# Engagement Track: Breakout Sessions

RETAIN







## Topic Room 1:

## Relationship Building and Sustainability: Engaging Health Care Providers on RTW



## Relationship Building and Sustainability: Engaging Health Care Providers on RTW

Thomas Wickizer, PhD Professor Emeritus, The Ohio State University, College of Public Health, and the Institute for Work & Health Dr. Glenn Pransky, MD, M. Occ. Health Associate Professor, University of Massachusetts

November 3, 2021



## **Key Considerations**

- Why is it so important to engage providers?
- How do we get them to participate in a return-to-work (RTW) intervention?
- How do we retain them, enthusiastically?



## Lots of Knowledge...

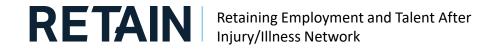
- Centers of Occupational Health and Education (COHE) at Washington State Department of Labor and Industries
- DWP work fitness intervention—United Kingdom
- Kaiser On the Job (CA)
- Work Cover (Australia



## What We Have Learned

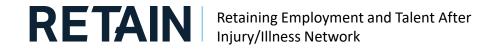
- Health system agreement without committed providers—ineffective
- MD thought leader/champion is key—willing to educate
   Shared understanding about health benefits of RTW
- Benefits for MDs—better outcomes, efficiency, CME

   Cash incentives have never been effective in long term
   Performance standards and comparison can be effective
   Academic detailing model, with referral support—case examples



## Favorite Resources (Post-Convening)

- WA Medical Director RTW Desk Reference <u>https://www.lni.wa.gov/forms-publications/F200-002-000.pdf</u>
- WorkSafeBC—Return to Work Is Good Medicine <u>https://coastrange.ca/wp-content/uploads/2018/03/Return-to-work-is-good-medicine.pdf</u>
- UK—Advising Patients about Work <u>https://assets.publishing.service.gov.uk/government/uploads/system/u</u> ploads/attachment\_data/file/208851/hwwb-health-work-gp-leaflet.pdf



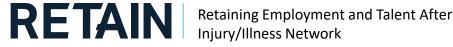
## Topic Room 2:

## Convening Multi-Sector Advisory Boards: Composition, Engagement, and Involvement



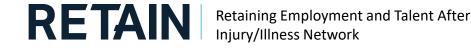
## **Convening Multi-Sector Advisory Boards:** Composition, Engagement, and Involvement

Lee Thompson, MS, Principal TA Consultant, Health Services, AIR November 3, 2021



## Objectives

- Why should we engage with multi-sector stakeholders?
- What does multi-sector engagement look and feel like?
- How can we create and sustain a Multi-Sector Advisory Board?
- Discussion: What lessons can we share?



# Why Should We Engage With Multi-Sector Stakeholders?



## Stakeholders...

- Bring expertise and lived experiences—personal and professional.
- Help identify unmet needs and barriers to participation, engagement, and service delivery.
- Offer **new perspectives** to solve realworld problems.
- The result is: more meaningful outcomes for all stakeholders.

RETAIN



## Benefits of Multi-Sector Engagement

- Strengthened relationships among stakeholders
- Increased awareness of different stakeholder perspectives
- Increased capacity (e.g., skills, knowledge) and synergy
- Making a **difference**

"It comes back to being useful ... I think there's just so many times when we feel like there's nothing we can do and our life is just controlling us and we're not controlling anything. And that [study] kind of gave me an outlet to control a little bit of something that could possibly help my son and if not my son, maybe someone else's. And that is a *feeling of usefulness."* (Patient partner on a Patient-Centered Outcomes Research Institute [PCORI] Study)

