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# Year's ution: ahead ums

l to think of scams you have le past year, are phony s. Unfortunatelat trend will 2018. Recently, legide retired Sexton to look

> back on the top scams of 2017. The special aired on Christmas

## Innovating disabled health care

#### Colorado Springs' Resource Exchange spearheading research

BY JAKOB RODGERS jakob.rodgers@gazette.com

One research project uses a penand-paper survey to help improve the quality of life for people with intellectual and developmental disabilities.

Another is a web-based program combating obesity. And still one more seeks new ways to help patients' doctors better coordinate their care — a simple request that too often goes unfulfilled.

They're all being tested at a first-of-

its-kind research center for the Pikes Peak region — one spearheaded by The Resource Exchange, a Colorado Springs nonprofit that's growing fast and on the move. Its goal: lend fresh insight into health care conundrums facing adults and children with intellectual and developmental disabilities across the nation.

And it's doing so outside the "petri dish" of hospitals or academic institutions.

"We are in the community," said David Ervin, the nonprofit's CEO. "We've got to face everyday community challenges and embrace everyday opportunities.

"This is real health care in a real community-based clinic. So it offers a different — not a better — but a different perspective."

The research center took root in 2015 with a \$50,000 grant from the California-based Special Hope Foundation, and it's since grown into a bona fide research hub with an additional \$100,000 grant from the Colorado Springs Health Foun-

dation. With other federal and private grants, its annual research budget totals nearly \$210,000.

Its home base is a primary care clinic that began four years earlier, which serves hundreds of the nonprofit's clients.

"Somebody with autism can certainly go to any old physician they want, and they do," Ervin said. "But sometimes, however, those physicians are a bit stumped on what the interaction between the developmental disability and the presenting health care issue.

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### **EXCHANGE**

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"So we built that health care project to address that nexus."

With about 800 people now enrolled in the primary care clinic — and most of the patients there agreeing to enroll in the research projects — the center has begun offering a window into how best to care for people with such disabilities.

"We're learning like crazy," Ervin said.

Researchers from the University of Utah are using a paper-and-pen survey to better understand how to improve the quality of life for people with intellectual and developmental disabilities.

The University of Illinois at Chicago, the University of Alabama at Birmingham and the University of Colorado at Boulder partnered on a study that uses a web-based program to better tailor workouts and diets specifically to people with in-

tellectual and developmental disabilities.

A third study, again spearheaded by the University of Illinois at Chicago, examined the health records of participating patients as part of a national effort to pinpoint ongoing and emerging trends among people with such disabilities.

Ervin's voice rises with excitement when discussing a different study, this time with Community Health Partnership, that aims to better coordinate health care for people with intellectual and developmental disabilities.

It's a complex issue. Already, getting family doctors to talk to specialists, such as neurologists or cardiologists, can be difficult.

But the process gets far more complicated when serving people with disabilities. Not only must two doctors talk, but so must each client's nursing home staff, their families and their therapists.

The program may provide a health care roadmap for other populations, such as seniors or children on welfare programs, said Amy Yutzy, Community Health Partnership's chief operating officer.

"Medicaid members need a lot of different types of services, beyond what maybe somebody on private insurance may need," Yutzy said. "So if we can really look at models that work, and surround our folks that might have different types of needs or access issues with care that's going to meet their needs and be effective, why not do it?"

The study wraps up June 30, Ervin said. But early returns show the program holding remarkable promise for reducing emergency room visits and health care costs, while improving patients' quality of life.

"We are absolutely on to something," Ervin said. "All three families of measure certainly suggest this is the approach to take."

The center's work is as consequential as ever, with its parent nonprofit growing at breakneck pace.

Since 2005, The Resource Exchange has tripled its patient base from nearly 1,600 people to 4,700

people largely across El Paso, Park, Teller and Pueblo counties.

To accommodate that growth, the nonprofit recently moved from downtown Colorado Springs to the city's north side, 6385 Corporate Drive.

Classic Homes, which previously owned the building, sold it to the nonprofit for \$7.5 million — roughly \$3 million below its appraised value, Ervin said.

The move also will allow the nonprofit to expand some of its services, such as possibly extending its occupational, physical and speech-language therapy programs to adults, to better serve clients as they age.

It's meant to ensure the nonprofit keeps pace with the needs of thousands of Pikes Peak region residents.

"We didn't move because we needed new and more space now," Ervin said. "We're also keeping our eye on what we think is the future of not only developmental disability services in Colorado, but all long-term services and supports in Colorado.

"The inevitable conclusion is that this is going to continue to grow."