



SAMHSA-HRSA Center for Integrated Health Solutions

The Role of Peer Providers in Integrated Health

March 25, 2014



SAMHSA-HRSA Center for Integrated Health Solutions

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Key Points

- Analyze randomized trial outcomes showing significant impact on improving health
- Identify strengths peer providers bring to integrated health programs for system transformation
- Learn important roles peer providers are trained to deliver





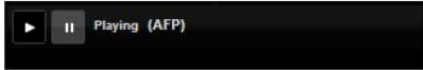

Today's Presenters

- **Larry Fricks**, Center for Integrated Health Solutions
- **Paolo del Vecchio, MSW**, Center for Mental Health Services
- **Laura Pancake, LCSW**, Pacific Clinics
- **Nancy Reed, MS, CM, CPRP**, Northcare Community Mental Health Center
- **Janette McKeever**, Northcare Community Mental Health Center

Before We Begin

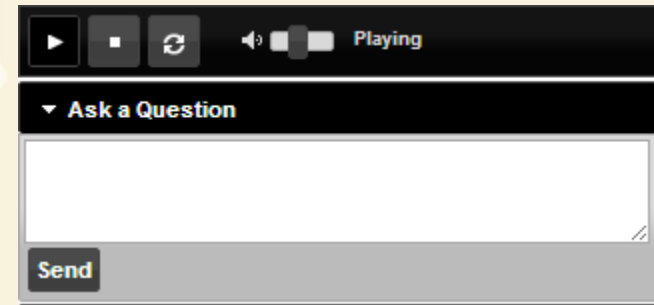
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Before We Begin

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Setting the Stage



Larry Fricks
Deputy Director
Center for Integrated
Health Solutions

Behavioral Health is Essential To Health



Prevention Works



Treatment is Effective



People Recover



Welcome

Paolo del Vecchio, M.S.W., Director
SAMHSA's Center for Mental Health Services



Health Navigator Certification Training: Project Bridge[®]



**The USC School of Social Work *in collaboration with*
Pacific Clinics**

**Laura Pancake, LCSW, Corporate Director, Pacific
Clinics**

History of Project Bridge

- 3-year pilot research project started in 2008
- Dr. Brekke and the Project Bridge team from the USC School of Social Work, *in collaboration with Pacific Clinics*

Funded by:

- UniHealth Foundation
- NIMH
- Clinical and Translational Science Institute at USC

Does Health Navigation Work? Results of a Pilot Randomized Controlled Trial (RCT)

Randomized 24 mental health consumers (from agency caseloads at Pacific Clinics)

- Treated Group: Received health navigation immediately
- Untreated Group: Waitlisted for 6-months

RCT Findings

Positive findings for the intervention in terms of:

- Acceptability to clients and agency staff
- Tolerability to clients
- Feasibility of integration into clinic and teams
- Feasibility for peer providers

Significant Impact on Health Status

After six months, **the total number of current health problems was reduced** for those receiving Health Navigation

Treated
Group

5.9
medical
problems

Untreated
Group

9.3 health
problems

Significant Impact on Health Status

- Significant reduction in overall bodily pain and the degree to which pain interfered with daily life

Significant Impact on Health Status

**Significant differences in medications
prescribed:**

Treated
Group

2 medications;
Symptoms
improved

Untreated
Group

4.7
medications;
Symptoms
worsened

Other Findings

- **Strong relationship** between the amount of bodily pain and the number of health problems
- Number of psychiatric medications:
 - Treated group decreased by 0.25**
 - Untreated group increased by 1.5**

Reduction in Choice of ER

Location selected by consumers for usual medical care:

	Before Health Navigation	After Health Navigation
ER	33%	0%
Urgent Care	17%	0%
Outpatient MD Office	44%	83%

Summary of Findings

The Health Navigation Intervention (“Project Bridge”) shows impact and promise for:

- Reducing **health problems**
- Reducing **bodily pain** related to health problems
- Impacting the **use of medications**
- Shifting **the locus of health care** from ER and UC to outpatient primary care

What is the Health Navigation Intervention (“Project Bridge”)?