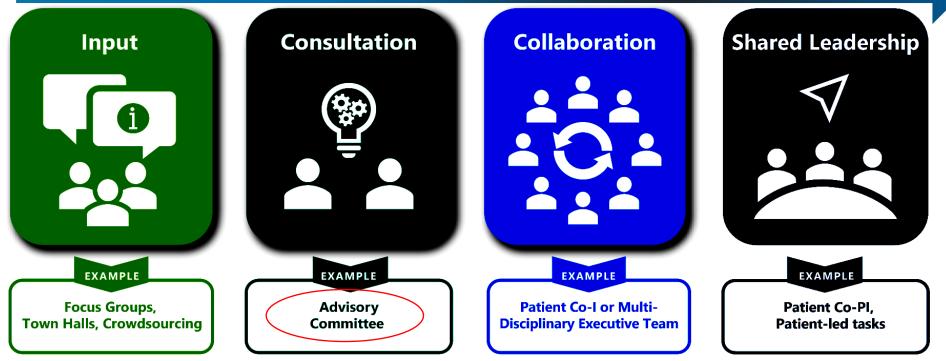


# What Does Multi-Sector Engagement Look and Feel Like?



## **Engagement Can Take Different Forms**

Levels of partners' decision-making authority for study design and implementation



Source: Hanley B, Bradburn J, Barnes M, et al. (Involving the public in NHS, public health and social care research: Briefing notes for researchers. Health Expect. 2005;8(1):91-2; Carman KL, Dardess P, Maurer M, et al. (Patient and family engagement: A framework for understanding the elements and developing interventions and policies. *Health Aff*. 32(2): 223–31; Arnstein SR. A ladder of citizen participation. J Am Plan Assoc. 35:216–24.

## What Is a Multi-Sector Advisory Board?

A formal group—representing multiple perspectives—that meets regularly to help guide a project or program by consulting on key activities and decisions.

- Is a manageable size (10–15 members) and includes the client or "end user"
- Has a **clear purpose** or **goal** that is agreed upon by all members
- Meets **regularly** and **frequently** (e.g., monthly)
- Receives relevant information
- Provides **advice** to help inform decisions
- Feels inclusive and meaningful



# How Can We Create and Sustain a Multi-Sector Advisory Board?



## Who Are Your Stakeholders?

- Employers and business groups
- Health care providers
- State and local government officials
- Community-based organizations
- Workforce development boards
- Participants in your program
- Other

#### Who are the unheard voices in your program?



## What Are the Key Qualities of Stakeholders?

#### Ideally...

- Listen to and respect the perspectives of others.
- Speak comfortably and openly in group settings.
- Share insights and information.
- See beyond their own experiences.
- Show concern for more than one issue or agenda.
- Can adjust communication style as needed.
- Have the time—and desire—to participate.



## How Do You Prepare Stakeholders?

- Communicate role(s), expectations, and processes.
- Share relevant background materials about the program, partners, and members of the stakeholder advisory board.
- Provide training either individually or as a group.
  - *Knowledge*: Consider developing a program "guide" with frequently used terms.
  - *Skills* (e.g., technology).
- Create connections (e.g., team-building exercises).

Stakeholders that feel prepared, valued, and heard will contribute in many ways.

## Sample Agenda for Initial Meeting (90 mins)

- Introductions (45 mins): Each person takes 2–3 minutes to share a little bit about themselves.
  - My name is ...
  - My stakeholder perspective is ...
  - I want to make a difference by ...
  - Optional icebreaker question: One thing about me you may not guess is ...
- Review agenda (5 mins)
- Purpose and goals of the stakeholder advisory board (15 mins)
- Meeting procedures and roles (10 mins)
  - Facilitators
  - Notetaker and timekeeper
  - Meeting dates and times
- Group norms (10 mins)
- Closing (5 mins)



Retaining Employment and Talent After Injury/Illness Network Group norms are a set of mutually agreed upon rules or guidelines that will help group members work together and achieve the group's goals.

