

**Strategic Use of Population-Based Information  
(groups of patients with similar chronic health  
problems) for Improving Health**

**How We Use Health Information**

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# **Making Healthy Choices (MHC)**

## **The Postgraduate Center for Mental Health (PCMH)**

Cohort: III (Region 2)

Type of Program: PBHCI for PCMH Consumers in

- Personalized Recovery Oriented Services (PROS)
- Outpatient Clinics (OCs)
- PCMH Residential Divisions

Primary Care Model: FQHC Partnership

## Staff Involved in Collecting & Using H Indicators Data

### Internal

- Nathan Gammill, FNP
- Lanette Reese, CASAC
- Robert Potter (PHE)
- Sonya Pittman (AA)

### External

- Frank Guida, PhD
- Collaterals



## How We Use Health Indicators Data

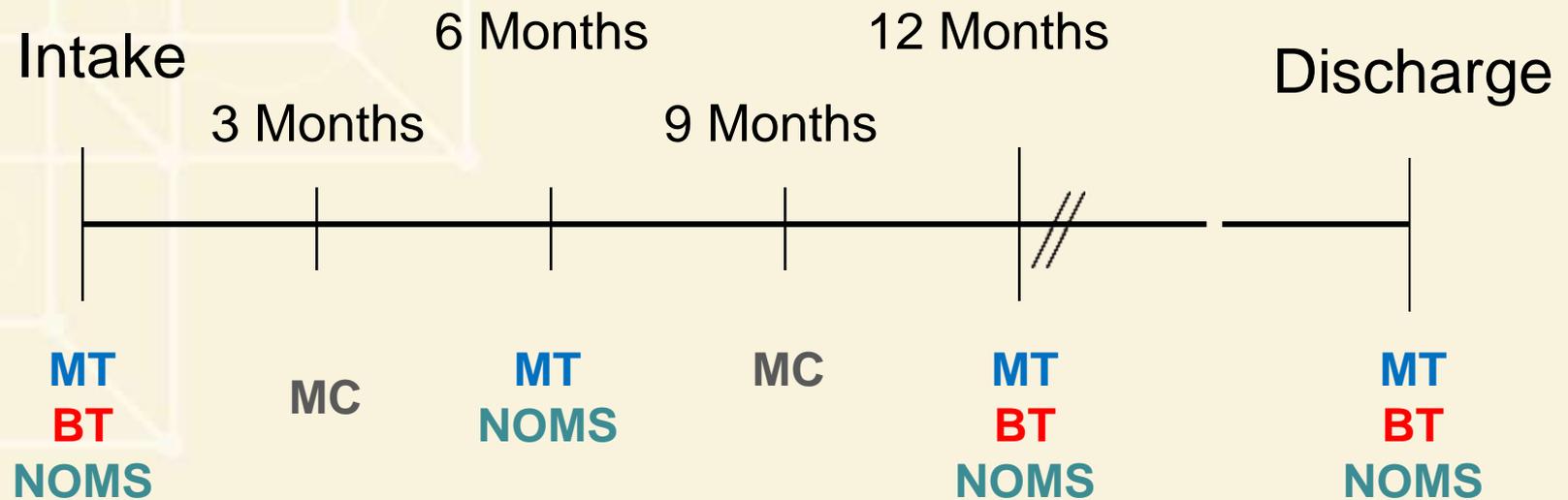
- A. How are H Indicators collected and by whom?
- B. When is data collected?
- C. Where is the data stored?
- D. Who enters H data?
- E. How is data retrieved?
- F. The kinds of data we retrieve...
- G. How is data used to improve outcomes?

## A. How are H Indicators collected & by whom?

Staff Member	Title	Role in H Indicator Collection
Robert Potter	Peer Health Educator (PHE)	Reassessments; Intakes
Lanette Reese, CASAC	Substance Abuse Counselor	Reassessments; Intakes
Nathan Gammill, FNP	Project Director	Administration; Care Planning

We further integrate with PCMH psychiatrists by monitoring consumer pharmacotherapy (e.g., drug levels, toxicity).

