

Focus on Innovation and Service

Community Seeks to ‘Launch’ Solutions

By Katie Coffin &
Haley Vannarsdall

Health care and change go hand in hand – with plenty more to come. In an effort to stay on the cutting edge, Community Health Network has announced a plan to encourage innovation through the Community Launchpad.

The Launchpad is described as an “innovation incubator designed to develop health care advancements, health care delivery improvements and entrepreneurial opportunities to reinvest in future innovations.”

The concept has been underway for a year and went public on November 1, 2012. Physicians, nurses, clinical and administrative staff have the opportunity to submit ideas (via an online submission form) and have them reviewed by an innovation advisory board. External collaborators include universities, businesses and entrepreneurs.

“Ultimately, employees win, patients win and the public wins,” states Pete Turner, vice president of innovation for Community Health Network.

There already have been several dozen submissions, both internally and externally. Those ideas are now funneling through the selection criteria process. Depending on the depth of the project, it could take months or even years to implement.

“We want to foster an environment of innovation, capitalize on those innovations and improve health care for our patients,” Turner adds.

What makes Community Launchpad different from other health care innovations? Leaders cite a built-in funding network to transform the ideas into solutions. The initiative will strive to engage the workforce, capitalize on concepts that yield attractive results and reinvest in future innovations.

“Our motto is that you shouldn’t be afraid of failure with an idea, and we want them to know that they have a safe resource,” Turner concludes.



INFORMATION LINK

Resource: [Community Launchpad at eCommunity.com/Launchpad](http://Community.com/Launchpad)

Study Aimed at Lowering Prescription Drug Abuse

Although the United States makes up about 4.6% of the world’s population, Americans consume 80% of prescription opiates. In 2010 there were enough narcotics prescribed that every American adult could take a pill six times a day.

In an effort to help reverse this trend, Indiana was selected as one of two states to take part in a pilot study for the Department of Health and Human Services and the Office of the National Coordinator for Health Information Technology.

In Indiana, the study used INSPECT (Indiana Scheduled Prescription Electronic Collection and Tracking Program), a statewide electronic database that tracks every narcotic or controlled substance dispensed at pharmacies. Though this program has been in place since the mid-1990s, accessing a patient’s drug history has been cumbersome. Previously, the database wasn’t integrated with electronic health records and medical reports.

Regenstrief Institute, an internationally recognized health care research organization based in Indianapolis, provided the technological expertise for the study that launched at Wishard Memorial Hospital in July 2012. The first step was giving emergency room staff instant access to a patient’s pharmaceutical history.



“There really isn’t a stereotype to narcotic abuse,” says Dr. John Finnell, Regenstrief Institute investigator and Indiana University School of Medicine faculty member. “Understanding how big of a problem prescription drug abuse is, is the first step.”

Some of the roadblocks to curtailing prescription abuse, according to Finnell, have been: many doctors unaware when prescriptions are filled at pharmacies, patients not knowing the name and strength of their medicines and the previous stand-alone system taking too long to look up patient histories.

Prescriptions dispensed at Wishard were reduced by 60% during the pilot program. The four major Indianapolis hospital systems (IU Health, St. Vincent, Community and Franciscan Health) now have access to each other’s health records through CareWeb, an online application that shares such information. Records from Ohio and Michigan have also been added to the database. INSPECT is now integrated with electronic health records and automatically requests a copy of a medical report, as well as allowing health care professionals to see results of doctor visits.

INFORMATION LINK

Resources: INSPECT at www.in.gov/pla/inspect

Regenstrief Institute at www.regenstrief.org

Personal Services Industry Exploding

With Baby Boomers now booming into retirement, demands on the health care industry are increasing. One particular sector that’s experiencing strong growth is personal services.

Home health care represents the medical component, while personal services encompasses the non-medical piece – meal preparation, homemaking and companionship, for example.