A comprehensive health care engagement and self-management intervention

Critical Elements of Health Navigation

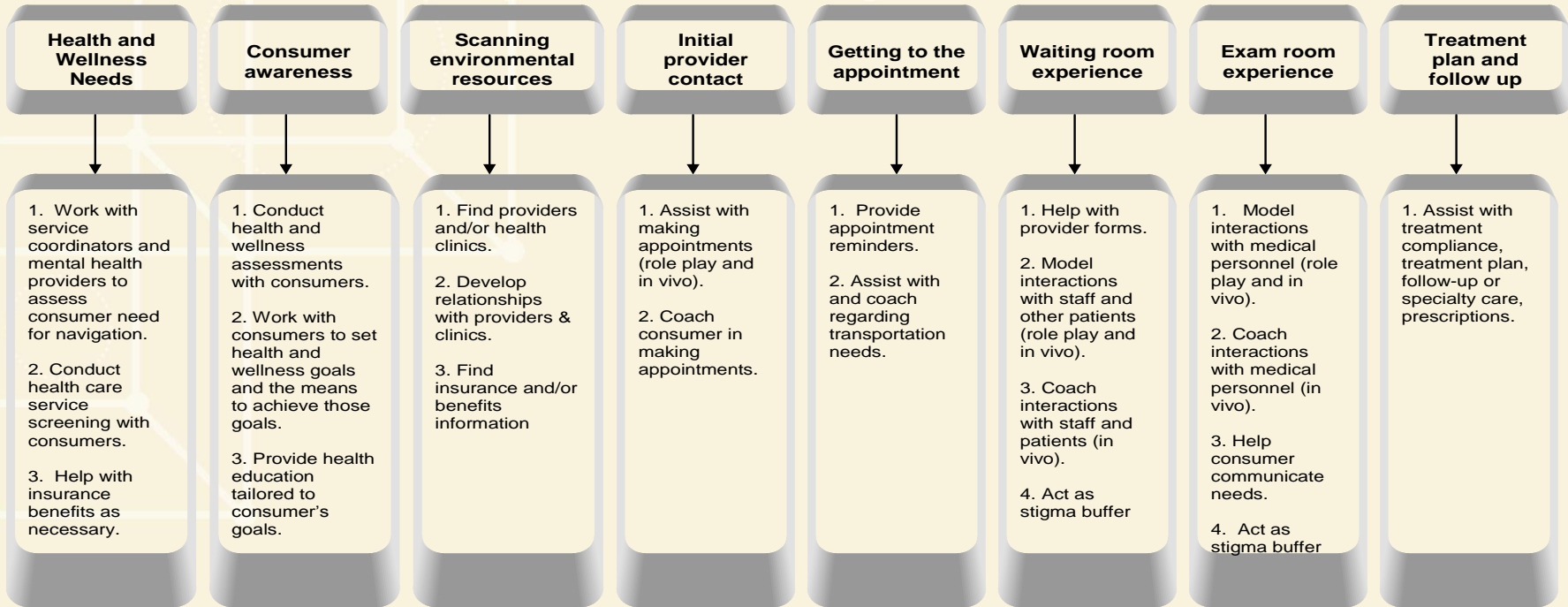
- **“For them, with them, by them”**
 - Empowerment and self-managed care through modeling, coaching, fading
- **Integration into the agency**

Purpose of the Assessment

- 1. To inform the consumer and yourself about the consumer's:**
 - a) Medical status and needs
 - b) Past experiences with medical care
 - c) Strengths and barriers in accessing and using medical services
- 2. To increase consumer's motivation to engage**
- 3. To set the stage for goal setting, which is also collaborative and geared to increase motivation**

Health Navigation Intervention “Project Bridge”

Consumer Challenge Points to Successful Health Care Outcomes



Navigator Role

http://www.healthnavigation.org/files/docs/2013-04-26_Reducing-Health-Disparities-For-People-With-Serious-Mental-Illness.pdf

Phases of Health Navigation

Phase 1

Intensive 3 months of assessment, modeling, coaching

Phase 3

Ongoing support and boosters as needed

Phase 2

3 months of fading and consumer self-management

6 months

Individualized

Workload

A **full-time** navigator caseload:

- 12-15 clients at any one time
- 30-40 clients annually, with new admissions entering as clients begin to self-manage with less support

A **part-time** navigator caseload:

- 15 clients annually, working 15 hours a week

For more about the Health Navigation Certification Training:

