The Role of Peer Providers in Integrated Health

March 25, 2014
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www.Integration.samhsa.gov

under About Us/Webinars
Key Points

• Analyze randomized trial outcomes showing significant impact on improving health
• Identify strengths peer providers bring to integrated health programs for system transformation
• Learn important roles peer providers are trained to deliver
Today’s Presenters

- **Larry Fricks**, Center for Integrated Health Solutions
- **Paolo del Vecchio**, MSW, Center for Mental Health Services
- **Laura Pancake**, LCSW, Pacific Clinics
- **Nancy Reed**, MS, CM, CPRP, Northcare Community Mental Health Center
- **Janette McKeever**, Northcare Community Mental Health Center
Before We Begin

- During today’s presentation, your slides will be automatically synchronized with the audio, so you will not need to flip any slides to follow along. You will listen to audio through your computer speakers so please ensure they are on and the volume is up.

- You can also ensure your system is prepared to host this webinar by clicking on the question mark button in the upper right corner of your player and clicking test my system now.
Before We Begin

• You may submit questions to the speakers at any time during the presentation by typing a question into the “Ask a Question” box in the lower left portion of your player.

• If you need technical assistance, please click on the Question Mark button in the upper right corner of your player to see a list of Frequently Asked Questions and contact info for tech support if needed.

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Setting the Stage

Larry Fricks
Deputy Director
Center for Integrated Health Solutions
Behavioral Health is Essential To Health

Prevention Works

Treatment is Effective

People Recover
Welcome

Paolo del Vecchio, M.S.W., Director
SAMHSA’s Center for Mental Health Services
Health Navigator Certification Training: Project Bridge®

The USC School of Social Work in collaboration with Pacific Clinics

Laura Pancake, LCSW, Corporate Director, Pacific Clinics
History of Project Bridge

- 3-year pilot research project started in 2008
- Dr. Brekke and the Project Bridge team from the USC School of Social Work, *in collaboration with* Pacific Clinics

Funded by:
- UniHealth Foundation
- NIMH
- Clinical and Translational Science Institute at USC
Does Health Navigation Work? Results of a Pilot Randomized Controlled Trial (RCT)

Randomized 24 mental health consumers (from agency caseloads at Pacific Clinics)

- Treated Group: Received health navigation immediately
- Untreated Group: Waitlisted for 6-months
RCT Findings

Positive findings for the intervention in terms of:

- Acceptability to clients and agency staff
- Tolerability to clients
- Feasibility of integration into clinic and teams
- Feasibility for peer providers
After six months, the total number of current health problems was reduced for those receiving Health Navigation:

- **Treated Group**: 5.9 medical problems
- **Untreated Group**: 9.3 health problems
Significant Impact on Health Status

- Significant reduction in overall bodily pain and the degree to which pain interfered with daily life
Significant Impact on Health Status

Significant differences in medications prescribed:

Treated Group:
- 2 medications;
- Symptoms improved

Untreated Group:
- 4.7 medications;
- Symptoms worsened
Other Findings

• **Strong relationship** between the amount of bodily pain and the number of health problems

• Number of psychiatric medications:
  - Treated group decreased by 0.25
  - Untreated group increased by 1.5
## Reduction in Choice of ER

Location selected by consumers for usual medical care:

<table>
<thead>
<tr>
<th>Location</th>
<th>Before Health Navigation</th>
<th>After Health Navigation</th>
</tr>
</thead>
<tbody>
<tr>
<td>ER</td>
<td>33%</td>
<td>0%</td>
</tr>
<tr>
<td>Urgent Care</td>
<td>17%</td>
<td>0%</td>
</tr>
<tr>
<td>Outpatient MD Office</td>
<td>44%</td>
<td>83%</td>
</tr>
</tbody>
</table>
Summary of Findings

The Health Navigation Intervention ("Project Bridge") shows impact and promise for:

- Reducing **health problems**
- Reducing **bodily pain** related to health problems
- Impacting the **use of medications**
- Shifting **the locus of health care** from ER and UC to outpatient primary care
What is the Health Navigation Intervention (“Project Bridge”)?

