HealthConnect

IFH
The Institute For Family Health

Cohort 2, September 2010 – September 2014 Northeast Learning Community New York, New York

"If I Knew then What I Know Now..."



About Our Program...



- Total 340 patients enrolled, +6%: Grant requirement 320 patients. Enrollment completed by October 2013
- · Population includes: Traumatic Brain Injury, Mental Health, Substance Abuse, Diabetes Care
- Health Navigation Services: Personal Health Navigator, Care Management, Reminder Calls, Medical Escorts, Individualized Wellness Planning, Medication Management, Time Management, Stress Reduction, Organizational Skills, Patient Advocacy, Nutrition Education, Fitness Education, Referral Follow Up
- Health/Wellness activities: Smoking Support Group, National Diabetes Prevention Program, Walking Group, Medication Management Workshop, Mindful Eating Group, Wellness Workshops for Patients/Staff, Food Shopping Excursions, Nutrition Demonstrations, Chair Yoga, Addiction Recovery Workshop. Groups and Workshops are tailor made to meet individual needs
- Specialist Care: Pain Management, Diabetes Management, Gynecology, Pain Medicine and Rehabilitation, Ophthalmology, Nutritional Counseling, Acupuncture, Gastroenterology, Neuropsychology, Substance Abuse Treatment
- Smoking Cessation: Nicotine Replacement Therapy, Individual Smoking Cessation Counseling, Smoking Support Groups



IFH - HealthConnect Staff

Jennifer Stone, Project Director

Amy Dimun, Program Manager

Randie Kozar, Health Navigator Supervisor

Shakeia Smith, Health Navigator

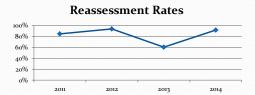


Accomplishments & Successes



- Reassessment Rate The reassessment rate for this quarter is 93.6%, up from 91% last quarter.
 The reassessment rate for 2014 (6th and 12 month) is currently at 85.4%
- Joined NYC Inter-borough RHIO
- Successful agency transition, from International Center for the Disabled (September 2010-December 2012) to The Institute For Family Health (January 2013 – present)
- EPIC Electronic Medical Record
- Blood Pressure Screenings by HealthConnect Medical Assistant for all psychiatry patients on atypical medications and/or identified as high risk.
- Buprenorphine Amy Dimun, Program Manager and Certified Alcohol and Substance Counselor has trained staff on buprenorphine treatment.

Graph shows annual grant reassessment rate from ICD through transitioning to IFH



Accomplishments & Successes – National Diabetes Prevention Program

The Institute for Family Health (IFH) partnered with the Center of Disease Control to offer the National Diabetes Prevention Program (NDPP).

NDPP is an evidence based lifestyle change program, tracking participants weekly for:

- Physical Activity participants are encouraged to be active for 150 minutes minimum per week
- Weight Loss participants can lose 5% to 7% of their body weight by being mindful of physical activity and healthy eating (i.e.) 10 to 14 pounds for a 200-pound person

The Phillips Family Practice at $16^{\rm th}$ Street launched its first Core Session in January 2014, completing 16 weeks May 2014 with the following measurable outcomes:

- 100% retention of participants
- 50% of participants met goal of 5% weight loss or greater
- Average weight loss for all participants combined 5%
- Average weight loss for all participants combined 65.5 lbs





Accomplishments & Successes - Wall Street Journal Article

HealthConnect Team in Smoking Cessation by Dr. Daniel Seidman, Director of Smoking Cessation Services at the Columbia University Behavioral Medicine Program. The HealthConnect Smoking Cessation Model was published in the Health Journal in the Wall Street Journal, "Helping the Mentally III to Quit Smoking" By Melinda Beck, 26 April 2011.

http://online.wsj.com/news/articles/SB10001424052748703856704576285131131372562

Some highlights from the article:

- "The pilot program began in January at the International Center for the Disabled (ICD), an outpatient psychiatric clinic. It uses nicotine-replacement therapy and one-on-one counseling with therapists trained to keep patients motivated and work through problems that arise. The results so far are promising. Therapists say they are surprised that some patients with mental illness have been eager to join the anti-smoking program.
- "Convincing mentally ill patients to quit has been a low priority in mental-health care in the past.
 Nearly half of all the cigarettes sold in the U.S. are smoked by people with a serious mental
 illness, according to a study in the Journal of the American Medical Association in 2000. People
 with schizophrenia, bipolar disorder and other mental illnesses are twice as likely to smoke as the
 general population, and they tend to smoke about 50% more cigarettes per day."

