Washtenaw County Community Support and Treatment Services Cohort 2-3

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

Overview

- · Reverse Co-Location (Primary Care in CMH Setting)
- Target Population:
 - At risk or presence of a chronic condition
 - Inadequate natural supports
- Strong Emphasis on Disease Management Approach
 - · Wellness Education
 - Strong Partnerships with Safety Net Clinics
- Staffing
 - Program Administrator
 - 1 Service Coordinator/Nurse Case Manager
 - 4 Nurse Case Manager
 - 2.5 FTE full time certified peer support specialist
 - 1 registered dietician/health educator
 - -.75 FTE family nurse practitioner
 - 1 FTE Data Entry Clerk

Accomplishments & Successes

- Technology
 - Added key documents to the Electronic Medical Record which includes: Health Information Exchange (HIE) Labs, Wellness note, Admission Discharge and Transfers (ADT's)
- Consumer Outcomes
 - Positive trends for BMI and Lab data
- Strengthened partnerships
 - University of Michigan Complex Care coordinators of health care system for ED and IP stays for under and uninsured populations
 - Washtenaw Health Initiative- county wide initiative that is helping with the implementation of the ACA
 - Safety net primary care clinics are already partners with integrated health efforts but this project helped to strengthen the partnership for health coordination

Accomplishments & Successes

- Recruitment process
 - Nurses are recruited from med/surge
 - Prior to offer nurses must shadow other teams/nurses to experience the population
- Quality process improvement
 - · Program and consumer dashboard
 - Reviewed quarterly
 - Data driven way to control process and improve quality of services
- Peers and Dietician
 - Vital members of team and programming

Challenges & Outcomes

- •Initially data collection was overwhelming but with IT at the table with clinical staff this helped us developed key documents that helped with the ongoing collection and program needs.
- •Enrollment numbers were not at target throughout program due to difficulty engaging consumers around their health.
- •Recruited great nurses but had high turnover due to salary.

Moving Forward

- Extension of PBHCI efforts
 - Will continue to serve PBCHI consumers that are not eligible for the Health Home Pilot
- State of Michigan Health Home Pilot site
 - One of six statewide pilot sites
 - In process of program development and enrollment
 - Ultimate suitability plan

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

 Include more consumer and partner level evaluation/satisfaction throughout the years of the grant.

Words of Wisdom: Tips for Success

- Continue to push partnerships and infrastructure to get the real-time data. It is possible and necessary.
- Include technology, clinical and administrative strategies in all program development