A comprehensive health care engagement and self-management intervention
Critical Elements of Health Navigation

- “For them, with them, by them”
  - Empowerment and self-managed care through modeling, coaching, fading

- Integration into the agency
Purpose of the Assessment

1. To inform the consumer and yourself about the consumer’s:
   a) Medical status and needs
   b) Past experiences with medical care
   c) Strengths and barriers in accessing and using medical services

2. To increase consumer’s motivation to engage

3. To set the stage for goal setting, which is also collaborative and geared to increase motivation
Health Navigation Intervention “Project Bridge”

Consumer Challenge Points to Successful Health Care Outcomes

<table>
<thead>
<tr>
<th>Health and Wellness Needs</th>
<th>Consumer Awareness</th>
<th>Scanning Environmental Resources</th>
<th>Initial Provider Contact</th>
<th>Getting to the Appointment</th>
<th>Waiting Room Experience</th>
<th>Exam Room Experience</th>
<th>Treatment Plan and Follow Up</th>
</tr>
</thead>
</table>
| 1. Work with service coordinators and mental health providers to assess consumer need for navigation.  
2. Conduct health care service screening with consumers.  
3. Help with insurance benefits as necessary. | 1. Conduct health and wellness assessments with consumers.  
2. Work with consumers to set health and wellness goals and the means to achieve those goals.  
3. Provide health education tailored to consumer’s goals. | 1. Find providers and/or health clinics.  
2. Develop relationships with providers & clinics.  
3. Find insurance and/or benefits information | 1. Assist with making appointments (role play and in vivo).  
2. Coach consumer in making appointments. | 1. Provide appointment reminders.  
2. Assist with and coach regarding transportation needs. | 1. Help with provider forms.  
2. Model interactions with staff and other patients (role play and in vivo).  
3. Coach interactions with staff and patients (in vivo).  
4. Act as stigma buffer | 1. Model interactions with medical personnel (role play and in vivo).  
2. Coach interactions with medical personnel (in vivo).  
3. Help consumer communicate needs.  
4. Act as stigma buffer | 1. Assist with treatment compliance, treatment plan, follow-up or specialty care, prescriptions. |

Navigator Role

Phases of Health Navigation

Phase 1
Intensive 3 months of assessment, modeling, coaching

Phase 2
3 months of fading and consumer self-management

Phase 3
Ongoing support and boosters as needed

6 months
Individualized
Workload

A full-time navigator caseload:
- 12-15 clients at any one time
- 30-40 clients annually, with new admissions entering as clients begin to self-manage with less support

A part-time navigator caseload:
- 15 clients annually, working 15 hours a week
For more about the Health Navigation Certification Training:

http://www.healthnavigation.org/

For more about the study:

Reducing Health Disparities for People with Serious Mental Illness: Development and Feasibility of a Peer Health Navigation Intervention
Let’s chat!

• Remember! You may submit questions to the speakers at any time during the presentation by typing a question into the “Ask a Question” box in the lower left portion of your player.
Program Purpose: To establish projects for the provision of coordinated and integrated services through the co-location of primary and specialty care services in community-based mental and behavioral health settings.

Goal: To improve the physical health status of adults with serious mental illnesses (SMI) who have or are at risk for co-occurring primary care conditions and chronic diseases served in community mental health settings.
SAMHSA-HRSA Center for Integrated Health Solutions

Nancy Reed, LCSW, Director of Integrated Care and Wellness
Janette McKeever, Recovery Support Specialist and Case Manager

NorthCare Community Mental Health Center
Strengths Peer Providers Add to the Integrated Care Workplace

- Personal experience with whole health recovery that includes addressing wellness of both mind and body
- Insight into the experience of internalized stigma and how to combat it
- Compassion and commitment to helping others, rooted in a sense of gratitude
- Can take away the “you do not know what it’s like” excuse
- Experience of moving from hopelessness to hope
- In a unique position to develop a relationship of trust, which is especially helpful in working with people in trauma recovery
- A developed skill in monitoring their illness and self-managing their lives holistically
Janette’s story

The power of hope, and the focus on what’s strong not what’s wrong
Tips for Hiring and Supervising Peers

• Be clear around the job description and performance expectations
• Provide adequate training
• Be clear on boundaries
• Conduct weekly individual and group check-ins
• Educate all staff around the role of the Peer Provider
Additional Resources

- **Sample Job descriptions** - for Wellness Peer Health Coaches
- **WHAM Training** - Whole Health Action Management Peer Support Training
- **WRAP Training** - Wellness Recovery Action Plan Training
- SAMHSA's Bringing Recovery Supports to Scale Technical Assistance Center Strategy (BRSS TACS) webinar, *Ethics and Boundaries for Peer Leaders*, discusses the important issue of boundaries.
- **Reducing Health Disparities for People with Serious Mental Illness: Development and Feasibility of a Peer Health Navigation Intervention**
Questions?

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For More Information & Resources

Visit www.integration.samhsa.gov or e-mail integration@thenationalcouncil.org
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• Nancy Reed & Janette McKeever
  nancyr@northcare.com

Additional Questions?
Contact the SAMHSA-HRSA Center for Integrated Health Solutions
integration@thenationalcouncil.org
Thank you for joining us today.

Please take a moment to provide your feedback by completing the survey at the end of today’s webinar.