Source: S. Heathfield (2020). How and Why to Create Team Norms. Available at: <u>https://www.thebalancecareers.com/how-and-why-to-create-team-norms-1919229</u>

## **Tips for Virtual Meetings**

## Everyone should have the opportunity to connect and be actively involved in the discussion.

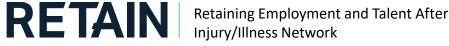
- Share the agenda and meeting materials in advance (including time to foster connections and discuss expectations such as when to use a webcam).
- Identify a point person to troubleshoot technology problems before and during the meeting.
- Consider how to use technology to encourage participation (e.g., chat, polls, whiteboards) during the meeting.
- Be comfortable with silence.
- Provide opportunities for members to follow up after meetings.

Source: Patient-Centered Outcomes Research Institute (PCORI). (2021). Preparing for a productive virtual meeting: Checklist (2021). Building Effective Multi-Stakeholder Research Teams, PCORI. <u>https://research-teams.pcori.org/sites/default/files/2021-03/PPVM-Checklist-508.pdf</u>

## **Examples of Stakeholder Activities**

- Inform recruitment and enrollment of target population, particularly those from underserved populations
- Shape the design of your RETAIN program (e.g., health care, workforce engagement, service delivery model)
- Identify support services to address barriers to participation
- Help develop and improve training for health care providers and employers

"To elicit ongoing feedback, we have begun circulating a monthly question in the newsletters to facilitate stakeholder input on project planning. Information collected is shared with the Study Advisory Committee, Study Leadership Team, Study Co-Investigators, partner practices, and other stakeholders and colleagues. These frequent contacts and sharing of study methods have led to iterative modifications to our data collection strategy." -PCORI-Funded Researcher



## How Do You Sustain Engagement?

#### **Best Practice #1: Use Inclusive Behaviors**

	Exclusive Behavior		Inclusive Behavior
•	Not greeting a team member or including them in a conversation	•	Make a point to greet your team member and include that person in the conversation
•	Not acknowledging your team member's comment or contribution	•	Paraphrase or repeat your team member's comment and verbalize the value of their contribution to the project to show you listened and understand
•	Interrupting a team member who is speaking	•	Allow your team member to finish their thought completely before responding
•	Minimizing or dismissing your team member's observation or opinion	•	Acknowledge your team member's idea or opinion and communicate how it is being considered
•	Focusing your attention only on those you know well	•	Intentionally seek out others who you don't yet know
•	Expressing criticism to others of your team member's work or ideas	•	Ask your team member about their process or approach to the work

Source: Patient-Centered Outcomes Research Institute (PCORI). (2020). How to be more inclusive: Tip sheet. Building Effective Multi-Stakeholder Research Teams, PCORI. <u>https://research-teams.pcori.org/sites/default/files/2021-02/HowToBeMoreInclusTipSheet508.pdf</u>

RETAIN

## How Do You Sustain Engagement? (cont.)

# Best Practice #2: Support Productive Disagreement

- Establish productive disagreement as a group norm.
- Encourage and embrace different backgrounds and points of view.
- Focus on the group's shared goals.
- Consider others' ideas without judgment.

Productive disagreement occurs when members are comfortable enough to openly disagree with each other. Productive disagreement focuses on differences between team member views on a subject and allows team members to work together to find effective solutions.

Source: Patient-Centered Outcomes Research Institute (PCORI). (2021). Building synergy through productive disagreement. Building Effective Multi-Stakeholder Research Teams, PCORI. <u>https://research-teams.pcori.org/team-decisions#Building%20Synergy%20Through%20Productive%20Disagreement</u>



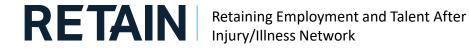
## How Do You Sustain Engagement? (cont.)

#### Best Practice #3: Communicate, Communicate, and Then Communicate Again

- Send a brief monthly update to share timely information and elicit input; highlight a board member to help others get to know them.
- At the start of each meeting, share how the group's input has been used.
- Check in regularly with all members (e.g., one-on-one meetings, hold monthly "office hours").

Source: Patient-Centered Outcomes Research Institute (PCORI). (2021). Sustaining stakeholder engagement: Tip sheet. Building Effective Multi-Stakeholder Research Teams, PCORI. <u>https://research-teams.pcori.org/sites/default/files/2021-04/TipSheet-SSE-508.pdf</u>.

