

Integration of Mental Health, Physical Health, and Wellness Services in Mental Health Setting

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&

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Objectives

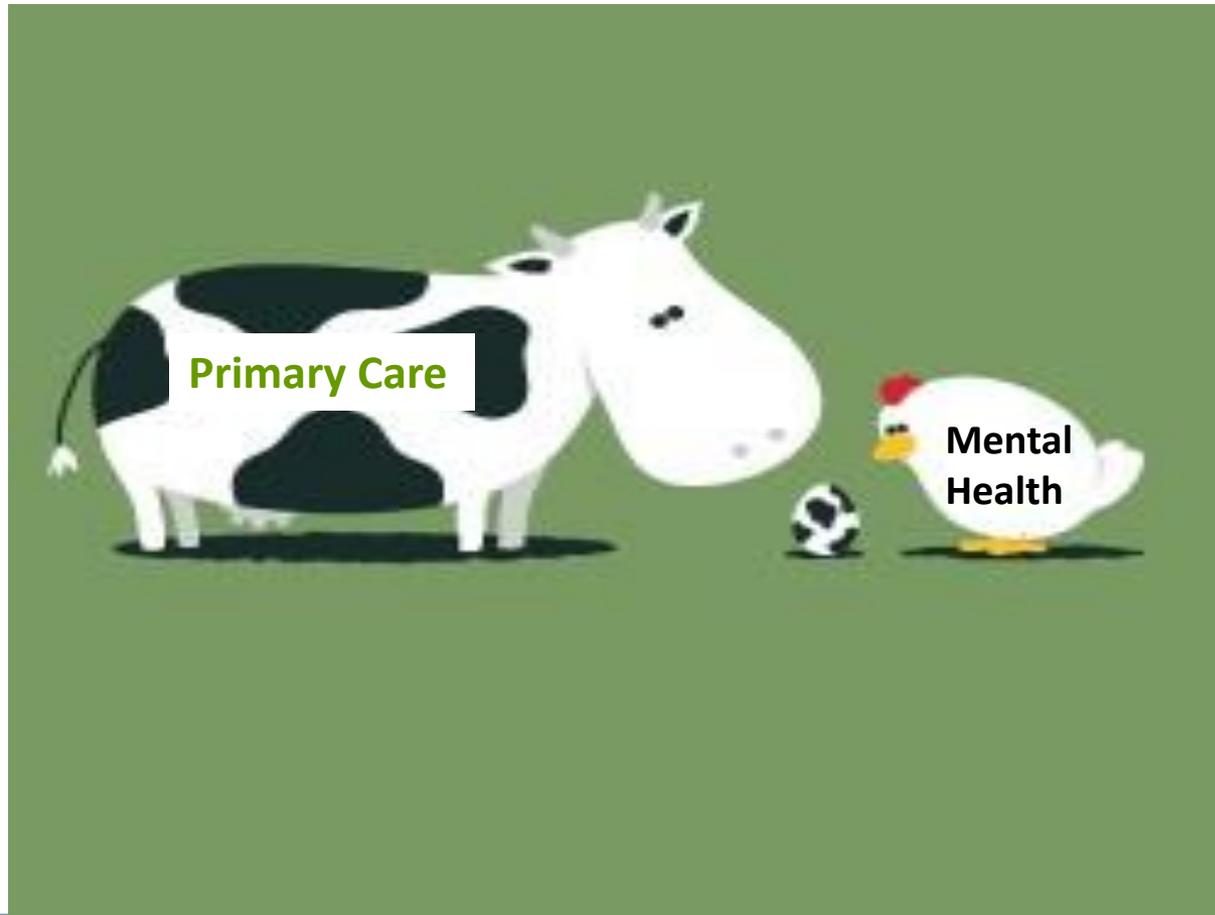
- Increase awareness of health challenges for individuals diagnosed with severe and persistent mental illness
- Explore a model of integration of primary care and wellness into community mental health services
- Understand the role of Peer Wellness Coaches in working with people with serious mental illness
- Examine outcomes of physical health indicators as a result of “reverse integration”

Why Integration?

- People with serious mental illness and addictions who utilize publicly funded services die, on average, 25 years earlier as a result of untreated chronic health conditions
- Cascadia BHC is working to increase consumer health by integrating primary care into community mental health with peer delivered wellness supports.
- Our goal: achieve the triple aim of healthcare reform



It's Not Easy



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Oregon Partnership for Health Integration (OPHI)



- Outside In primary care is integrated onsite into Cascadia's programs
- Care coordination by Cascadia's Nurse Care Manager
- Health and wellness services provided by Cascadia's Peer Wellness Coaches
- Evaluation partner is Portland State's RRI
- Use of population based data to inform treatment services



Target Populations

Outpatient Clinics

- Multnomah County
- Clackamas County
- SPMI population
- No PCP or not a strong relationship with PCP

Supportive Housing

- Chronic homelessness
- History of difficulty engaging in services
- SPMI population
- No PCP or not a strong relationship with PCP



GOALS



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Data Collection

- Process for data collection
- Baseline data for all grantees
 - NOMs interview
 - Mechanical vitals
 - labs
- Reassessments
- Incentives
- Individual & population data
- Health disparities reporting



