


An Organization's Incremental Journey Toward Whole Person Care: Practice Improvement in Real Life


NATCON 18

**An Organization's Incremental Journey Toward Whole Person Care:
Practice Improvement in Real Life**
Shannon Mong, Psy.D; Kent Eller, MD
Telecare Corporation




START HERE: Overview

OUR VISION




WPC Workforce Development



Clinical Practice Improvement

Population Health & Wellness Analysis




The Challenge:

- Building clinical practices don't fully engage individuals at high risk due to substance use and/or mental health conditions.
- Customers don't provide funding for program redesign.

Our Strategy:

- Refocus Current Clinical Practice, to include Whole Health, with heavy focus on Clinical Wellness.
- Provide Incentive Model - new clinical models for coordinated care that improve

Client Education



The Challenge:

People use services often don't:

- Understand their physical health conditions or how substance information on the effects of substance use on their health.

Goal:

Mental health providers are regularly addressing and integrating substance use information into their health conditions, helping them:

- Understand their condition and
- Address substance use and help healthy life outcomes.

Results

Telecare Corporation's Whole Health Program

Telecare Corporation's Whole Health Program is a comprehensive approach to patient care that integrates physical, mental, and social health. The program is designed to provide a holistic view of the patient, ensuring that all aspects of their health are addressed. This approach leads to improved patient outcomes and better overall health.

About Telecare Corporation

Spectrum of Services

Services & Solutions for Primary, Specialty, & Behavioral Health

Telecare Corporation provides a wide range of services and solutions for primary, specialty, and behavioral health. These services are designed to meet the needs of patients and providers, ensuring that all aspects of health are addressed. The company's commitment to innovation and excellence is evident in its comprehensive approach to patient care.

Shannon Mong, Psy.D; Kent Eller, MD

Telecare Corporation



PRESENTED AT:



START HERE: OVERVIEW

OUR VISION

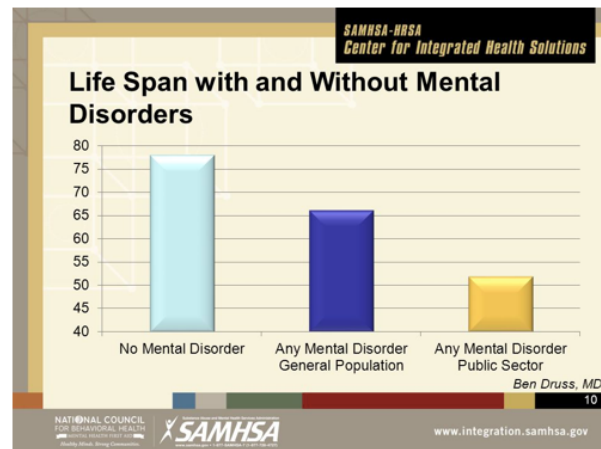


To achieve health equity we:

- **VALUE** the lives of all people equally and believe everyone has the right to good health.
- **FOCUS** on what we do best - excellent, recovery-centered care that enhances motivation for change
- **PROVIDE** our staff with knowledge and tools that will improve health outcomes for the people we serve
- **ACT** to address lifestyle risk factors, improve physical health care, monitor and follow-up on high-risk physical health and substance use conditions
- **MEASURE** outcomes and continually improve

WHY

- People with a severe mental illness have a **decreased life expectancy** of nearly 20 years
- Chronic **illnesses are bidirectional**
- **Siloed and underfunded delivery systems** mean that 60 million adults in the United States are not receiving adequate primary care, 33% of adults with SMI/SED aren't receiving any mental health services, and 90% of people with substance use conditions aren't receiving any substance use care (Ron Manderscheid, 2014)



WHAT

We focused on 2 primary areas:



1. **Enhance Current Clinical Practices**
to include Whole Health, with heavy focus on lifestyle modification
2. **Establish Innovation Hubs** – new clinical models for coordinated care that improve outcomes & reduce cost for SMI population

HOW

8 CORE ELEMENTS

- **Self-Assess**
organizational capacity in each domain
- **Prioritize** 1-3 impactful areas
- **Plan** projects to build capacity - large projects for high priority areas, incremental change in other areas



LESSONS LEARNED



- **Educate senior leadership** team first
- **Engage all staff** to see health equity is a social justice issue
- **Maintain focus on 8 core elements**
- **Communication clear and consistent**
- **Adapt plans** when funding appeared or disappeared
- **Small steps matter** -- sustain momentum

WPC WORKFORCE DEVELOPMENT



The Challenge:

2 challenges for Workforce Development:

1. Farflung Workforce: Telecare's operations are spread across over 100 programs in 8 states.



2. Multidisciplinary Workforce

- **Behavioral health providers** are experts in enhancing client motivation to make healthier choices; however, they **weren't prepared to address chronic physical health conditions nor substance use**.
- **Nurses** have the knowledge, but **didn't have the expertise in motivation enhancement**.