Engagement isn't a "one and done" activity. Maintaining involvement requires ongoing effort by all members.

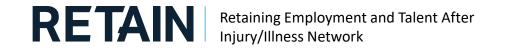


# Discussion: What Lessons Can We Share?



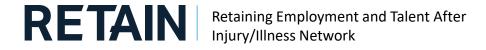
## **Discussion Questions**

- 1. Does your RETAIN state team have an advisory board or a multi-sector committee? If so, what is their role?
- 2. What strategies does your state team use to identify or evaluate panel/advisory board members?
- 3. How do your panel/advisory board members inform your RETAIN efforts?
- 4. How do you keep your panel/advisory board members engaged over time?



### Resources

- Patient-Centered Outcomes Research Institute. Building Effective Multi-Stakeholder Research Teams. Available at: <u>http://www.pcori.org/research-teams</u>.
- Agency for Healthcare Research and Quality. Guide to Patient and Family Engagement in Hospital Quality and Safety. Available at: <u>https://www.ahrq.gov/patient-safety/patients-</u> <u>families/engagingfamilies/guide.html</u>



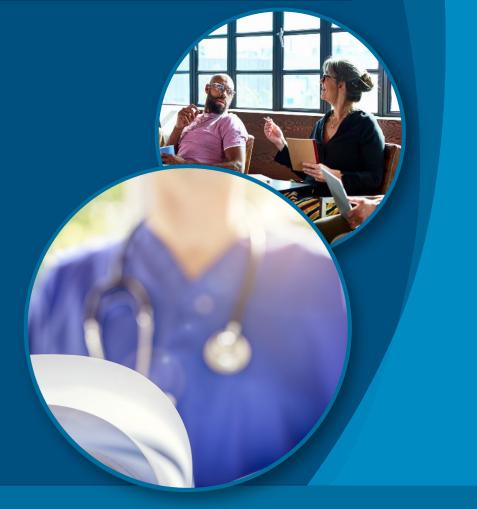
## Topic Room 3:

## Communication Needs and Approaches Between Employers and Health Care Providers



Communications Needs and Approaches With Employers and Health Care Providers

RETAIN



What information do these stakeholders need from RETAIN staff and what is the best way to connect and communicate with them?





## **Today's Presenters**



#### TREVIS CAGE, MS

DIRECTOR OF COMMUNICATIONS-THE BIZZELL GROUP

 12+ years of strategic communications, marketing, sales, public relations, and stakeholder engagement experience across various industries/sectors including government, health, financial services, retail, sports management, broadcast media, and consumer packaged goods—successfully executing marketing initiatives to increase brand, product, and organization awareness.



#### **EBONI JACKSON**

COMMUNICATIONS SPECIALIST-THE BIZZELL GROUP

• Strategic communications professional with experience developing innovative, results-oriented communications and marketing projects for various private, nonprofit, and government organizations including the Centers for Disease Control and Prevention (CDC), Centers for Medicare and Medicaid Services (CMS), U.S. Department of Labor (DOL), and the National Institutes of Health (NIH).



## **Overview & Goals**

During this breakout session, we will discuss:

- Communications Best Practices (In Person/Virtual)
- Key Messages & Channels for Employers
- Key Messages & Channels for Health Care Providers
- Follow-Up Best Practices
- Act It Out/Role-Play





## **Audience Poll**



## WHAT IS YOUR ROLE IN RETAIN?



### What Exactly Are TFE Benefits?

### TECHNICAL

PROPRIETARY & SECRET INGREDIENTS

## FUNCTIONAL

HOW IT WORKS WHAT CAN IT DO OR OFFER

## **EMOTIONAL**

HOW IT MAKES SOMEONE FEEL WHEN USING, INTERACTING, OR ENGAGING WITH IT

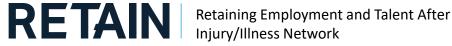
> .yles. .yles.

