs available that might be helpful in such cases?
 - Several such programs were discussed, including GoZen!, e-couch, and TruReach.
- Kevin DeBruyn presented
 - Kevin did an interactive and in-depth presentation on Motivational Interviewing techniques and the challenges for the CMs, particularly resistance – "rolling with resistance", and the "righting reflex". Because healthcare is by nature prescriptive, there are unique challenges for the CM. The work is difficult and important. They have the opportunity to partner with people in a different, huge, life changing way. It can be intimidating – along with helping the patients there is a secondary job in meeting metrics, etc. How does CM fit?
 - Kevin told a fictional tale of a mother attempting to get her husband to be involved in building a float for their daughter so that she could be a Cherry Festival Princess. He engaged attendees in discussion about the attempts by the mother, and how they would have responded in order to influence someone who may not want to do something. This involves the MI **RULE** – Resist righting reflex; Understand the person's own motivations; Listen with Empathy. Some suggestions were to identify barriers, use imagination to help

envision a different path, and focus on engagement. Have “smart goals” – start small. Know when a patient is ready for what. The CM should not work harder than the patient. Readiness, willingness, and ability must be aligned.

- Discussed skill levels regarding MI of the CMs present and how to raise them, as well as the benefits of doing so.
- MI will be a continuing topic for this group.

Munson Family Practice Center

- Cherie Bostwick presented
 - Cherie shared her experience presenting a case at the Michigan Center for Clinical Systems Improvement (MiCCSI). Dr. Clark and Cherie completed a work data form and submitted their case for review by the Collaborative Care Manager Case Review team, comprised of doctors and experts on the selected monthly topic. This case involved a middle-aged male with chronic pain, on many meds. Non-pharmaceutical treatments were ineffective. His providers were looking for resources to help decrease the meds that he was prescribed. The case was reviewed, and Cherie was asked questions which she answered to the best of her knowledge. The panel reviewed the medications list and discussed how certain meds may be affecting the efficacy of others, as well as potential reactions. Suggestions were made regarding dosage adjustments and other resources that may help. Cherie felt the feedback to be very helpful and will be sharing it with Dr. Clark. She also plans to submit more cases, and highly recommends it to CMs.
 - Kevin commented that in Grand Rapids they are using more of a team approach to pain management, and that they offer reasonable expectations to the patient for achieving manageable pain levels. He would like to see a similar approach used up here.

Kris and Kevin thanked attendees for coming, and for their willingness to participate in the discussions.

Next Meeting – all meetings Thursday from 3P – 5P:

May 17

Aug 23

Nov 8

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