

Addressing Behavioral and Primary Health Disparities and Access to Care for Adults

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About Wheeler

- Founded in 1968
- Community need shaped our mission
- Developed in the 1970s with deinstitutionalization of individuals with serious and persistent mental illness
- Strong community collaborations and partnerships
- Innovative, highly respected, influential leader in the behavioral health, special education and primary care communities
- Designated as a Federally Qualified Health Center in 2015 and Joint Health Home in 2016
- \$73 million revenue, 900 employees, 27 locations, over 100 programs







Overarching Strategic Area of Focus

Wheeler's Strategic Plan identified Health Disparities and Health Integration as one of the organizational areas of focus

Strategic Goal: Reduce disparities in health care availability and access for vulnerable populations and provide collaborative, integrated primary and behavioral healthcare resulting in improved overall health and wellness outcomes.

Vision and Mission Statement

Vision

All people have the opportunity to grow, change and live healthy, productive lives

Mission

Wheeler provides accessible innovative care that improves health, recovery and growth at all stages of life.



Integrating Care for BH Clients

Overarching goals:

- Behavioral health clients receive a comprehensive health assessment, are educated about primary care and wellness, and are engaged in primary care with emphasis on preventive screenings.
- Wheeler's Health & Wellness Centers will sustain change for individuals over time by reducing fragmentation in care and providing a stable health and/ or medical home.
- In 2014, funding garnered from the Connecticut Health Foundation to evaluate integrated care outcomes across multiple Wheeler locations:



Step 1: Establishment of Integrated Primary / BH Care Centers

Recognizing the need to enhance health equity for low-income and vulnerable populations with serious behavioral health disorders, Wheeler established two Health & Wellness Centers:

Hartford Health & Wellness Center

✓ Partnership with local hospital to deliver on-site primary care

- Bristol Health & Wellness Center
 - Designated as a federally qualified health center in August 2015
- New Britain and Plainville Adult Outpatient clients referred to Bristol for PCP

Wheeler's Health & Wellness Centers

- Supported by multidisciplinary health teams to reduce disparities in care, enhance health equity and achieve the triple aim of health reform: improve health, reduce costs & increase quality
 - ✓ Behavioral Health Clinicians
 - Primary care providers (internist, pediatricians, FNP)
 - Care Management team comprised of RNs, outreach engagement specialist

Methodology

- Identifying the baseline need The Wheeler Health & Wellness Centers serve communities facing extreme disparities in care.
 - Up to 60 percent of Wheeler's adult behavioral health clients were not connected to primary care and self reported at least one chronic health condition and use of emergency rooms for urgent medical care ;
 - In Bristol, more than 12,000 low-income residents have little to no access to health center services.
- Opportunity to establish and assess effectiveness of emerging system of integration—
 - Improve engagement with primary care
 - Train staff to transition to vision and practice of whole person health ("we treat mind and body together"

Population

Approximately 5,000 adults referred to Wheeler's behavioral health outpatient clinics located in Hartford, New Britain, Plainville and Bristol between February and December 2014.

Understanding and Addressing Disparities to Accessing Primary Care:

- Looking at primary healthcare connection by location, gender, race and ethnicity
- Asking about reasons for clients not pursuing connection to primary care



• Exploring most effective leverage points to effectively promote client engagement with primary care

BASELINE: Behavioral Health Client Connection to Primary Care at Intake

Disparities in Access/Connection to Primary Care — Location

Percentage of Behavioral Health Clients with <u>no</u> PCP by Location



"Do you have a primary care physician?"

Disparities in Connection to Primary Care—Gender

Behavioral Health Clients with no PCP by Gender



Disparities in Connection to Primary Care—Race

Behavioral Health Clients with no PCP by Race - All locations



Disparities in Connection to Primary Care—Ethnicity



Workforce Training



Training and Supervision to Shift the World View of Behavioral Health Clinicians:

- Education about Whole Person Wellness
- Education about co-morbidity of behavioral health concerns (including substance abuse disorders) and health conditions
- Promulgating the vision that "YOU" (behavioral health clinician) can promote better outcomes for clients by promoting whole person wellness
 - ✓ Communication with PCP
 - Helping client understand mind-body connection
 - ✓ Understanding negative consequences of not having PCP
 - ✓ Asked clinicians to considering their own self care and wellness
- Reassurance that you are not expected to practice medicine but to recognize and coordinate potential co-morbidity and
- Emphasis on engagement and teaming

STRATEGY: May I connect you to primary care?



Referral to Primary Care—Location

Percentage of Clients without a PCP who Accepted a Referral by BH Location and Referral Period



Referral to Primary Care—Gender

Accepted Referral Rate of Gender Groups by Referral Period



Accepted Referral Rate of Racial Groups by Referral Period



Referral to Primary Care—Ethnicity



Reason for declined referral to primary care



Percentage of Clients who Accepted a Referral *and Attended* a Service by BH Location and Referral Period



- Hartford Location
- 95% of the clients that accepted a referral and visited the PCP received all preventive health screenings

✓ Blood pressure

✓ Diabetes

✓ Cholesterol

✓BMI

✓Tobacco



Conclusion: What makes the difference?

- Clinician education and scripting
 - Understanding whole person health promotes better outcomes
 - ✓ Communicating "we care about your wellness. Good health and recovery go together."
- Behavioral Health Connection enhances willingness to consider connection to primary care
- As /familiarity/confidence/trust of behavioral health services increased, follow through with referral to primary care

- Where primary care services are co-located follow-through with the referral is enhanced (about twice the engagement rate when the primary care provider is colocated):
 - ✓ Familiar location, increases comfort
 - ✓ Warm hand off
 - ✓ Same day appointment
 - Detection of primary care concerns during behavioral health appointment with immediate access

Where next?

 Shift the paradigm of care through co-location at each location and re-definition of service

 Message in each location, at intake →



Our goal is to help you maintain a healthy body AND a healthy mind.

All new clients will visit both our primary care and behavioral health clinicians on their first visit.

If you have a primary care provider or pediatrician, please let our staff know when you arrive.

2016

- Three fully integrated health centers Bristol, New Britain and Hartford operated and staffed by Wheeler
- Fifty five percent report no PCP on admission
- Of those patients with no PCP, fifty percent of the patients accept the referral to PCP and see the primary care physician at time the time of behavioral health intake
- Another twenty percent are engaged following the first BH session
- Track health outcomes across 17 health indicators

Thank you