> > nced image enders vour

35

TECHNICAL	FUNCTIONAL	EMOTIONAL
3 Cameras + 3x Optical Zoom + 100% focus pixels + Smart HDR 4 + f/2.8 aperture + 77/13/26 mm focal length + 100% Focus Pixels	Next level photo hardware/intelligent software with Night Mode + Cinematic Mode Selfies + Portrait Mode	Shoot photos and videos like a pro (without the heavy gear or training) Take photos that will wow your IG followers
1 TB Storage	Expanded, built-in capacity	Enough room for all your photos and videos. No need to delete photos/apps to make room for more
IP68 Rating under IEC Standard 60529	Splash, Water, Dust Resistant (max depth of 6 meters up to 30 minutes)	You can relax (a little bit)
A15 Bionic Smartphone Chip + Advanced Face ID	50% faster graphics + improved CPU performance and efficiency	Power through complex tasks and preserve battery life + your data/information is secure
iOS 15	Run multiple Apps at simultaneously	Keep conversation going while sharing movies, music, or whatever's on your screen during calls or FaceTime.

## WHAT'S IN IT FOR ME? (WIIFM)



## **Communications Best Practices: In Person**

- Respect personal space (COVID-19).
- Match energy/smile/make eye contact.
- Ask how POC/audience is doing and feeling.
- Actively listen to POC/audience.
- Be mindful of pace (manage time expectations upfront).
- Create an experience they will enjoy (consider lunch).
- Personalize conversations (remember names, interesting details).
- Leave collateral to reinforce message.
- Be your authentic self.





WHAT TIPS DO YOU HAVE?

## **Selling Best Practices: Virtual Setting**

- Use video to connect, build relationships:
  - Be aware of proximity to the camera, camera angle, and lighting.
  - Make eye contact (into camera lens vs. screen).
  - Be aware of body language, hand gestures, and posture.
- Ensure a good connection:
  - Ensure fast, secure internet connection.
  - Troubleshoot audio (speech volume, microphone clarity).
  - Invest in quality headsets for maximum clarity.
- Know your tools:
  - Familiarize yourself with the steps to share content (screenshare).
- Practice until your set-up presence until it becomes second nature.



## EMPLOYERS AND HEALTH CARE PROVIDERS

What information do these stakeholders need from RETAIN staff and what is the best way to connect and communicate with them?

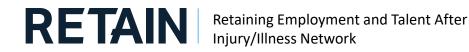


## **Audience Poll**



## WHAT IS YOUR LEVEL OF EXPERIENCE WITH EMPLOYER ENGAGEMENT?





41

## **Key Messages: Employer Stakeholders**

### Describe RETAIN + State Approach

### Human Resources

- Improve employee retention.
- Offer free trainings, tools, and resources for HR to help injured/ill workers stay at or return to the job.
- Provide subject matter expertise to help HR identify and support injured/ill workers.
- Improve job satisfaction and company morale.

### **Owner/CEO**

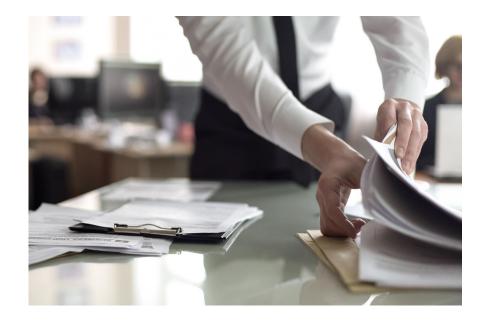
- Position company as leaders engaged in a forward-thinking DOL program with opportunity to impact future workforce policy.
- Create an inclusive workplace where all employees feel valued.
- Diversify and increase your talent pool.
- Minimize turnover and improve bottom line.

### Manager/Supervisor

- Retain staff and maintain/improve team productivity/morale.
- Understand ways to lead and support team members with diverse needs.
- Receive consultation and support on ways to maximize resources to help injured/ill workers.