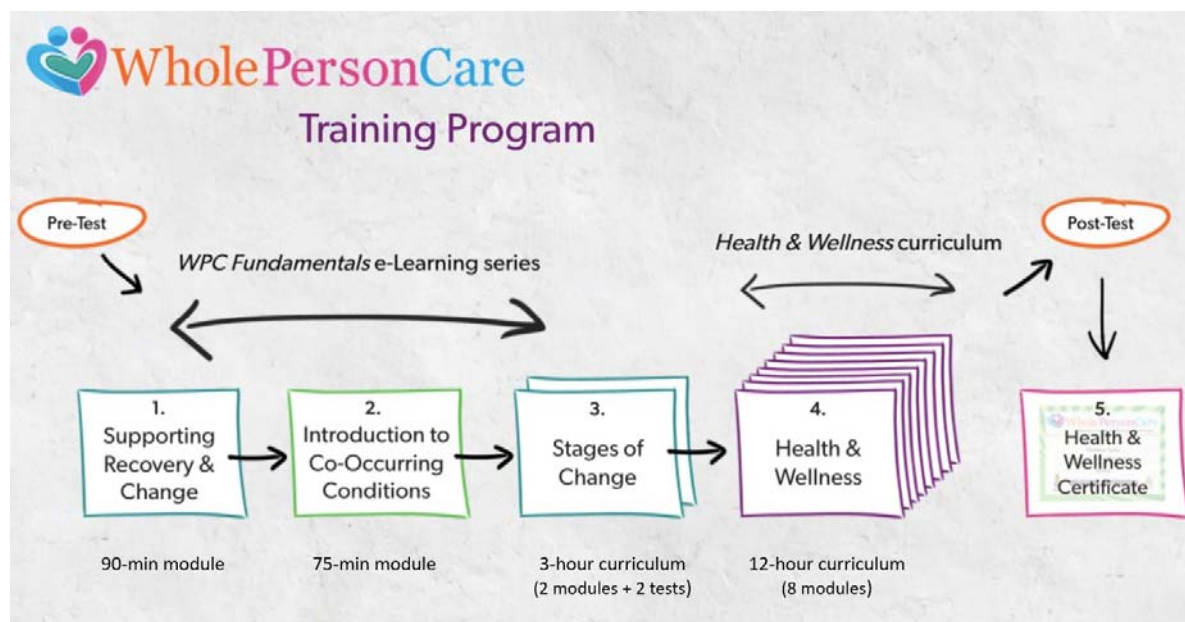
Goal:

Every Telecare clinical provider:

- **understands the importance** of addressing "whole health"
- has **basic knowledge** co-occurring substance use and chronic physical health conditions, and
- **uses tools** to engage clients in stage-matched conversations to enhance motivation.

Approach:

Telecare-designed comprehensive **18-hour eLearning program** that culminates in a certificate.