Accomplishments & Success – Smoking Cessation

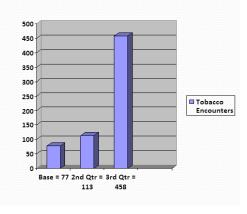


Due to the high co-morbidity between smoking and mental health symptoms, HealthConnect has continued to study smoking cessation as its CQI Project for 2014.

The project's goal is to show a 30% increase of patients engaged in smoking cessation as documented by tobacco use disorder and referral to smoking cessation group.

- 44% of cigarettes in the U.S. are smoked by people with a serious mental illness
- 75% of smokers have a past or current problem with mental illness or addiction
- 25 years—People with serious mental illness die that much sooner, on average, than the general population, mainly due to smoking related illnesses
- 27%—The percentage of an average monthly budget spent on cigarettes by people on public assistance
- 1.5%—The proportion of patients seeing an outpatient psychiatrist who receive treatment

Sources: JAMA; National Comorbidity Study National Association of State Mental Health Program Directors; Tobacco Control; American Journal of Addiction



Accomplishments & Successes – Weight Loss

TOTAL patient weight loss: 742 lbs

- Weekly Walking Groups
- Nutritional Counseling
- Food Journaling
- Menu Planning
- Mindful Eating Group
- Binge Eating Counseling
- Motivational Interviewing



Patient Success Story - John P:

Traumatic Brain Injury, pre-diabetic, obese, depressed, criminal history, isolation.

After losing 70 pounds, John the joined the Achilles Foundation and completed the NYC Marathon.

Binge Eating Project a.k.a. Healthy Eating Survey

Plan

Patients with a BMI > 30 complete a Binge Eating Survey, a 16 item questionnaire assessing the presence of a binge eating disorder.

Study/Do

Patients, who score high on the BES are referred to the mindful eating group, walking group and psychotherapy. Patients are given post BES test after 3 months of group and/or wellness counseling.

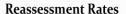
Act

Current weight loss is 742 pounds tracked over 64 patients, average weight loss 12 pounds /person.

Challenges & Outcomes

ICD to IFH:

- Two years into the PBCHI grant, our host agency the International Center for the Disabled (ICD) folded (2010 – 2012).
- The grant was moved Institute for Family Health (IFH) (2012 -2014).
- Not all patients moved with the grant and therefore we had a dip in our reassessment rate that year.
- However, with support of IFH, HealthConnect was able to regroup, increase enrollment and stabilize our reassessment rates.





Moving Forward, post PBHCI Funding

HealthConnect → **Health Homes**

As HealthConnect is finishing its final grant year September 2014, the program is transitioning the staff and patients into the Community Care Management Partnership Health Homes (Health Homes).

During this period, Health Connect staff attends all Health Homes and Care Management meetings and are included in clinical decision making for patients.

To date, HealthConnect has referred 58 of 177 high risk patients to the Health Homes program with a supplemental plan of transitioning all patients by September 30, 2014.





Words of Wisdom: Don't Do What We Did/or What I Wish We'd Done Differently

• Earlier MI training: Motivational Interviewing as been the basis of all the work we do with our patients. It is a change agent to over resistance.

Words of Wisdom: Get trained in MI!



Words of Wisdom: Tips for Success



- Use the list serve: Post questions, read responses. It is a very support online community!
- Teams: Create partnerships within your organization.
 Attend as many staff meetings as you can to include yourself and your PBHCI team.
- Humor: Don't take things personally. The goal is quality patient care. (and avoiding burnout!)