Health Outcomes



Health Indicator	# of Cases	At-Risk Baseline	At Risk 2 nd Interview	Outcome Improved	No Longer at Risk	Outcome Remained at Risk
BP- total	87	32.2%	32.2%	19.5%	12.6%	19.5%
Waist Circum.	67	67.2%	59.7%	47.8%	11.9%	55.2%
BMI	77	84.4%	79.2%	53.2%	9.1%	75.3%
Breath CO	64	43.8%	42.2%	28.1%	4.7%	39.1%
HgbA1c	27	29.6%	25.9%	14.8%	3.7%	25.9%
HDL	30	30.0%	30.0%	16.7%	0.0%	30.0%
LDL	29	24.1%	27.6%	20.7%	3.4%	20.7%
Triglycerides	26	30.8%	38.5%	7.7%	3.8%	26.9%

Service Outcomes

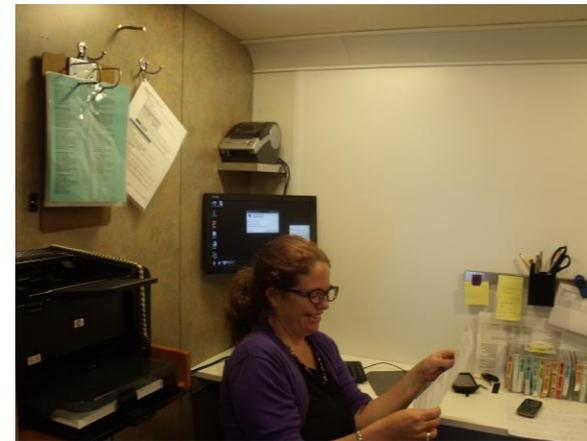
NOMs	# of Cases	Positive at Baseline	Positive at 2 nd Interview	Outcome Improved	% Change
Healthy Overall	59	32.2%	47.5%	25.4	47.4
Functioning in everyday life	60	21.7%	38.3%	53.3%	76.9%
No serious psychological distress	60	45.0%	58.3%	21.7%	29.6%
Retained in community	59	84.7%	88.1%	10.2%	4.0%
Had a stable place to live	60	58.3%	75.0%	16.7%	28.6%
Attending school/work	60	13.3%	15.0%	5.0%	12.5%
No involvement with criminal justice system	59	98.3%	98.3%	1.7%	0.0%
Socially connected	59	37.3%	44.1%	44.1%	18.2%

Care Teams



- Multidisciplinary
- Care coordination to ensure continuity of care across systems
- Single record for all services
- Multi-agency care and discharge planning
- Health education

Primary Care Team



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Nurse Care Manager



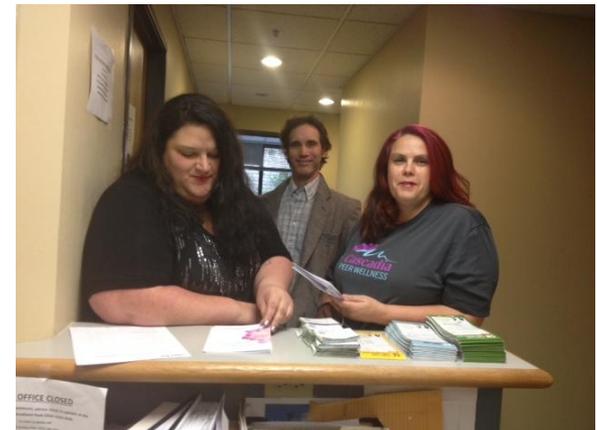
Alicia Molina, OPHI Nurse Care Manager, at the SAMHSA Conference in Phoenix AZ

- Coordinates care among providers
- Triage non-emergency situations
- Program development and implementation

- Facilitates education and skill building for clients
- Provides training and on-site support for Peer Wellness Coaches

Peer Wellness Specialists at Cascadia

- OPHI
- Project Respond
- Housing Outreach Team
- Health Commons Grant
- Forensics Assertive Community Treatment
- Firefly
- Standing Stone
- Plaza
- Supported Education
- Villebois



Peer Wellness Coaching

“We are working to improve the quality of care and overall health of OPHI participants.”

- Supports participants in setting, tracking, and achieving health goals
- Ensures participants have access to the tools they need to work towards health and wellness goals
- Identifies strategies to support better integration of physical and behavioral healthcare with providers
- Supports participants in accessing community resources, including benefits
- Provides traditional peer support services

Quick Guide: Physical Health Indicators

HEALTH MEASUREMENTS	TERM	"AT RISK" RANGES
blood pressure (systolic/diastolic)	mmHg	≥ 130 (S) / ≥ 85 (D)
waist circumference	cm	>102 (M) / >88 (W)
body mass index	BMI	≥ 25
breath CO (carbon monoxide)	ppm	≥ 10
HDL cholesterol	mg/dL	<40
LDL cholesterol	mg/dL	≥ 130
triglycerides	mg/dL	≥ 150