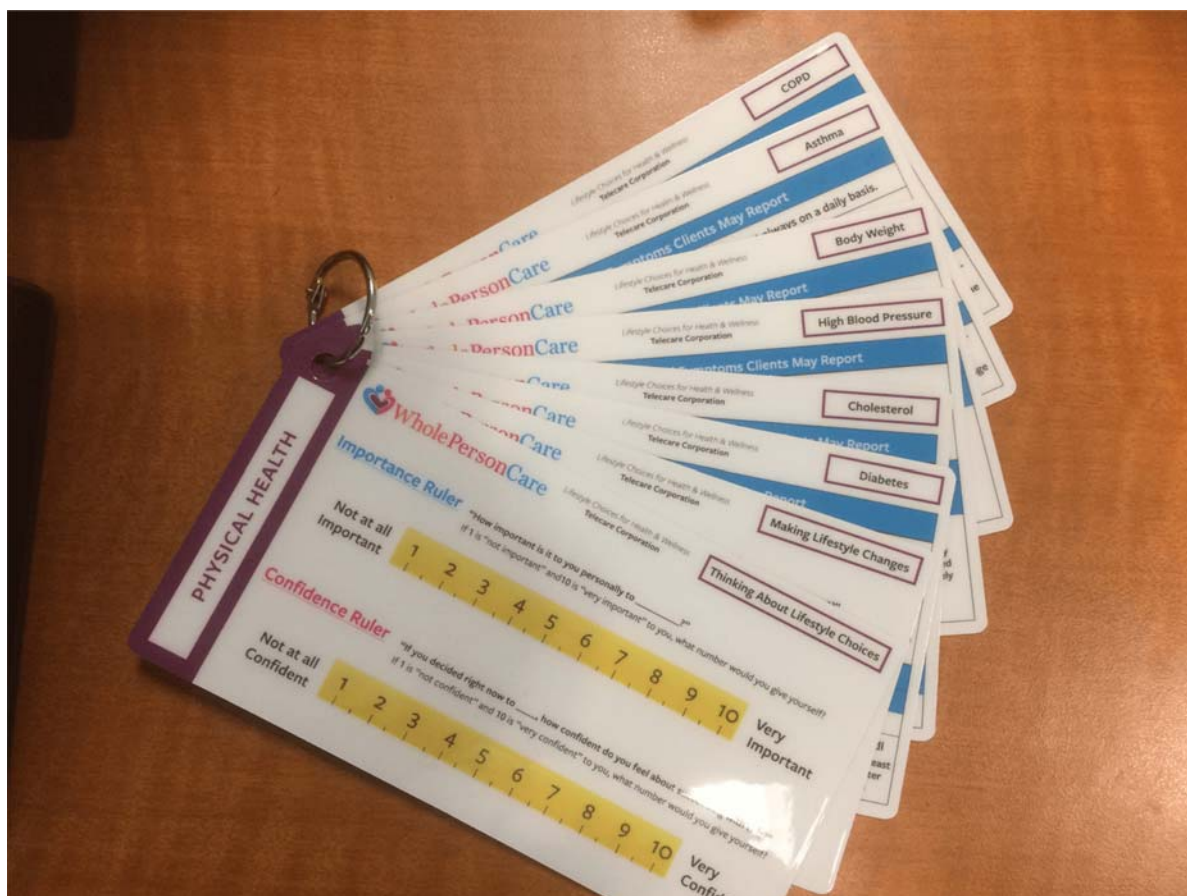
Curriculum covers:

- stages of change
- introduction to substance use and addiction
- significant learning about chronic health conditions -- including stress management

Takeaways:

1. Required **culture shift AND knowledge acquisition**. This meant building our own training program that would be evocative and consistent with Telecare's recovery-centered culture.

2. **Engaged clinical leaders** disseminate the message (and culture shift) to the programs.
3. Learners love the **laminated reference cards** that summarize/reinforce key content.



4. A large-scale training plan should be accompanied by plan to evaluation this shift (we were late to put this into place).
5. Time for training is always a challenge!

INTERESTED?

Take a Peek below at videos from our **WPC Training Program**

[VIDEO] https://player.vimeo.com/video/266107868?app_id=122963

[VIDEO] https://player.vimeo.com/video/263429413?app_id=122963

[VIDEO] https://player.vimeo.com/video/263430827?app_id=122963

CLINICAL PRACTICE IMPROVEMENT



The Challenge:

- Existing clinical practices don't fully engage individuals at high risk due to substance use and/or chronic physical health conditions.
- Customers don't provide funding for program redesign.

Our Strategy:

1. **Enhance Current Clinical Practices** to include Whole Health, with heavy focus on lifestyle modification
2. **Establish Innovation Hubs** – new clinical models for coordinated care that improve outcomes & reduce cost for SMI population

What We Did:

1. **Co-occurring Education Groups (COEG).** Developed manualized curriculum to reach people in pre-contemplation and contemplation stages of change around substance use.
2. **SmartSets.** Decision trees that enforce key elements of health integration and identify optimal touch points for motivational enhancement.
3. **Innovation Hubs.** Partnership with customers to build new coordinated care clinical models that

improve outcomes & reduce cost for SMI population -- test and refine new processes and tools to disseminate broadly.

4. **EBP Clinical Framework.** Identify a handful of interdependent EBPs. Critical skills matched by staff role and client acuity level.

INTERESTED?

Take a Peek below for more info about the 4 clinical practice improvement projects.

1. Co-Occurring Education Group (COEG)



The Need:

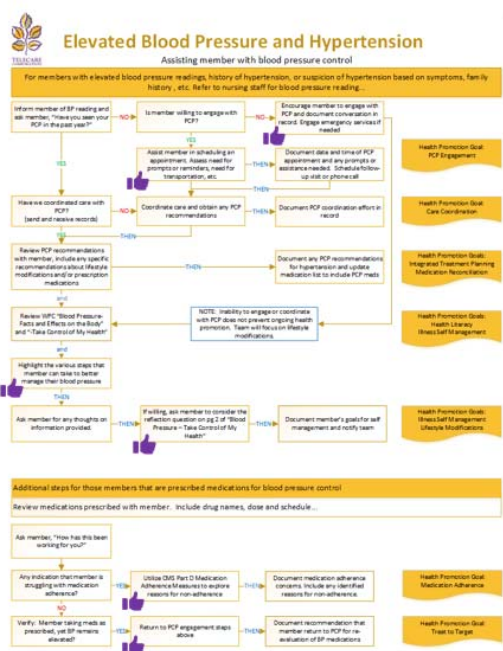
- 70% of people we serve are in pre-contemplation or contemplation around their co-occurring substance use
- People in pre-contemplation and contemplation stages of change aren't engaged by traditional substance education and recovery groups.

