Wellness Organizational Self-Assessment

The Wellness Organizational Self-Assessment is a performance improvement tool designed to increase an organization's awareness of the key components of quality wellness enhancing services. This self-reflective process assists organizations to identify quality improvement opportunities in terms of what the organization needs to **keep** doing, **stop** doing and **start** doing. A comprehensive evidence-informed wellness program includes informing, engaging and guiding individuals to establish personally meaningful health goals and to acquire and apply knowledge and skills through education, problem solving, action step planning and implementation, regular feedback on progress and the modeling of effective wellness-enhancing strategies. The self-assessment is divided into three key areas SAMHSA has identified as core wellness activities:

Nutrition and Physical Activity: Research has shown that combining an education and activity-based approach with emphasis on both nutrition and physical activity is most effective in weight management.

Tobacco Treatment: A multi-faceted approach, including policy and community-, medication-, and behavior-based interventions can increase tobacco cessation success among clients who use tobacco products.

Chronic Disease Self-Management: A comprehensive disease self-management program includes informing, engaging and guiding individuals to establish personally meaningful health goals and to acquire and apply self- management skills through education, problem solving, action step planning and implementation, regular feedback on progress and the modeling of effective self-management strategies. The inclusion of group-delivered approaches have the advantage of activating individuals through modeling, feedback, collective problem-solving, social networking and the hope and inspiration offered by peer support.

Using the Tool
Each key area includes domains and corresponding standards with a self-rating scale designed to identify current performance with respect to the best practices in wellness services. These standards are organized into key domains characteristic of high quality wellness programs.
The self-assessment rating scale is scored from 0-4 indicating the degree to which the organization meets or doesn't meet each standard.

0 = we don't meet this standard at all
1 = we minimally meet this standard
2 = we partially meet this standard

3 = we mostly meet this standard
4 = we are exemplary in meeting this standard
NA = not applicable to our organization

Organizations are encouraged to engage individuals with knowledge of organizational practices related to each of these key areas and invite them to complete and score the tool. In this way, organizations may assess areas of relative strength and areas for improvement. It also may be used to monitor progress on each domain and the corresponding set of standards by using the tool as a pre- and post-test measure of progress.

integration.samhsa.gov
integration@thenationalcouncil.org
202.684.7457

Substance Abuse and Mental Health Services Administration
SAMHSA
www.samhsa.gov 1-877-SAMHSA-7 (1-877-726-4727)

HRSA
Health Resources & Services Administration

Nutrition & Physical Activity Organizational Self-Assessment

Domain A: Client-driven Care

Focus on assisting clients to identify personally meaningful health and wellness goals.

Standard 1: We employ a routine and consistent process to ensure that clients identify wellness goals that are aligned with their felt needs, values, and preferences. We consistently engage clients in self-directed and shared decision-making through inquiring about the clients' felt need for health improvement; what the client hopes to gain; how confident the client feels about accomplishing his/her health goal; what important values wellness goals will promote.

0	1	2	3	4	NA

Standard 2: *Health disparities and wellness services* – We have a system in place to (1) identify disparities associated with access to, involvement in, and benefit of wellness programs by gender, ethnicity, age, race, and sexual orientation and (2) address access through use of bilingual staff and services for clients for whom English is not their primary language.

0	1	2	3	4	NA

Domain B: Activation of Self-Management of Health and Wellness

Standard 3: Our wellness services are designed to provide clients with information, problem-solving approaches, and practical and culturally respectful strategies that enhances the clients' knowledge and skills to self-manage health and wellness.

0	1	2	3	4	NA

Domain C: Team Approach

Standard 4: All members of the client's PBHCI team play a role in supporting the client's wellness goals as evidence by full team awareness of the client's wellness goals, each team member regularly reviews the client's wellness goals and utilization of services, and meetings include communication and collaboration among team members on client progress and challenges.

0	1	2	3	4	NA

Domain D: Wellness Services Align with Client Readiness

Standard 5: We have developed a variety of individual (e.g., Motivational Interviewing) and group nutrition- and physical activity- related services designed to assist clients at various levels of readiness including individuals in pre-contemplation.