Physical Health Indicator Explanations

blood pressure: systolic blood pressure is measured after the heart contracts and is the top number; diastolic blood pressure is measured when the heart is at rest and is the bottom number

waist circumference: waist circumference measurement helps determine abdominal fat which is associated with an increased risk of heart disease, diabetes, some cancers and even early death

body mass index (BMI): BMI is a number calculated using a person's weight and height and can be an indicator of body fatness; BMI does not measure fat directly, but is a screening tool to identify possible weight problems and to determine if they pose a health risk ($BMI = kg/m^2$)

breath CO (carbon monoxide): carbon monoxide is a colorless, tasteless and odorless gas that is highly poisonous (cigarette smoke can contain high levels of CO); CO Poisoning symptoms include: fatigue, headaches, dizziness, weakness, nausea & vomiting

HDL cholesterol: high-density lipoprotein (HDL) cholesterol is a combination of fats (lipids) and proteins in which lipids are transported in the blood; HDL cholesterol is the "good" cholesterol that may lower the risk of coronary artery disease

LDL cholesterol: low-density lipoprotein cholesterol is referred to as the "bad" cholesterol because elevated levels of LDLs are associated with increased risk of heart disease

triglycerides: triglycerides are the main ingredient in vegetable oils and animal fats, and are also produced by low physical activity, cigarette smoking, being overweight, high carbohydrate diet and excess alcohol intake

How can I lower my risk?

In general, maintaining a healthy weight, eating nutritious food, being physically active and not consuming tobacco all contribute to decreased risk of developing disease.



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Cascadia
BEHAVIORAL HEALTHCARE



HEALTH Rx

Patient Name: _____ Today's Date: _____

Patient DOB: _____ Patient Phone Number: _____

Medical condition/Reason for referral: _____

Follow-up recommendations for improvement:

- lower blood pressure lower cholesterol diabetes management increase exercise
- nutrition & healthy eating tobacco cessation weight management other: _____

Follow-up GROUP recommendations: How often: _____ for _____ times a week.

- Acupuncture (OPHI clients only) Art, Jive, & Mo! Free Dance exercise and/or yoga
- Learning About Healthy Living Living Well LOTUS other _____

Interested in enrolling in OPHI? Yes No



Please bring this form with you when you visit your OPHI Team!
Our OPHI team is available from 8:30-5:00 PM



Contact for an appointment:

Alicia Molina - RN Care Coordinator 503.544.7481
Sybil Berkley - Peer Wellness Coach 503.206.1656
James Whipple - Peer Wellness coach 503.206.1119
John Paul Marchand - Peer Wellness Coach
Jamie Montoya - Peer Wellness Coach

Follow-up for referral Provider's Name: _____ Contact: _____

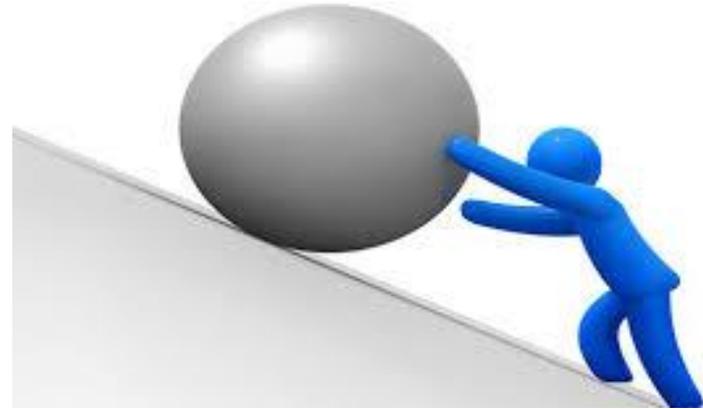
Health and Wellness Groups

- Learning About Healthy Living (tobacco cessation)
- LOTUS (Lifestyles Overcoming Troubles Utilizing Supports)
- Art, Jive, and Mo!
- My Life, My Health
- Weight Management for Wellness and Recovery
- Living Well (Stanford's Chronic Disease Self Management program)
- Physical activities (walking, yoga, chair exercises)

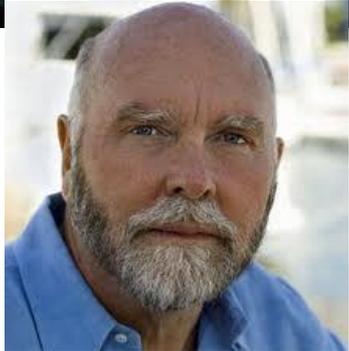


Moving Forward

- Service delivery model for capacity and sustainability
- Behavioral health home designation
- Data exchange and disease registry
- Clinical pathways



Success Stories



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Feedback from Clients...

Dr. Rieke is awesome! She hooked me up with everything I needed, and took care of me. It was casual, and easy. You all should get with this program. It was awesome!

Feedback from Clients...

The support that I get is amazing and it gives me hope. I also enjoy how I can relate to someone who has gone through similar things. She's always there for me and I believe she really cares.

Feedback from Clients...

You [OPHI] have changed my life. I'm so grateful that this program came to Cascadia. I can see that this program will help me make real changes with my health.