We Responded:

- **Developed manualized curriculum** for an education group that is open and continuous
- Integrates substance use education with Telecare's culture of **respect and nonjudgment**
- **Works across service delivery continuum** (community, residential, sub-acute)
- **Easy to implement** – now in 80 of our 100+ programs.

2. Smart Sets

Decision tree that enforces key elements of health integration and identifies touch points for motivational enhancement



Smart Set Goals:

- Identify touch points for motivational enhancement
- Primary Care Physician (PCP) engagement
- PCP coordination
- Medication Reconciliation
- Integrated Care Planning
- Increase Health Literacy
- Illness Self Management
- Lifestyle Modifications
- Medication Adherence
- Treat to Target

3. Innovation Hubs

The Need:

- **High utilizers with SMI** have co-occurring substance use, and chronic physical health conditions
- **Limited funding** available to design, test, and improve innovative clinical practices to better serve that population

We Responded:

- Partner with customers to build **new programs for high-utilizers** that improve outcomes & reduce cost for SMI population (Inland Empire Health Plan, Santa Clara County, Kaiser San Diego)
- Test and refine **innovative processes and tools**
 - Whole Health **Treatment Planning**
 - Whole Health **Screening Protocols**
 - **Wellness Snapshots**
 - **Prioritization Report** – uses data in EHR to instantly prioritize focus of morning Huddle
- **Broadly disseminate** what works within our existing service array



Prioritization Report

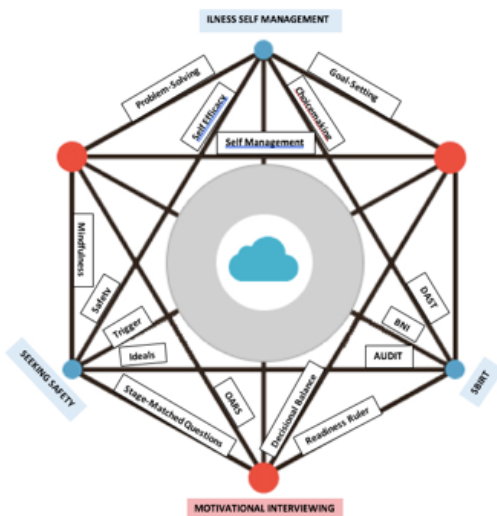
- Screening data input into EHR
- Clinicians update "Wellness Snapshot" in EHR every morning
- Team instantly produces up-to-date report
 - Data Driven Prioritization
 - Organizes focus of morning Huddle

Last Name	First Name	Suicide Ideation	Increase in Acuity	Excessive Screening Value	Hospitalized	BMI	BMI Flag	LDL-C	LDL-C Flag	HbA1C	HbA1C Flag	Blood Glucose	BP	BP Flag	Carbon Monoxide	Carbon Monoxide Flag	AUDIT	AUDIT Flag	DAST-10	DAST Flag
<input type="checkbox"/> Huddle Priority: (1) Very High (2 records)																				
Rose	Axl	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	30.4	<input checked="" type="checkbox"/>	136	<input checked="" type="checkbox"/>	41.0	<input checked="" type="checkbox"/>	129 / 92	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	25	<input checked="" type="checkbox"/>	22	<input checked="" type="checkbox"/>	4	<input checked="" type="checkbox"/>
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<input type="checkbox"/> Huddle Priority: (2) High (4 records)																				
Holiday	Billy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	28.7	<input type="checkbox"/>	115	<input type="checkbox"/>	86.0	<input checked="" type="checkbox"/>	-	<input type="checkbox"/>	<input type="checkbox"/>	-	<input type="checkbox"/>	4	<input type="checkbox"/>	6	<input checked="" type="checkbox"/>
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Xavier	Angela	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	32.0	<input checked="" type="checkbox"/>	140	<input checked="" type="checkbox"/>	6.0	<input checked="" type="checkbox"/>	-	<input type="checkbox"/>	<input type="checkbox"/>	21	<input checked="" type="checkbox"/>	8	<input checked="" type="checkbox"/>	-	<input type="checkbox"/>

TAKE A PEEK at the video below about the **Partners In Wellness** program -- nation's first Pay for Success mental health program

