# Total Wellness San Mateo County, California Cohort III

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

### Overview

- <u>Shared facilities:</u> co-location of FQHC primary care (PC) services at two County outpatient behavioral health (BH) clinics; PC, BH and wellness teams all on same floor
- <u>Close collaboration & integration</u>: weekly joint staff meeting of PC & BH, joint clinical meetings twice/week, and regular all med staff meeting
- <u>Single point of reception</u>: same for all BH & PC patient arrivals; one protocol for waiting area risk management of all patients
- Some <u>shared systems</u> such as accessing patients' lab results, shared-drive record keeping and communicating via primary care EHR
- <u>Nurse care coordination:</u> every client is assigned and followed by a masterlevel behavioral health nurse
- <u>Peer wellness coaches:</u> provides wellness group activities and individual coaching
- <u>Array of wellness services:</u> diabetes management class, nutrition education group(Total Nutrition), weight management group(Well Body), smoking cessation group(Ash Thinkers & Ash Kickers), physical activities group, and WRAP on Wellness group (Wellness Recovery Action Plan). Some of these groups have adopted evidence-based practices

# Staffing

Behavioral Health & Recovery Services (BHRS) staff:

- Project Director
- Unit Chief
- Nurse Care Managers
- Health Educators
- Community Worker
- Peer Coaches
- Data Assistant

#### **Primary Care staff:**

- Supervising Physician
- Nurse Practitioner
- Medical Assistants
- Patient Service Assistant

### **Accomplishments & Successes**

#### Partnerships

- Partner with San Mateo Medical Center, FQHC, to expand primary care capacity to serve exclusively BHRS clients
- Partner with two major San Mateo's consumer-run organizations (Voices of Recovery and Heart & Soul) to provide employment for eight peer wellness coaches to serve PBHCI project clients

#### **Health Improvement**

- High outcome improvements for all PBHCI clients in cholesterol, fasting glucose, and BMI indicators
- Named "High performing grantee" by the National Council with Fasting Blood Glucose (51% improvement) and Cholesterol (58% improvement) in the top 5% among all grantees
- Missing data rate has been kept low at 20% for all baseline and 13% for all reassessment (TRAC report 7/3/14)

## **Accomplishments & Successes**

### **Promotion of Integration**

- Presentation on Total Wellness model for larger community:
  - "Integrated Care: A Roadmap for the Future Workforce" organized by CiMH, CalSWEC & IBHP
     "How an Individual Moves Through the Service System" at the SAMHSA Regional Conference
  - Spring 2013
    "Integrated Healthcare: Total Wellness," EQRO State Audit
  - "Financial Sustainability" for SAMHSA PBHCI webinar
  - "Integrated Healthcare: Total Wellness," San Mateo Medical Center Hospital's Board
  - "Total Wellness: Integrating Care, Promoting Wellness & Fostering Recovery" at the MHSA Committee
- Related presentations included:
  - "A Peer Experience Panel" at CiMH Care Coordination Collaborative Learning Session
  - "Connecting Substance Use to PBHCI with Medication Assisted Treatment" at the SAMHSA Annual Grantee Meeting
  - "San Mateo's Medication Assisted Treatment" at the SAMHSA Regional Conference Spring 2014

### Accomplishments & Successes

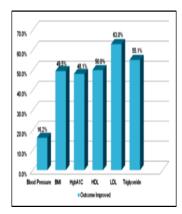
#### **Program Promotion**

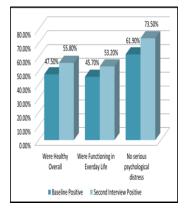
- Site visits from multiple Bay Area PBHCI Grantees, various County Mental Health Divisions, and Stanford Department of Psychiatry
- Active member of the California Association of Social Rehabilitation Agencies' (CASRA) Advisory Committee on Peers in Integrated Settings
- TW awarded for the Honorable Mention for 2013 County STARS Award for outstanding program performance
- A Total Wellness peer wellness coach was awarded for the County's 2014 Consumer Hall of Fame

### Funding

• Has secured MHSA (Mental Health Services Act) funds for FY 2014-2015

## **Outcome Improvements**





## Challenges

- Cultural shift in care approaches & putting aside "our silo ways" for integrated team approach
- Clarity and definition of some PBHCI members' role
  - Role of BHRS nurse care manager
  - Role of the team leaders for PC and BH staff
- Documentation & billing of integrated services according to Medi-Cal standards
- Different EHR systems & health databases between PC and BH
- Improving SPMI's motivation to engage in wellness activities
- Developing skill sets for a stable peer workforce

## **Moving Forward**

- Continue integration of PC & BH at current two sites
- Expand wellness services and care coordination to entire San Mateo County to four additional sites
- Identify additional funding sources

## Words of Wisdom: What I Wish We'd Done Differently

- Reinstate the Total Wellness PC-BH steering committee
- Actively engage & motivate primary care to take initiative in this partnership— both PC & BH as equal stakeholders
- Strengthening the PC & BH partnership with positive patient outcomes shared across the board early on

# Words of Wisdom: Tips for Success

- Equal involvement from the leadership of Primary Care & Behavioral Health systems of care
- Use blended funding streams from the start
- Develop good workflows that work for both teams
- Involve Quality Management Dept. to establish documentation standards early on
- Select staff that can flexibly learn new integration practices
- Maintain persistence and patience with our clientele