# What additional information do employer stakeholders need to know about RETAIN?





## What are the best methods/channels to use when communicating with employer stakeholders?



Retaining Employment and Talent After Injury/Illness Network

## **Audience Poll**



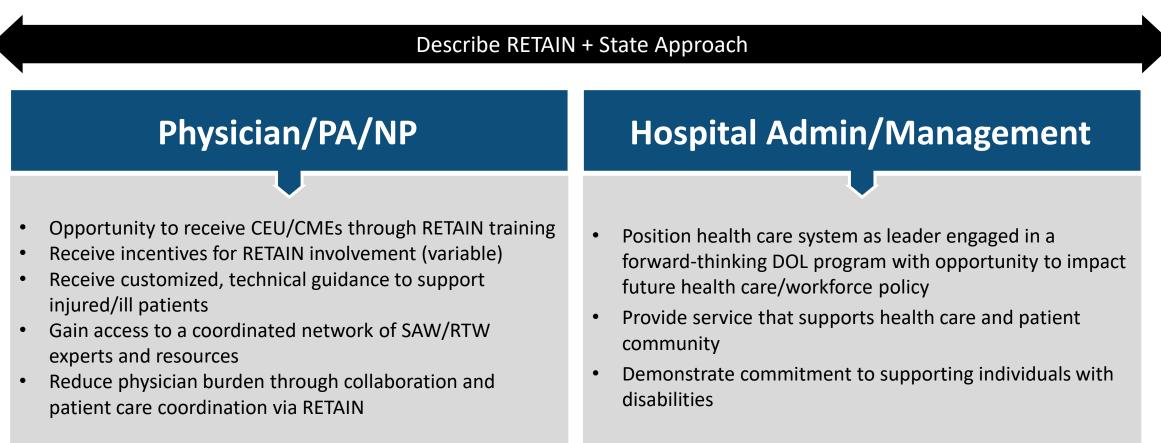
## WHAT IS YOUR LEVEL OF EXPERIENCE WITH HEALTH CARE PROVIDER (HCP) ENGAGEMENT?





Retaining Employment and Talent After Injury/Illness Network

## **Key Messages: Health Care Provider**





# What additional information do HCP stakeholders need to know about RETAIN?





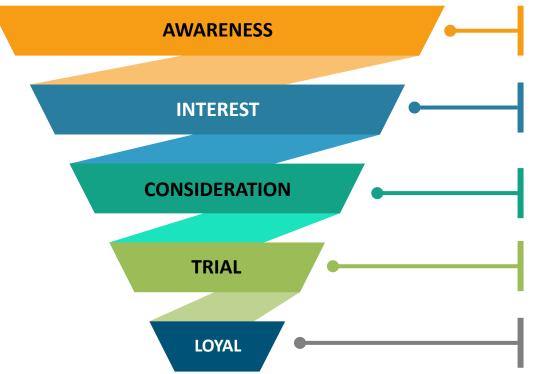
# What are the best methods/channels to use when communicating with HCP stakeholders?



Retaining Employment and Talent After Injury/Illness Network

## **Consumer Disposition Funnel & Follow-Up**

Consumer-focused communication model that Illustrates the "theoretical" customer journey toward the purchase of a good/service



Aware/unaware of the existence of a product or service

Actively expressing an interest in product or service, but might need more information

Sees value in the proposition and willing to invest time, money, or resources

Tried/purchased product or signed up for service

An advocate for product or signed up for program

## **Consumer Disposition Funnel & RETAIN**

Depth and frequency of stakeholder conversations about RETAIN will vary depending on their level of awareness and involvement.