[VIDEO] <https://www.youtube.com/embed/R5jLgpyWJII?feature=oembed&fs=1&modestbranding=1&rel=0&showinfo=0>

4. EBP Clinical Framework



The Need:

- Overlap between skills in EBP
- Evidence doesn't always exist for efficacy with our population (SMI, culture, age)
- Limited time available for training
- Range in service provider education (masters, BA, high school)

We Are Producing:

- **EBP Map** - handful of interdependent EBPs with demonstrated efficacy with our population
- **Learning Ladder** – “core skills” learned by all providers; “specialized skills” practiced by specific providers at each program
- **Acuity Continuum** - critical skills matched to member acuity level

CLIENT EDUCATION



The Challenge:

People we serve often don't:

- understand their high-risk physical health conditions or
- have fact-based information on the effects of substance use on their health.

Goal:

Mental health providers are **regularly educating and engaging clients in conversation about whole health conditions**, helping them:

1. **understand their condition**, and
2. **enhance motivation for adopting healthy lifestyle choices.**

Approach:

Telecare created **easy-to-read handouts** that are visually engaging on a **range of whole health topics**.



There are two types of handouts:

1. **Facts & Effects** provide information about the condition and it's effect on the body and mind.
2. **Take Control** offer suggestion for how to manage or prevent the condition, and have open-ended questions a provider can use to open a dialogue.

The handouts both **inform and empower** by suggesting lifestyle changes that can directly improve one's health and wellness.



Body Weight and Health

Facts and Effects on the Body

Body Weight and Health

Having too much body weight can cause several different health problems. The U.S. Surgeon General has declared obesity an epidemic. Currently this affects:

- 78.6 million adults
- 15% of children between ages 6-19

400,000 people die each year from health problems due to obesity, making it the second leading cause of preventable death in the U.S.

How is Body Weight Measured?

Body Mass Index

One of the most common ways that body weight is measured is the **Body Mass Index** or BMI, which is calculated based on a person's height and weight. See the [Body Weight Calculations](#) handout. A person's BMI places them in one of five weight categories:

- **Underweight:** below 18.5
- **Healthy Weight:** 18.5 – 24.9
- **Overweight:** 25 – 29.9
- **Obese:** 30 – 40
- **Extremely Obese:** 41 and over

Obese and extremely obese are the weight categories associated with the most risk for health problems.

WAIST CIRCUMFERENCE

Another important body weight measurement is **waist circumference**. Carrying extra weight on your abdomen can be dangerous because that fat sits near the body's vital organs. Abdominal fat is associated with higher risks of cardiovascular disease, Type 2 diabetes, and some cancers. You can find your waist circumference by using a tape measure to measure around your waist, above your hip bones. A healthy waist circumference is typically less than half your height.

Risk Factors

A combination of many factors, often interrelated, can put people at risk for gaining or maintaining too much body weight:



Nutrition: What you eat and how much you eat are the principal factors for how much weight you gain and store! Foods that are high in sugar and saturated or trans fats, like those found in baked goods, dairy and some meats are the kinds of foods that can cause people to gain weight. Did you know that alcohol contains a lot of sugar? Drinking alcohol means consuming a lot of calories with no nutritional value (empty calories).

Inactivity: If you eat more calories than you burn through physical activity you will gain weight and keep it on.

Genetics: Your family history (or genes) can have something to do with how quickly you burn calories and where your body stores excess weight.

Psychiatric Medications: Several mood stabilizers and anti-psychotic medications are known to cause weight gain. Some of these medications include: Thorazine, Risperdal, Clozaril, Lithium, and Seroquel.

Impact on the Body

Having too much extra body weight can put a strain on your joints, organs and almost all systems in your body.

Prevention and Management

There are many things you can do to prevent weight gain, lose extra weight, or maintain a healthy weight. Making healthier food choices and getting regular physical activity can help.



WPC HEALTH & WELLNESS HANDOUT
BODY WEIGHT AND HEALTH



Body Weight and Health

Take Control of My Health

Prevention and Management

Whether you are at a healthy weight or trying to lose weight, you can always form healthy **lifestyle habits** including:

- Making healthier food choices.
- Getting regular physical activity.

I Have Extra Body Weight. Now What?

If your score on the BMI chart puts your weight in the overweight or obese categories, **lifestyle changes** can bring your weight into a healthier range. The two most important changes are **nutrition** and **physical activity**!

