



New Frontiers: Opportunities and Settings for CHW Impact

People Incorporated Mental Health Services

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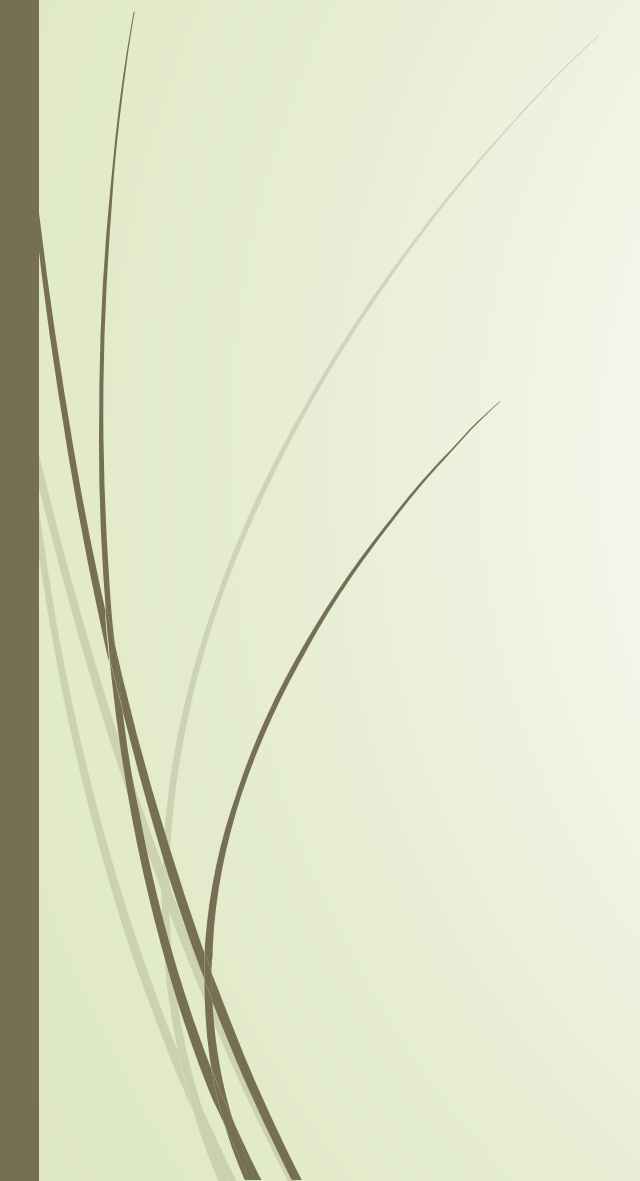
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PEOPLE MENTAL
INCORPORATED HEALTH
SERVICES



People Incorporated Mental Health Services

- ▶ Serves over 15,000 consumers per year through the Twin cities and surrounding regions
- ▶ Over 60 programs and services areas
 - ▶ Children's and family programs, crisis residence, MI/CD Treatment, residential services, programs to help the homeless, case management services, and more!

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- “Supporting Mental Health and wellness in our community through collaboration and Integration of care.”

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- People Incorporated Organizational Restructure
 - Launched Integrated Services Division (2016/2017): expanding on our organizational commitment to whole person health
 - Foundational Health Services
 - Nursing Services
 - Foundational Wellness Services
 - **Community Health Worker Services – first CHW (Angela) joined the team in October, 2016**
 - Tobacco Treatment Services
 - Contract Wellness Services (yoga, tai chi, massage, acupuncture)



Needs



- ▶ **Intervention and Services:** People with serious mental illness (SMI) dies 20-25 years earlier than the general population
- ▶ **Treatment and Access to Care:** High Incidence of co-morbidity (chronic disease) and co-occurring mental health and addiction disorders



Challenges



- Complexities that comes with the population we service;
Behavioral or cognitive challenges
- Mistrust of the system
- Lack of knowledge and resources
- Provider Burdened and declines additional providers
- Lack of treatment services
- Funding sources



PI's CHW Model

- ▶ Ohio Pathways Model
 - ▶ Improves health and social outcomes through the completion of individual pathways
 - ▶ The Pathways model developed as a strategy to track and improve accountability for positive, measurable changes
 - ▶ Pathways Model guiding principles:
 - ▶ (1) Find: identify those at greatest risk
 - ▶ (2) Treat: ensure treatment through evidence-based interventions and evaluate their impact
 - ▶ (3) Measure: document and evaluate benchmarks and final outcomes.
- ▶ We currently utilize 21 different pathways. A few examples:
 - ▶ Education Pathway
 - ▶ Social Service Referral Pathway
 - ▶ Medication Assessment Pathway



Incorporation of the Pathways Model

- ▶ Building the model into our existing electronic medical record system – Evolv
 - ▶ CHW referrals
 - ▶ CHW initial screening and completion of the World Health Organization Quality of Life screening
 - ▶ CHW Standing Order – Population Based
 - ▶ CHW Progress Notes (billable)
 - ▶ CHW Treatment Plan (mechanism to track Pathway/goal progress and completion)
- ▶ Utilization of Best Practice Guidelines and identified health and wellbeing curriculum and resources to create person centered care plans which lead to the successful completion of pathways



Results – What Are We Finding?

- ▶ Q4 – 2017
 - ▶ Enrolled 47 new consumers
 - ▶ Provided 54 individual CHW sessions where one or more pathways were opened per session
 - ▶ Conducted 16 group health education classes on nutrition, physical activity, mindfulness, sleep, and chronic disease education, prevention, and management
 - ▶ Group attendance: 31 unduplicated and 65 duplicated
- ▶ Q1 – 2018
 - ▶ Enrolled 40 new consumers
 - ▶ Provided 44 individual CHW sessions where one or more pathways were opened per session
 - ▶ Conducted 1 billable/21 non-billable group health education classes on nutrition, physical activity, mindfulness, sleep, and chronic disease education, prevention, and management
 - ▶ During this time period, 105 units (\$1,911.00) were billed and at this point, \$86.20 has been paid.



What are the Lessons Learned as a New Frontier utilizing CHW in Behavioral Health Settings?

- CHW Impact: Further supports our organizational Mission and allows a streamlined systems of care for our consumers.
- Change Takes Time but change is possible
- Much is given much is regarded
- ***There is still lots of work to be Done.....***



Challenges and Opportunities

- ▶ Difficulties of team integration
 - ▶ Additional training tools and opportunities
 - ▶ Inclusion in team meetings and communications
 - ▶ Growth and presence in the broader health care community
- ▶ Lack of understanding of the CHW role and how it fits in with the consumer care team
 - ▶ See above
- ▶ Sustainability - Billing: low reimbursement and the lack of reimbursement
 - ▶ Working with internal and external to trouble shoot claim denials
 - ▶ Continue collecting data showing the benefits of CHW services and the shortfalls of current reimbursement rates
 - ▶ Supplementing with grant funding



Challenges and Opportunities

- ▶ **Maintaining clients with fluctuating acuity of needs**
 - ▶ Learning about the population being served and determining, in advance, if a client may not be an appropriate fit for CHW services
 - ▶ Additional support from the consumer's care team – warm hand-offs
- ▶ **Producing significant, quantitative results to show ROI**
 - ▶ Compile data and results collected throughout the broader community (larger sample sizes and more impactful data to influence positive opportunities for CHW services)