<http://www.healthnavigation.org/>

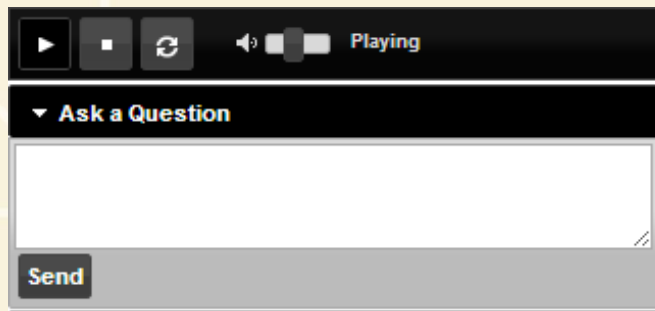


For more about the study:

[Reducing Health Disparities for People with Serious Mental Illness: Development and Feasibility of a Peer Health Navigation Intervention](#)

Let's chat!

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SAMHSA PBHCI Program

Program Purpose: To establish projects for the provision of coordinated and integrated services through the co-location of primary and specialty care services in community-based mental and behavioral health settings.

Goal: To improve the physical health status of adults with serious mental illnesses (SMI) who have or are at risk for co-occurring primary care conditions and chronic diseases served in community mental health settings.





SAMHSA-HRSA Center for Integrated Health Solutions

**Nancy Reed, LCSW, Director of Integrated
Care and Wellness**

**Janette McKeever, Recovery Support
Specialist and Case Manager**

NorthCare Community Mental Health Center

Strengths Peer Providers Add to the Integrated Care Workplace

- Personal experience with whole health recovery that includes addressing wellness of both mind and body
- Insight into the experience of internalized stigma and how to combat it
- Compassion and commitment to helping others, rooted in a sense of gratitude
- Can take away the “you do not know what it’s like” excuse
- Experience of moving from hopelessness to hope
- In a unique position to develop a relationship of trust, which is especially helpful in working with people in trauma recovery
- A developed skill in monitoring their illness and self-managing their lives holistically

Janette's story



The power of hope, and the focus on what's strong not what's wrong

Tips for Hiring and Supervising Peers

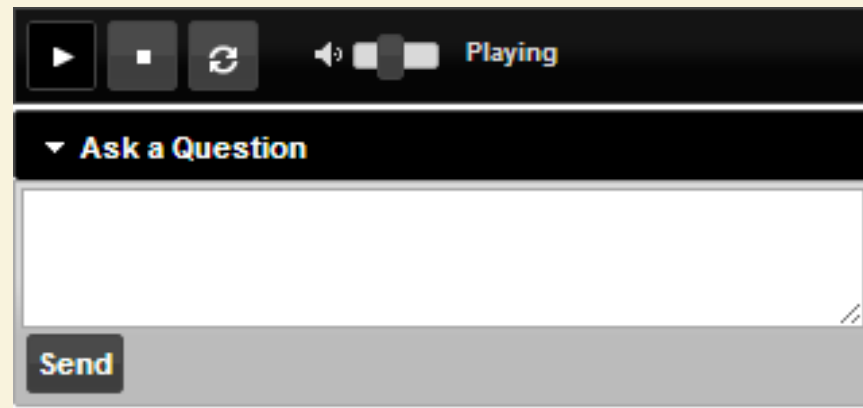
- Be clear around the job description and performance expectations
- Provide adequate training
- Be clear on boundaries
- Conduct weekly individual and group check-ins
- Educate all staff around the role of the Peer Provider

Additional Resources

- [Sample Job descriptions](#) - for Wellness Peer Health Coaches
- [WHAM Training](#) - Whole Health Action Management Peer Support Training
- [WRAP Training](#)- Wellness Recovery Action Plan Training
- SAMHSA's Bringing Recovery Supports to Scale Technical Assistance Center Strategy (BRSS TACS) webinar, [Ethics and Boundaries for Peer Leaders](#), discusses the important issue of boundaries.
- [Reducing Health Disparities for People with Serious Mental Illness: Development and Feasibility of a Peer Health Navigation Intervention](#)

Questions ?

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For More Information & Resources

Visit www.integration.samhsa.gov or
e-mail integration@thenationalcouncil.org



Contact Information

- **Larry Fricks**
larryf@thenationalcouncil.org
- **Laura Pancake**
Lpancake@pacificclinics.org
- **Nancy Reed & Janette McKeever**
nancyr@northcare.com



Additional Questions?
Contact the SAMHSA-HRSA Center for Integrated Health Solutions
integration@thenationalcouncil.org



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