HEALTHY EATING

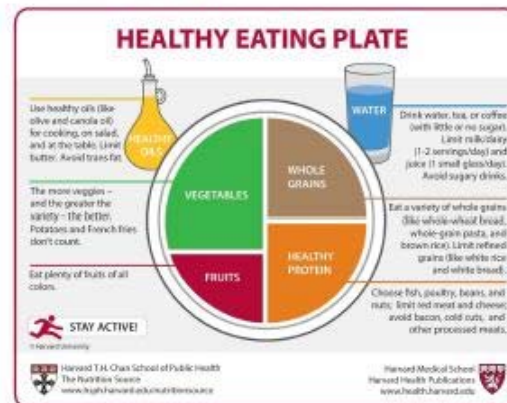
Making healthier food choices is the most important thing you can do to bring your body weight into a healthier range. What you eat and how much you eat is directly related to whether you lose, maintain, or gain weight.

The chart below shows the recommended number of calories to consume in one day.

Recommended Calorie Intake Based on Gender, Age and Activity Level				
Gender	Age	Activity Level		
		Sedentary (Inactive)	Moderately Active	Active
Female	19-30	1,800-2,000	2,000-2,200	2,400
	31-50	1,800	2,000	2,200
	51+	1,600	1,800	2,000-2,200
Male	19-30	2,400-2,600	2,600-2,800	3,000
	31-50	2,200-2,400	2,400-2,600	2,800-3,000
	51+	2,000-2,200	2,200-2,400	2,400-2,800

Dietary Guidelines for Americans 2010

The chart below shows a healthy eating plate, with foods that provide good nutrition. A full-size chart can be found at: <http://bit.ly/HealthyEatingPlateHarvard>



These recommendations may be quite different from your current eating habits. You don't have to change what you eat all at once. Instead, you can start by taking some smaller steps:

- **Replace** one or two fried or processed foods with a vegetable dish once or twice a day.
- **Add** fiber, vegetables, and fruit. The more you add, the less unhealthy foods you will naturally have room to consume.
- **Substitute** fresh produce in place of cookies, crackers, cakes, and other processed snacks.

Doing these things a little at a time can help you develop healthy eating habits.

Learn More At:

For some helpful interactive tools including calculators for your target calorie intake, BMI and the amount of calories an activity will burn, check out: <http://bit.ly/CalculatorsWeight>

For the USDA's online database of nutritional information for different foods including how many calories they contain, check out: <http://bit.ly/USFoodDB>



WPC HEALTH & WELLNESS HANDOUT
WHAT YOU CAN DO: BODY WEIGHT AND HEALTH

Physical Health Topics Covered Include:

- Diabetes
- Cholesterol
- Blood Pressure
- Body Weight

- Asthma
- COPD
- Stress

Substance Use Topics Covered Include:

- Tobacco
- Nicotine
- Alcohol
- Marijuana
- Cocaine and Crack
- Methamphetamine
- Opioids (Heroin and Pain Medication)
- Bath Salts



Methamphetamine

Facts and Effects on the Body



Some facts to know about methamphetamine use:

Methamphetamine — also called meth, crystal, chalk, crank, and ice — is a highly addictive drug.

94% of persons who smoke methamphetamine become addicted within six months of use.

Meth is 100% man made and may contain a number of toxic substances such as drain cleaner, lighter fluid, ether, antifreeze, and chemical fertilizer.

Methamphetamine use over time changes the brain, which can result in:

- Memory loss
- Depression/anxiety
- Psychotic symptoms
- Difficulties learning
- Difficulties with decision making which can make it hard to resist drug cravings

Tips for quitting, cutting down, or reducing harm:

Seek professional help. Quitting methamphetamine without help can be very difficult.

Identify people in your life — friends, family, and NA meetings — who can support your change.

Learn skills to manage cravings.

Avoid triggers and identify what triggers your use.

Tips to reduce the risk of harm, avoid sharing needles or engaging in unprotected sex.



The good news is brain recovery from methamphetamine is possible when a person stops using the drug for several months.

For more information on how methamphetamine may be affecting you, go to: www.drugscreening.org

To learn more about the health effects of methamphetamine visit:

<http://www.drugabuse.gov>



WPC SUBSTANCE USE HANDOUT
METHAMPHETAMINE

Takeways:

1. Staff report **increased confidence initiating conversations** through the use of the handouts.
2. **Clients report learning information** about their condition **for the first time**.
3. We've translated the handouts to **six threshold languages**, in response to provider request.
4. Handouts being **used by staff to manage their own chronic health conditions**.

RESULTS

Sample Outcomes from Two **Whole Health Focused** Programs

A joint project with **Inland Empire Health Plan**, a population management program for high utilizers showed statistically significant reductions in Psych Inpatient, Psych ER, Medical ER, and IOP utilization, as well as increased contacts with the assigned PCP.

The first mental health **"Pay for Success"** program in the US, a partnership with Santa Clara County, is surpassing "success targets". First year results show excess savings of \$508,482.