## **Questions & Closing**



Retaining Employment and Talent After Injury/Illness Network

## Topic Room 4:

## Relationship Building and Sustainability: Social Determinants of Health Wraparound and Referral Services



Retaining Employment and Talent After Injury/Illness Network

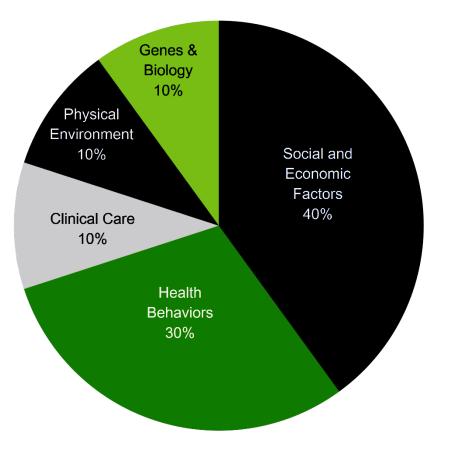
### Relationship Building and Sustainability: Social Determinants of Health Wraparound and Referral Services

Mark Humowiecki, JD General Counsel & Senior Director National Center for Complex Health and Social Needs



RETAIN Awardee Convening November 3, 2021

# Social and Economic Factors Contribute Significantly to Individual Health Outcomes



### **Social Determinants of Health**



### Definitions: Social Determinants, Health-Related Social Needs & Social Risk Factors

### Social determinants of health:

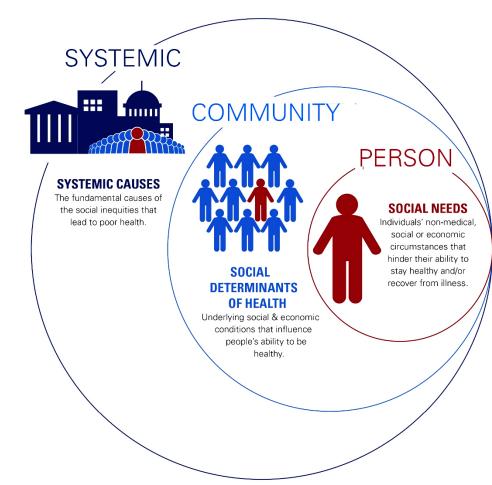
The conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life, including economic policies and systems, development agendas, social norms, social policies, and political systems.

#### Health-related social needs:

Individual needs such as food insecurity and homelessness that have a direct impact on the ability to maintain and improve health.

### Social risk factors:

Adverse social conditions associated with poor health, such as food insecurity and housing instability.



### Health-Related Social Needs Screening Tools



### 1. CMS Accountable Health Communities: 10 Qs

- Mandatory: Living situation, food, transportation, utilities, safety
- Supplemental: Financial strain, employment, family & community support, education, physical activity, substance use, mental health
- 2. <u>American Academy of Family Physicians</u>: 11 Qs
  - Housing, food, transportation, utilities, personal safety, assistance
- 3. PRAPARE (NACHC): 21 Qs
  - Family & home, money & resources, social & emotional
  - Optional: Incarceration, refugee, intimate partner violence