0	1	2	3	4	NA

Domain E: Best & Promising Practices in Nutrition & Physical Activity Programs

Standard 6: We offer evidence-informed, individual and/or group delivered, structured, systematic and curriculum/protocol supported approaches to physical activity and nutrition. This includes the use of educational materials, promising practices, culturally adapted EBPs, worksheets, goal plans, action step planning, progress monitoring and other resources.

0	1	2	3	4	NA

Standard 7: We offer wellness programs that combine nutrition and physical exercise as critical components of the program.

0	1	2	3	4	NA

Standard 8: *Dosage and duration* – We design our wellness programs to engage clients for a minimum of three months.

0	1	2	3	4	NA

Standard 9: *Peer support* – We fully involve peers in the role as health mentors, health coaches, coaches, personal trainer, and/or co-leaders of wellness groups and activities.

0	1	2	3	4	NA

Standard 10: *Utilization of community resources* – We explore, reach out to and involve our clients in utilizing community resources that promote health and wellness (e.g., local colleges and universities that offer physical space/equipment promoting health; engaging students in training to provide wellness services inside or outside the behavioral health setting; establishing a relationship with the YMCA, Weight Watchers and other community resources).

0	1	2	3	4	NA

Total Score (Maximum score = 40): _____

Tobacco Treatment Organizational Self-Assessment

Domain A: Policy, Systems, and Environmental Approaches

Standard 1: *Tobacco-free organization* – Our organization has established a tobacco-free policy with the full involvement of both clients and staff.

0	1	2	3	4	NA

Standard 2: *Staff development and support* – Our organization provides training for all staff on evidence-based tobacco cessation strategies and interventions as well as cessation support for those who are interested in quitting smoking.

0	1	2	3	4	NA

Domain B: Community and Social Supports

Standard 3: *Utilization of community resources* – We explore, reach out to, and involve our clients in utilizing community resources that support cessation efforts (e.g., state quitlines, local health department, American Lung Association).

0	1	2	3	4	NA

Standard 4: *Peer support* – We fully involve peers in the role as health mentors, health coaches, and/or co-leaders of tobacco cessation groups and activities.

0	1	2	3	4	NA

Standard 5: *Familial and caregiver support* – We encourage engagement of family members and/or caregivers in helping to reach clients' tobacco cessation treatment goals.

0	1	2	3	4	NA

Domain C: Clinical Best and Promising Practices

Standard 6: *Screening and treatment planning* – We ask and document tobacco use for all clients at intake and at every visit; advise those who use tobacco to quit at every visit; and include cessation goals in clients' treatment plans.

0	1	2	3	4	NA

Standard 7: *Psychosocial services* – We utilize behavior-based interventions including Motivational Interviewing, individual counseling, and groups using an evidence-based, manualized curriculum.

0	1	2	3	4	NA

Standard 8: *Pharmacotherapy* – We provide access to tobacco treatment medications including Nicotine Replacement Therapy, bupropion, and/or varenicline.

0	1	2	3	4	NA

Domain D: Client-Adapted Cessation

Standard 9: *Cultural and readiness considerations* – Our tobacco treatment approach is highly personalized to the individual client, taking into consideration clients' cultural values, beliefs, and traditions regarding tobacco use as well as their readiness for change, including those in pre-contemplation.

0	1	2	3	4	NA

Domain E: Population and Patient-specific Data

Standard 10: *Outcome measures* – Our organization has a system in place to measure and monitor the following key indicators:

- ☐ % of clients overall who use tobacco
- ☐ Among clients who use tobacco, % actively engaged in cessation activities
- ☐ Quit rate among clients who smoke at 3, 6, and 12 months
- ☐ Sub-population(s) that are most impacted by tobacco use

0 = none of the above **1 = one area addressed** **2 = two areas addressed**
3 = three areas addressed **4 = all areas addressed**

Total Score (Maximum score = 40): _____

Chronic Disease Self-Management Organizational Self-Assessment

Domain A: Knowing Your Population

Identifying people with a serious, chronic, and less than optimally managed health condition.

Standard 1: We have a system in place to identify patients who have chronic health conditions such as diabetes, asthma, cardiovascular disease, respiratory disease, arthritis, HIV or other conditions.