Last year, Ball State University’s Center for Business and Economic Research released a study titled *Home Health Care: Industry Growth in Indiana*. While the report showed that the industry is growing steadily, Indiana Association for Home & Hospice Care (IAHHC) Executive Director Evan Reinhardt says the personal services side is where the true boom is occurring.

“We’ve seen the greatest uptick in personal services agencies, last year especially, to the tune of 20%,” Reinhardt notes. “We have had a pretty significant increase in membership on that front as well.”

The study found that the home health care industry had a total economic output of \$1.3 billion in Indiana. Despite the recession, this sector experienced stability in terms of jobs from 2000 to 2009. Marion County topped the list with 2,772 jobs and 69 establishments in 2009.

“We have job postings that we handle for our members, so we know there’s definitely an across-the-board bit of growth,” Reinhardt affirms. “I think there still is a need to continue expanding (the home health care piece), just not as dramatic as it is on the personal services side.”

Even considering the industry expansion and the steady rise in employment opportunities, Reinhardt says the IAHHC is not aware of a severe shortage of providers. He allows that there are parts of the state that are underserved, especially rural areas. But overall,

Reinhardt believes the industry is sufficiently meeting demands.

“I think there’s always room for improvement,” Reinhardt recognizes. “We’re trying to keep tabs on this and figure the landscape out as best we can on our side. It doesn’t take an industry expert to figure out that with the aging of the Baby Boomer population, there’s going to be an increase in the need for services. Along with that, there’s going to be an uptick in home health operations, so those two conclusions are definitely not surprising in that respect.”



Healthy meal preparation is one aspect of the fast-growing personal services side of home health care.

INFORMATION LINK

Resource: Evan Reinhardt, Indiana Association for Home & Hospice Care, at www.iahhc.org

Orthopedic Clinic Could Expand Indiana Influence

While still dominant in Kosciusko County, the medical device and orthopedic industries are also looking to the future.



Every city has a claim to fame. Warsaw's claim – "The Orthopedic Capital of the World" – is a hot topic as more Baby Boomers move into retirement.

Warsaw is home to one-third of the \$38 billion global orthopedic industry and accounts for 43% of Kosciusko County's employment (through direct jobs and indirect effects). About four years ago, OrthoWorx was formed as a result of a study commissioned by BioCrossroads to research the orthopedic industry's concentration in Northern Indiana.

The study provided strong recommendations for topics to address in the orthopedic community. They included education, logistics, awareness of the sector itself and how much impact it has on the state and the nation. In early 2012, OrthoWorx launched a feasibility study to determine whether an orthopedic specialty hospital (Orthopedic Capital Clinic) would spur industry growth and development.

According to OrthoWorx CEO Sheryl Conley, the Orthopedic Capital Clinic project would not only provide the region with an orthopedic hospital, but a broader entity that also includes arms focused on clinical research, medical education and innovations.

"Of course at the center is always the patient and improving outcomes," Conley explains. "But what is unique about (the Orthopedic Capital Clinic Project) is the opportunity to work collaboratively, not only with health care providers, but also our state universities and the established orthopedic industry."

A primary catalyst for this project, since orthopedics represents a

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significant portion of Medicare dollars, is the aging Baby Boomer population and the anticipated influx of patients.

“This is a health care crisis coming at us,” Conley asserts. “We can’t fix everything, but there is something that we can do given that we have such a concentration of expertise in orthopedics. All of us are driven for innovation – how can we do things better, faster and in a way that improves outcomes.”

While findings from the feasibility study have not yet been released, Conley said she hopes there will be a definitive decision on whether the project will move forward by the fall, along with a clear picture of who the partners will be. If the

project is approved, it could be nearly three years before the facility is operational.

“The project is very well developed,” Conley says. “The last year has been where we put pretty significant resources – human and financial – behind really building the feasibility and business plan and working our way through it. (If approved) it will have a pronounced, positive effect on the Warsaw region.”

INFORMATION LINK

Resource: Sheryl Conley, OrthoWorx, at orthoworxindiana.com