#### **AHC HRSN Screening Tool Core Questions**

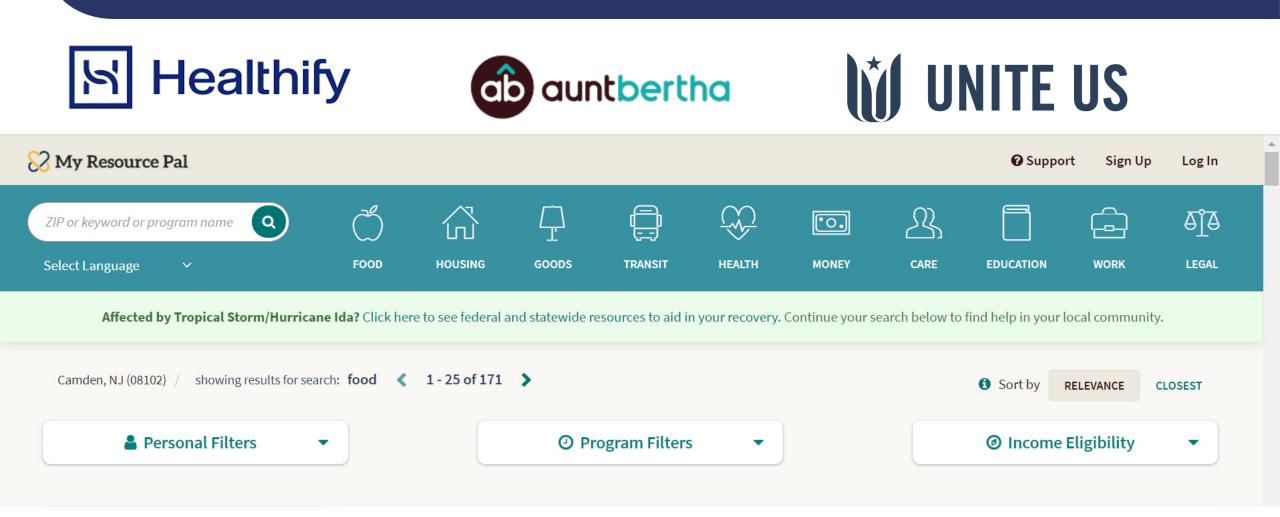
If someone chooses the underlined answers, they might have an unmet health-related social need.

#### **Living Situation**

- 1. What is your living situation today?<sup>3</sup>
  - □ I have a steady place to live
  - □ I have a place to live today, but I am worried about losing it in the future
  - I do not have a steady place to live (I am temporarily staying with others, in a hotel, in a shelter, living outside on the street, on a beach, in a car, abandoned building, bus or train station, or in a park)
- 2. Think about the place you live. Do you have problems with any of the following?<sup>4</sup> CHOOSE ALL THAT APPLY
  - Pests such as bugs, ants, or mice
  - □ <u>Mold</u>
  - Lead paint or pipes
  - Lack of heat
  - Oven or stove not working
  - Smoke detectors missing or not working
  - □ Water leake

Communities Are Building Electronic Networks to Connect to Social Service Resources







Value-based payment: Reduce hospital utilization and improve health outcomes

Different names: navigators, case managers, care coordinators, community health workers

Settings: primary care, health plans, health systems, community-based organizations

Key tools and services: assessment, care planning, interdisciplinary team, use of HIE

Modality: telephonic versus in-person and community-based

Duration: transitions of care, longitudinal, episodic

Care Management Services Seek to Address a Comprehensive Set of Whole Person Needs



### Cross-Sector Collaboration Is Key to Connecting Our Systems and Breaking Down Silos



Communities are creating multi-sector collaboratives to advance health equity and address whole person health needs.

### Requirements include:

- Governance
- Financing
- Data
- Shared vision

### Funding can come from:

- Hospital's community benefit
- Medicaid Managed care
- Local or state government
- Philanthropy

Examples of cross-sector collaboration:

- 1. CMS's Accountable Health Communities
- 2. RWJF Aligning Systems for Health
- 3. NJ Regional Health Hubs
- 4. Oregon Coordinated Care Organizations
- 5. North Carolina Lead Pilot Entities

There Is Tremendous Value in Partnering With Community Organizations and Individuals



- Community-based organizations (CBOs) are key partners for health care to address HRSNs. They often lack money and capacity.
- Individuals with lived experience can bring critical insight to solving health problems.
  - Patient and family advisory boards (PFABs)
  - Community advisory committees (CACs)
  - Participants in research and program design
- Peer counselors and navigators are trusted staff who help connect to community resources.





Mark Humowiecki, JD

Camden Coalition of Healthcare Providers

markh@camdenhealth.org

(856) 287-7008

www.nationalcomplex.care

www.camdenhealth.org

## **Discussion Questions**



- 1. How have you seen individual social needs interfere with people's participation in RETAIN?
- 2. How do you learn about people's broader context during the program?
- 3. What experience do you have identifying social needs and navigating to services and supports?
- 4. Are there any community-based organizations or individuals with lived experience involved in your planning and implementation?