0	1	2	3	4	NA

Standard 2: We have a process to ensure that the CDSM approach is designed to align with the clients' felt needs, concerns, problems, and goals that are associated with managing a chronic health condition

Prior to engagement in a CDSM program, clients are asked about their felt need for managing a health condition, what they hope to gain, why is it personally important to manage a chronic condition, and the personally meaningful problems associated with living with a chronic health condition.

0	1	2	3	4	NA

Domain B: Team-based Care

The approach to comprehensive disease self-management includes coordinated services delivered by a team of helpers including a primary care provider, behavioral health practitioner, psychiatrist, peer provider, coach, nurse care manager, and others.

Standard 3: We have a system in place that ensures a coordinated and team-based approach to disease self-management. The scoring identifies the number of staff involved who work as a team.

0 = No system   **1 = one staff**   **2 = two staff**   **3 = three staff**
4 = four or more staff

Domain C: Structured and Systematic CDSM Individual and Group Options

Standard 4: *Group work* – We use a group-delivered, structured, systematic, and curriculum-supported approach to chronic disease self-management. This includes the use of educational materials, worksheets, goal plans, action step planning, progress monitoring, and other tools and resources such as peer support.

0	1	2	3	4	NA

DOMAIN D: Best and Promising Practices in Chronic Disease Self-Management

Standard 5: *Comprehensiveness* – Our individual or group service plan to assist patients with chronic disease self-management includes addressing the needs of individuals related to 3 key areas:

- ☐ Treatment adherence and healthcare partnership
- ☐ Coping with the emotional reactions to chronic health conditions
- ☐ Making critical lifestyle changes to support health

0 = none of the above   1 = one area addressed
2 = two areas addressed   3 = all areas addressed
4 = all areas addressed in a highly integrated and coordinated manner

Standard 6: *Treatment Focused Support* – Assisting people to gain the knowledge, develop skills, and implement actions to address the health condition itself through the effective use of medication, diagnostic tests, monitoring of disease-specific health indicators and partnership with the health care practitioner. Our approach includes the following topics (check all that apply).

- ☐ Communicating and working with your mental health and physical healthcare providers in a way that works for you
- ☐ Understanding the basics of your illness: What is it? Why is it important to manage successfully?
- ☐ Understanding and using medication in a way that works for you
- ☐ Making informed treatment decisions and solving problems

0 = none of above   1 = one topic   2 = two topics   3 = three topics
4 = four topics

Standard 7: *Coping with the emotional responses associated with managing a serious and chronic health condition* – Assisting individuals to address the cognitive and emotional factors influencing the person's motivation, confidence, and ability to fully engage in managing a chronic health condition (check all that apply).

- ☐ Understanding and coping with feelings of anger, depression, fear, and emotional stress.
- ☐ Learning and using stress management and relaxation approaches
- ☐ Managing stress through the support of peers, use of meditation, relaxation and social networking.
- ☐ Managing fatigue, low energy, avoidance of health services

0 = none of above   1 = one topic   2 = two topics   3 = three topics
4 = four topics

Standard 8: *Lifestyle changes and health promoting behavior* – A focus on those health behaviors key to overall health and successful management of any chronic health condition. Lifestyle changes and health behaviors are often a critical factor in successful management of serious health conditions and include the following four areas:

- ☐ Understanding and making informed decisions about healthy eating
- ☐ Increasing physical activity through a variety of activities that work for you
- ☐ Understanding and addressing the impact of unhealthy habits and activities on your health condition (e.g., smoking, harmful use of prescribed, over the counter and street drugs)
- ☐ Taking small and meaningful action steps to improve health

0 = none of above   1 = one topic   2 = two topics   3 = three topics
4 = four topics

Standard 9: *Peer Support* – The organization requires the instrumental role of peers as mentors, health coaches, and personal trainers; co-leaders of CDSM groups such as WHAM or the Stanford Model of Chronic Disease Self-Management.

0   1   2   3   4   NA

Domain E: Population and Patient-specific Data

Standard 10: *Outcome measures* – Our organization has a system in place to monitor and measure client health improvement, reduction in emergency department and hospital use, utilization of wellness services, and chronic disease self-management outcomes.

0   1   2   3   4   NA

Total Score (Maximum score = 40): _____

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