

Rush University Medical Center

Chronic Disease Self-Management Education Program Grantee



Goals, Strategies, and Activities

The overall purposes of this 3-year grant are to:

- **Goal 1:** Through robust partnerships, develop a result-based, comprehensive strategy for addressing behavioral health and/or chronic pain among older adults and adults with disabilities living in your community.
- **Goal 2:** Significantly increase the number of older adults and adults with disabilities who participate in evidence-based self-management education and/or self-management support programs to empower them to better manage these chronic condition(s), while concurrently pursuing the sustainability of these programs beyond the end of the grant period.

Rush University Medical Center (RUMC) and its partners will:

- Expand the implementation of the Chronic Pain Self-Management Program (CPSMP) in the City of Chicago and nearby suburbs through an increase in implementation sites and facilitators;
- Screen 200 individuals with chronic pain for social isolation risk; and

- Create a system to refer individuals with chronic pain to CPSMP.

Proposed Interventions

- Chronic Pain Self-Management Program

Partnerships

To achieve the goals of the grant, RUMC will collaborate with the following key partners:

- AgeOptions
- Rush Oak Park Hospital
- Rush Community Health Worker Hub

Anticipated Results

RUMC and its partners propose to achieve the following results:

- Engage 100 individuals living with chronic pain that have been screened for social isolation with the education needed to manage their chronic pain more effectively; and
- Achieve a participant completion rate of 73%.

Prevention and Public Health Fund 2020, effective August 1, 2020



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Prevention and Public Health Fund 2020, effective August 1, 2020



Grant Impact Summary

Most Significant Accomplishments:

- Engaged 103 participants, of which 72 completed the Chronic Pain Self-Management Program (CPSMP).
- Delivered programs virtually for residents of the West Side of Chicago and throughout Illinois during the COVID-19 Pandemic. While virtual delivery was the only option, it presented fewer barriers to participants with chronic pain as they largely preferred virtual workshops in the afternoon.
- Trained 16 leaders in CPSMP.
- Fostered interdepartmental and interprofessional collaboration within the Rush University Medical Center, including physicians, social workers, nurses, occupational therapists, community health workers, and researchers from palliative care, rehabilitation, pain management, primary care, emergency medicine, to obtain chronic pain referrals, screen individuals for social isolation, and to elevate social care needs of participants.
- Built a sustainable referral network for chronic pain and other Chronic Disease Self-Management Education referrals through our electronic medical record and community partners, including physicians, nurses, occupational therapists, faith leaders, food pantries, and Area Agency on Aging.
- Developed protocols for recruiting patients with complex health and social needs to CDSME workshops utilizing motivational interviewing and interprofessional care management.
- Studied and disseminated learnings about the experiences of individuals with chronic pain and social isolation, and trained leaders to be attentive to those needs.
- Engaged in and presented research to better understand the experiences of individuals with chronic pain experiencing loneliness and social isolation.

Lessons Learned:

- 1) Individuals with chronic pain often have complex health and social needs, making it challenging for them to engage in CDSME. Therefore, we need to adapt our approaches to recruitment and retention to effectively engage those who need the program most.

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Lessons Learned (Continued):

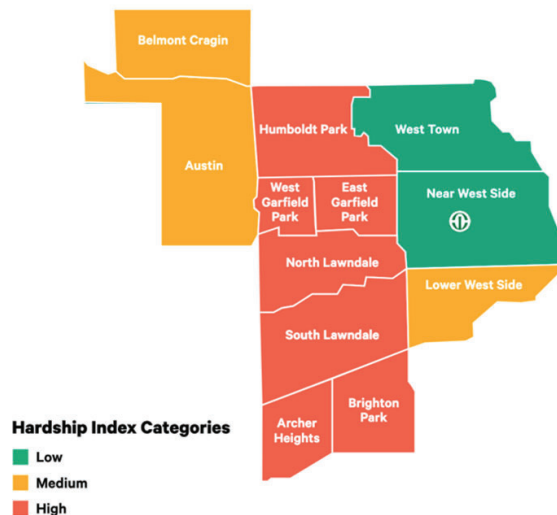
- 2) Participants benefited greatly from social work-centered recruitment, including the ability to address barriers to participation and other social and health care needs identified. Our team developed a collaborative social work care model to better serve these referrals and improve retention.
- 3) By integrating social care management into the recruitment of CPSMP, as well as the escalation of social needs from CDSME workshops, we were able to increase referrals from health care providers for CDSME.

What's Next:

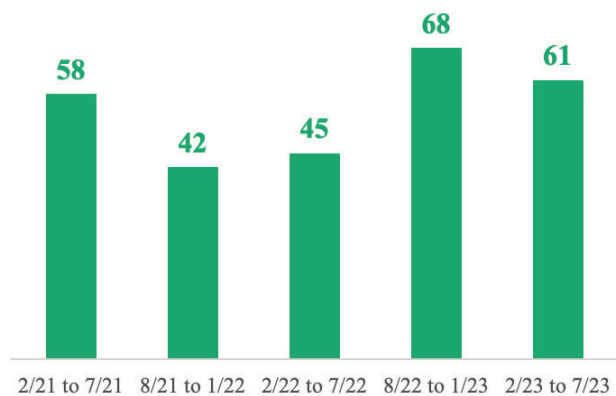
The RUSH team will continue to offer the Chronic Pain Self-Management Program on a regular recurring basis as part of its suite of evidence-based CDSME and Fall Prevention programs. We will continue to accept referrals from health care providers and community partners and will continue to strengthen our referral network.

We are committed to sustain our social work-centered recruitment and escalation protocols to better address the social care and health care needs of our workshop participants, alleviating barriers to participation and completion of CDSME and Falls Prevention programs.

Hardship Index of West Side Chicago Neighborhoods



Health Care Provider Referrals over Time



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