## B. When is data collected?



**MC:** Mechanical Indicators. Collect and store in EMR.

**MT:** Mechanical Indicators. Collect and store in EMR + TRAC.

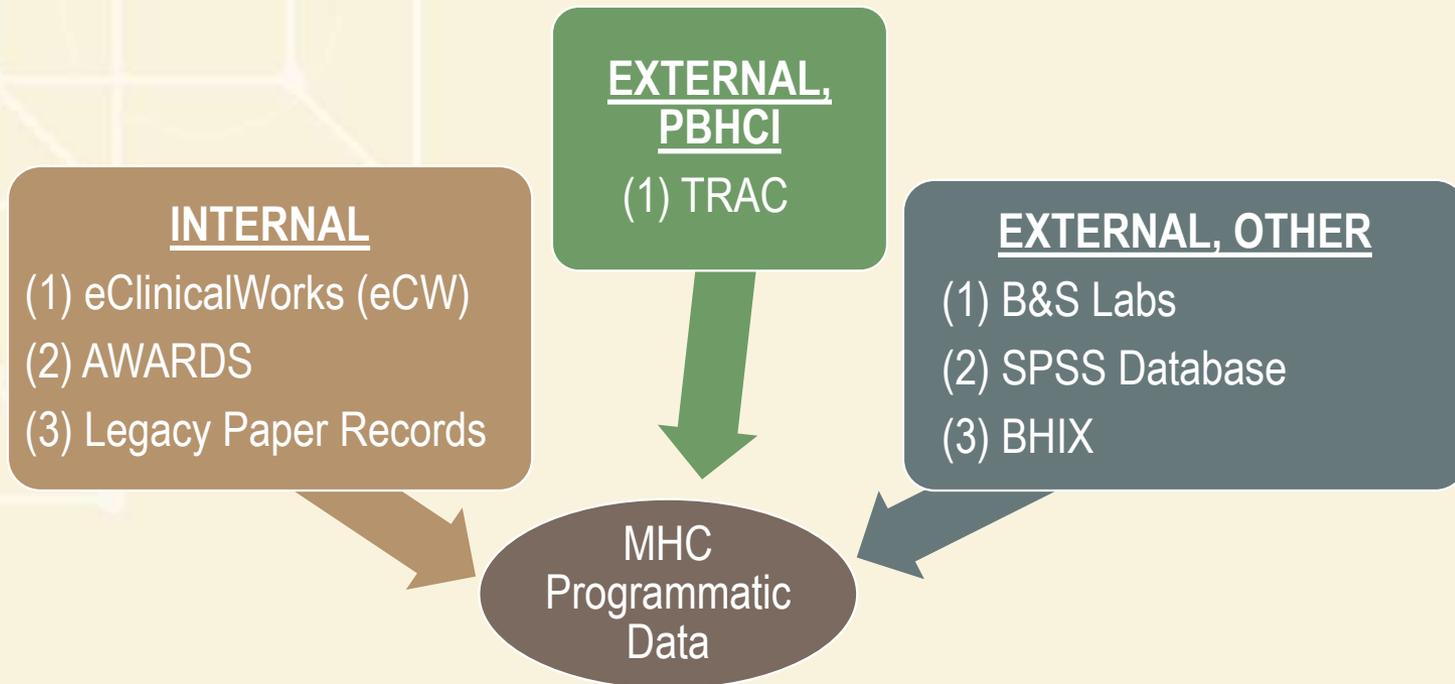
**BT:** Blood Work + TRAC.

## **B. When is data collected?**

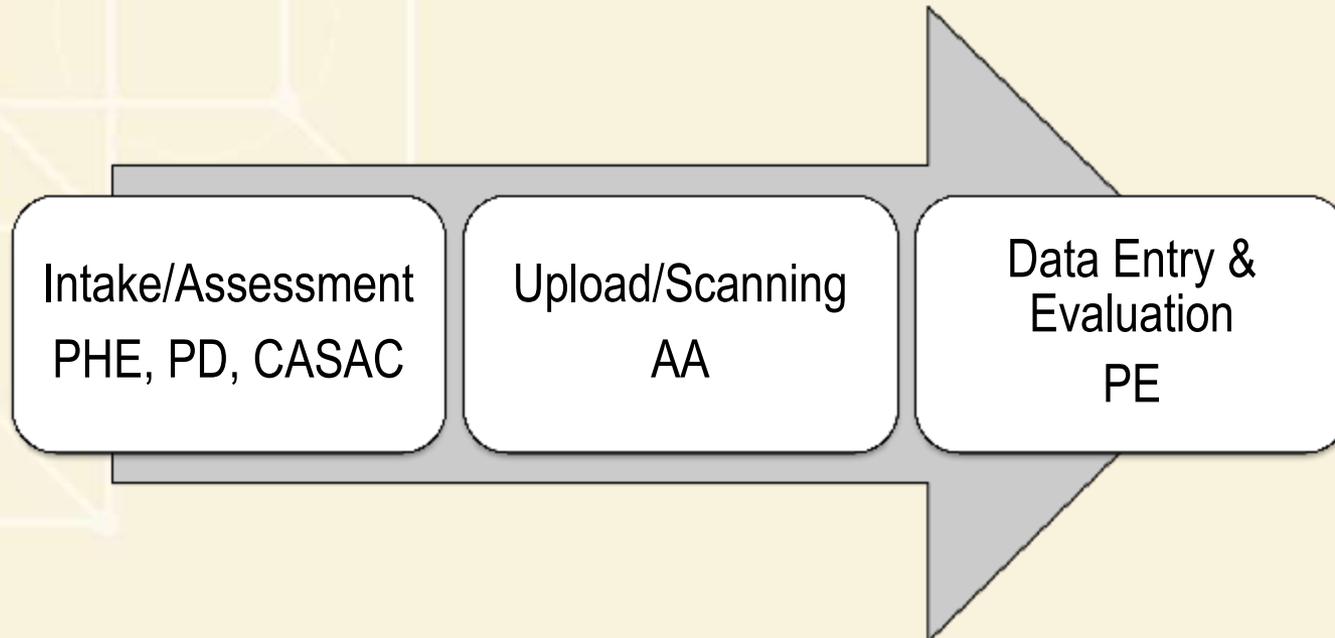
Individual Wellness plans may call for more frequent monitoring to motivate consumers, foster accountability, and assess compliance.