Utilization Comparison: 6 Months Pre & Post Enrollment in Telecare Program

Pre - 6 Months Enrollment in Telecare

	Number of Members	Member Months	Total Psych Admits	Psych Admits Rate	Total Psych Days	Psych Days Rate	Total Psych ER Visits	Psych ER Visits Rate	Total Medical ER Visits	Medical ER Visits Rate	Total IOP Auths Utilized	IOP Auths Utilization Rate	Total PCP Visits	PCP Visits Rate
Telecare Sample Population	54	301	148	5,900.33	886	35,322.26	240	9,568.11	261	10,405.32	40	1,594.68	57	2,272.43

Post - 6 Months Enrollment in Telecare

	Number of Members	Member Months	Total Psych Admits	Psych Admits Rate	Total Psych Days	Psych Days Rate	Total Psych ER Visits	Psych ER Visits Rate	Total Medical ER Visits	Medical ER Visits Rate	Total IOP Auths Utilized	IOP Auths Utilization Rate	Total PCP Visits	PCP Visits Rate
Telecare Sample Population	54	312	89	3,423.08	427	16,415.38	126	4,846.15	126	4,846.15	24	923.08	87	3,346.15

% Change Before vs After	↓ -66%	↓ -72%	↓ -107%	↓ -115%	↓ -90%	↓ -97%	↓ -107%	↓ -115%	↓ -67%	↓ -73%	↑ 34%	↑ 32%
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Partners in Wellness: Santa Clara County & Telecare

Innovation: First “Pay for Success” mental health program in the country

- An innovative six-year, performance-based contract to deliver publicly-funded services.
- Provider (Telecare) *at risk* to deliver savings by reducing clients’ use of Psychiatric Hospital, Psychiatric Emergency Services, State Hospital, and other mental health services while also ensuring clients’ wellness.
- Objectively evaluated by Dr. Keith Humphreys, Stanford University.
- Performance targets set to fully pay for program and return additional savings at the end of the six years.



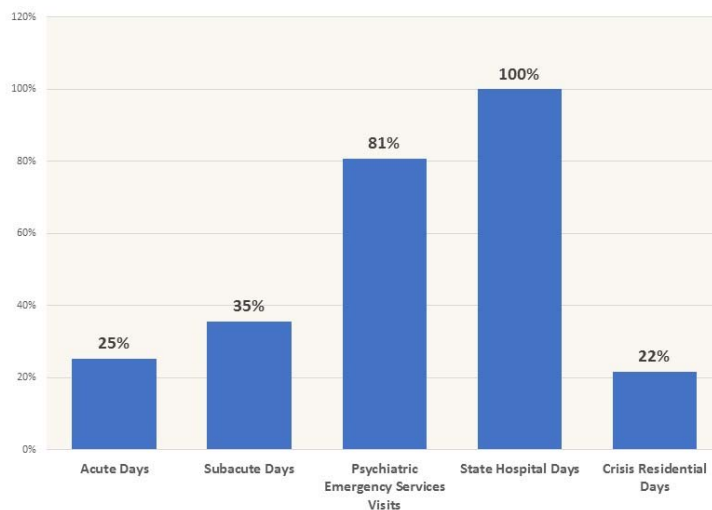
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Partners in Wellness – Santa Clara County & Telecare

Cost Savings

In the first year of
operation, the program
saved **\$508,482** over
the target

Partners in Wellness: January – December 2017 % Reductions in Usage Over Target - Year One Results



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ABOUT TELECARE CORPORATION

Spectrum of Services

Services & Solutions for Clients, Customers, Communities

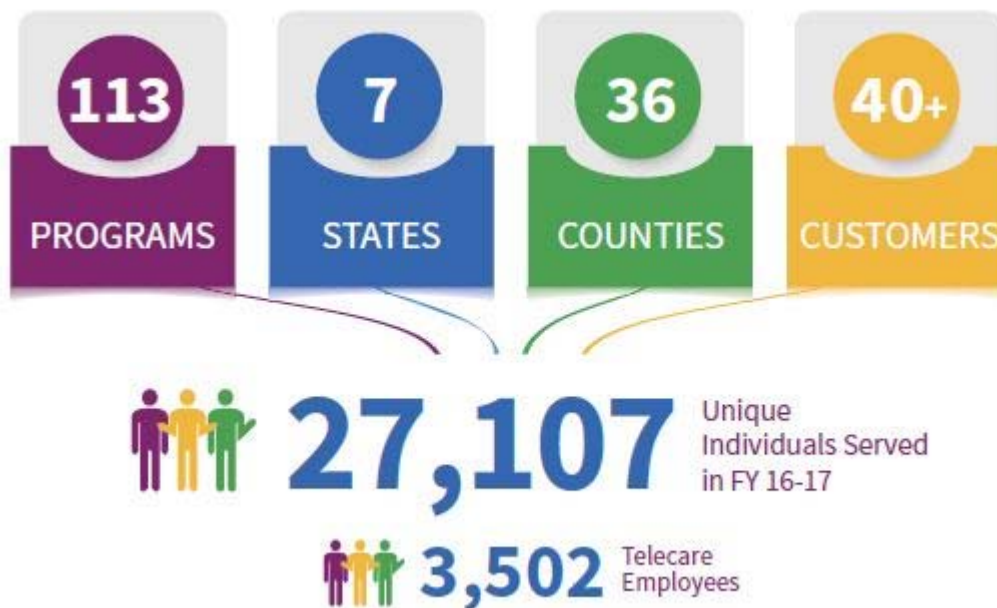
Since our founding in 1965, Telecare has grown and evolved to meet the changing needs of our clients, customers, and communities. As a family- and employee-owned company, we are proud to be trusted partners in transforming systems of care and are honored to make a difference in thousands of lives.

