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

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Detroit, MI
It's nice to see Boyd Clayborne's beginning to deal with his depression.
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
“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.
Pursuing Perfect Depression Care: The Institute 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: HFHS Behavioral Health Services

- 2 Hospitals
- 9 Clinics
- 325 Employees
- $40M GPR
- Education Programs
- Research Programs
- A “system” within a “system”
Pursuing Perfect Depression Care: HFHS Behavioral Health Services
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
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
Pursuing Perfect Depression Care

Our promise to each and every patient:

"We will work with you to achieve the best possible care, always respecting your individual wants and needs."
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.

**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

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

**Inputs**
- Symptoms
- Health care history
- Expectations
- Knowledge
- Skills
- Attitudes

**How We Make What We Make**

**Core Processes**
- Prevent
- Provide Access
- Assess
- Treat
- Follow up
- Prevent

**Support Processes**
- Leading
- Managing
- Planning
- Budgeting
- Improving

- Building Customer Knowledge
- Measuring Performance
- Marketing
- Transferring Information

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

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

**Customer Knowledge**
How they judge quality and why?
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
A life of bold vision — and demons

Industrialist battled depression as he built a worldwide empire

By JENNIFER DIXON
ANd JOHN GALLAGHER
FREE PRESS STAFF WRITERS

Heinz Prechter, a German immigrant who turned $764 into a worldwide business empire, helped make the sunroof part of the American automobile and raised millions of dollars for Republicans, including President George W. Bush and his father, died Friday after a decades-long struggle with depression.

Authorities said Prechter hanged himself with a vacuum cleaner cord in the stairwell of a guest house next to his home in Grosse Ile Township. Police were called to the Detroit riverfront estate about 8:30 a.m. by his wife, Waltraud (Wallie) Prechter, who found his body, clothed in bathrobe and shoes.

Prechter, 89, had suffered bouts of depression throughout his adult life. At the time of his death, he was being treated for severe clinical depression at the University of Michigan Depression Center in Ann Arbor.

A protégé of Henry Ford II and financier Max Fisher, Prechter was known in some circles as the "the king of the sunroof business" in that area. In other circles, he was known for his fund-raising prowess for two presidents, New York Mayor Rudolph Giuliani, and Gov. John Engler, all Republicans, and Democratic Wayne County Executive Ed McNamara among others.

Longtime friend and magazine publisher Keith Crain said he was not surprised by Prechter's suicide.

"It's something I was worried about. I guess for a good reason. He'd been fighting these demons and they affected him mightily," Crain said Friday. "His depression didn't have to do with his businesses or his family. He'd been through far rougher times in the 1980s. This didn't relate to anything."

David Treadwell, vice chairman of one of Prechter's companies, ASC Inc. of Southgate, and president and chief executive officer of Prechter Holdings, said his boss had suffered off and on from depression for the last 30 years.

Prechter's most recent bout lasted about five or six months — but he came out of it within the...
Planned Care Model

Community
Resources and Policies

Health System
Health Care Organization

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

Productive Interactions

Informed, Activated Patient

Prepared, Proactive Practice Team

Improved Outcomes
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 US general population
Pursuing Perfect Depression Care: Perfect Care in “Real Time”
Pursuing Perfect Depression Care: Perfect Care in “Real Time”

I. Report of Patient Status by Patient or Family/Significant Other

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<th>Please Mark Line</th>
<th>bad, lots of problems</th>
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<td>Overall Satisfaction with ECT Care:</td>
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Please Describe

Evidence of Relapse / Signal Events: ______________________________

List 3 things you would like to discuss with your doctor or ECT staff:

_____________________________________________________________

_____________________________________________________________

_____________________________________________________________

Report Given By: __________________________ Relationship to Patient: __________________________ Date: __________________________

BLUES BUSTERS
Pursuing Perfect Depression Care: Perfect Care in “Real Time”
Pursuing Perfect Depression Care: Perfect Care in “Real Time”

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% ≥ 90

100 100 100 100 100 100 100
Pursuing Perfect Depression Care: The Business Case for Perfect Care
Pursuing Perfect Depression Care: Award Winning Care

- 2002 RWJ Foundation *Pursuing Perfection* finalist
- 2002 HFHS Quality Expo *Quality Award*
- 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
- Featured in JAMA May 19, 2010
- Best Docs and Top Spots for many consecutive years
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”
"The committee met to approve your idea. But first we had to approve the approval, providing everyone agreed to disagree to approve the agreement which approved the approval agreement. After that, things got complicated."
Pursuing Perfect Depression Care: Do We Have the Will to Change the World?

“If zero is not the right target, then what is?”