- BP
- Capillary Blood Glucose
- Weight/BMI
- Smoking Reduction
- Valproic Acid, Clozapine, Lithium

## C. Where is the data stored?



## D. Who enters H data?



## **E. How is data retrieved?**

Data is available to staff through various means

- eCW
- SPSS
- TRAC
- BHIX
- PAB data (local PCMH server)

## F. What kinds of data do we retrieve?

### Follow-up Outcome NOMs Section H Physical and Biological Health Data

Variables NOMs, n=117	Baseline		6-month Follow		t-value	sig
	M	SD	M	SD		
<b>Physical Health Variables, n=117</b>						
Systolic Blood Pressure	124.60	16.16	123.95	17.94	-0.52	.61
Diastolic Blood Pressure	81.13	9.22	79.28	10.28	<b>-2.45</b>	<b>.02</b>
Weight in Kilograms	94.50	25.37	94.02	25.18	-0.45	.65
BMI	32.94	7.81	32.72	7.91	-1.70	.09
<b>Biological Variables, n=52</b>			12-month Follow			
Glucose	105.51	39.61	97.89	19.10	-1.38	.17
Cholesterol-Total	174.17	42.61	180.87	43.26	+1.58	.12
Cholesterol-HDL-Good	46.85	15.03	49.43	14.00	<b>+2.34</b>	<b>.02</b>
Cholesterol-LDL	96.53	38.81	103.89	35.88	+1.92	.06
Triglycerides	164.36	120.23	149.55	104.07	<b>-2.01</b>	<b>.05</b>

## F. What kinds of data do we retrieve?

Follow-up Outcome NOMs Section H Physical Health at Three Points in Time

NOMs Variables, n=52	Baseline		6-month		12-month		F-value	sig
	M	SD	M	SD	M	SD		
<b>Physical Health Variables</b>								
Systolic Blood Pressure	124.37	14.85	124.25	18.87	120.59	10.98	-2.49	.09
Diastolic Blood Pressure	82.29	9.76	79.96	10.61	77.98	7.27	<b>-6.85</b>	<b>.002</b>
Weight in Kilograms	92.82	25.68	91.78	24.55	88.22	21.41	<b>-4.99</b>	<b>.01</b>
BMI	32.13	7.94	31.69	7.84	30.98	7.38	<b>-4.34</b>	<b>.02</b>

**Follow-up Outcome Local Instrument Data**

Variables NOMs, n-117	Baseline		6-month Follow		t-value	sig
	M	SD	M	SD		
Modified Mini-Depression	2.31	1.84	1.98	1.73	<b>-2.40</b>	<b>.02</b>
Modified Mini-Anxiety	3.46	2.63	3.15	2.68	-1.48	.14
Modified Mini-Psychosis	2.09	2.16	1.97	2.27	-0.64	.53
Modified Min-Total	7.85	5.41	7.10	5.57	-1.86	.06

**Follow-up Outcome Local Instrument Data at Three Points in Time**

NOMs Variable, n=52	Baseline		6-month		12-month		F-value	sig
	M	SD	M	SD	M	SD		
Modified Mini-Depression	2.22	1.91	2.02	1.78	1.55	1.63	<b>-7.61</b>	<b>.001</b>
Modified Mini-Anxiety	3.25	2.72	3.18	2.78	2.86	2.36	-1.71	.19
Modified Mini-Psychosis	2.12	2.32	2.14	2.47	1.84	2.41	-1.03	.36
Modified Min-Total	7.59	5.82	7.33	5.76	6.25	5.07	<b>-3.31</b>	<b>.05</b>

## G. How we use H data to improve outcomes?

- ❑ Informed Wellness programming
  - ❑ Classes
  - ❑ Activities
  - ❑ Workshops
  - ❑ Pilot Programs
  - ❑ Individual Sessions
  
- ❑ Development of integrated care plans based on individual client outcomes



## G. How we use H data to improve outcomes?



- Progress monitoring
- Program assessment
- Enhancement of existing services
- Creation of new evidence-based services

## **How has the use of population based data influenced organizational policy decisions?**

- Data validates Wellness as an ongoing PCMH program component.
- All new PCMH Westside admissions are screened for physical health comorbidities.
- Case managers receive basic orientation to common Axis 3 diagnoses.