Collaborative Partnerships

We strive to be a collaborative, strategic, and responsive partner to our customers, attentive to local needs, and proactive in day-to-day management and longer-term planning.

Rapid Innovation & Implementation

We work in partnership with customers to design and implement new approaches to care, staffing, service delivery, and funding to best address local needs and opportunities.





About Telecare

- Founded in 1965
- Mission-driven
- Client-centered
- Values-based
- Commitment to continuous quality improvement
- Employee- and family-owned
- Woman-owned

Highlighted Capabilities & Resources

Telecare's size and scope enable us to offer our customers unique capabilities and resources.

Program Startup

Dedicated startup team
Facilities and real estate team
Licensing and certification experts

Staffing

Diversity commitment
Systems-driven recruiting, hiring, onboarding, and training

Clinical Care

TLC Physician Services Organization (psychiatry)
Telepsychiatry
Alternative prescribers

IT & Data Management

Director of Program Evaluation
Data interoperability support
Decision support tools

Community Options

55+ community-based programs (ACT, FSP, CM, ICM)
Customizable design options and flexible levels of care

Pay for Success

Telecare designed and operates the first mental health Pay for Success program in the United States.

Where To Find Us At NatCon!



Book an Appointment with Telecare During or After NatCon

Faith Richie, Senior Vice President of Development, 510-846-7679
 Jennifer Hinkel, Vice President of Development, 510-671-4600
 Robert Klar, Director of Workforce Planning & Talent Acquisition, (510) 747-0513

NatCon 2018

Telecare at a Glance

Thank you for your interest in Telecare. We welcome you to reach out anytime.
 Visit www.telecarecorp.com/natcon2018 for copies of our materials or to learn more.

Visit Us at Booth #438!

Learn about our Telecare services for individuals with SMI and complex needs, as well as diverse solutions for 44+ customers across seven states.



Join Us for Breakfast!

Join us for a warm breakfast on 4/24 from 7:00 to 8:30 AM in the Magnolia Room 2. We welcome you to enjoy a comfortable start to the day.



Lunch & Learn Panel Event

Join our panel event on Monday 4/23 from 12:00 to 1:00 PM, titled, "Alternative Payment Models: Pay For Success and Social Impact Bonds."

We will share our experience implementing the nation's first Pay for Success mental health program in partnership with Santa Clara County Behavioral Health Services in Santa Clara, CA.

View/download the presentation and get more info: www.telecarecorp.com/natcon2018



iPoster Presentation

Join us on Tuesday 4/24 from 1:30 to 2:00 PM to explore our iPoster and learn more about how we made progress with limited resources.

"Systems Improvement in Real Life: An Organization's Incremental Journey Toward Whole Person Care."

View/download the presentation: www.telecarecorp.com/natcon2018

Visit our WPC page to learn more: <http://www.telecarecorp.com/wholepersoncare>



Telecare Corporation | Respect. Recovery. Results. | www.telecarecorp.com

Come See Us at Booth #438!

- Say hello in person, get information, have a cookie!

Meet-and-Greet Breakfast With Telecare!

- 7:00 to 8:30am, Tuesday, April 24th, Magnolia 2 conference room

Lunch-n-Learn: Alternative Payment Models: Pay For **Success and Social Impact Bonds**

- Monday, April 23th, 12 to 1:00 pm, National Harbor 4-5, National Harbor Level

iPoster Session: Whole Person Care

- Tuesday, April 24th, 1:30 to 2:00 pm, Cherry Blossom Lobby, Ballroom Level

Contact Us!



Faith Richie, SVP of Development

510-846-7679



Jennifer Hinkel, Director of Development

510-671-4600



Robert Klar, Director of Workforce Planning & Talent Acquisition

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