Behavioral Health is Essential To Health

Prevention Works

Treatment is Effective

People Recover

Evidence-Based Wellness Programs Pack a Big Punch

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Disclaimer

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About the Presenters

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Donald Williams, MS, is a Peer Wellness Coach with the PBHCI grant in Clarksville, TN. Donald has a Bachelor’s of Science in Human Performance and Sports Science along with his Master’s of Arts in Education Exercise from Tennessee State University. He is a certified peer specialist and a certified personal trainer. Contact Information: donald.williams@centerstone.org

Mandi Ryan, MSN, RN, is the Director of Healthcare Innovation for Centerstone. She is currently leading the organization rollout of their Health Home initiative, Integrated Care, and Episodes of Care. She also serves as the Project Director for two PBHCI grants. Mandi has seventeen years of experience in nursing, behavioral health, primary care, and integrated services. She received her Master’s Degree in Nursing in Leadership and Administration from Walden University, her Nursing Degree from Baptist Health College, and her Bachelor’s Degree in Biology from Ouachita University. Contact Information: mandi.ryan@centerstone.org
Who are we?

- SAMHSA-PBHCl Cohort 8
- Clarksville, Tennessee
- Funded Sept. 2015 - Sept. 2019
- Enroll 958 individuals in Health Home Services
  - Current Enrollment:

Keys to Success

- Engagement
- Fidelity
  - Monitoring Logs
- Consistency
- Your Involvement and Attitude
- Staff Referrals
  - Share Outcomes
  - Talk about what you are doing as much as possible.
Engagement in EBP Groups

- Engagement begins at Enrollment!
- Reengage at Health Screening
- Flyers with Group Information
- Continuous Rotation of Groups
  - Always offering 2 different Evidence-Based Wellness Groups per week.
- Recovery Weeks
  - One week between groups to generate more interest.

Fidelity Monitoring

- Developed by Evaluation Team
- Monitored by Evaluation Team
- Completed after Every Group Session
Evidence-Based Groups

- 5 Evidence-Based Wellness Programs
  - Dimensions: Well-Body
  - Dimensions: Tobacco Free
  - Chronic Disease Self-Management Program
    - CDSMP
  - Diabetes Self-Management Program
    - DSMP
  - Nutrition, Exercise, Wellness & Recovery
    - NEW-R

DIMENSIONS: Well-Body

- University of Colorado
- Requires Training
- [https://www.bhwellness.org/programs/wellbody](https://www.bhwellness.org/programs/wellbody)
- Teaches the necessary skills to promote physical health and well-being
- Promotes positive change through motivational engagement and other behavior change strategies
DIMENSIONS: Well-Body

- Usually Generates 10-15 Participants
- Supply Healthy/Cost Efficient Snack
- Provide Infused Water
- Outcomes: Weight Loss
- Exercise/Activity Encouraged
  - Corn Hole, Parachute, Pick up Towels, Chair Exercises, Dancing, etc

DIMENSIONS: Tobacco Free

- University of Colorado
- Requires Training
- [https://www.bhwellness.org/programs/tobaccofree](https://www.bhwellness.org/programs/tobaccofree)
- Teaches the necessary information and skills they need to promote successful tobacco cessation
- Promotes positive behavior change in individuals interested in living tobacco-free
DIMENSIONS: Tobacco Free

- Usually Generates 3-7 Participants
- Provide Quick/Low Calorie Snack
- Supply Infused Water or Bottles with Flavor Packet
- Outcomes: Lower CO/Smoking Cessation
- Ask Members who have Successfully Quit to Attend

Chronic Disease Self-Management

- Stanford University
- Requires Training
  - Teaches techniques to deal with problems such as frustration, fatigue, pain and isolation
  - Education on appropriate exercise for maintaining and improving strength, flexibility, and endurance
  - Demonstrates appropriate use of medications, communication skills, nutrition education, and decision making
Chronic Disease Self-Management

- Usually Generates 10-15 Participants
- Supply Healthy/Cost Effective Snack
- Provide Infused Water
- Outcomes: Mental Health Improvement and Self-Management Skills

Diabetes Self-Management

- Stanford University
- Requires Training
- Teaches techniques to deal with the symptoms of diabetes, fatigue, pain, hyper/hypoglycemia, stress, and emotional problems such as depression, anger, fear and frustration
- Education on appropriate exercise for maintaining and improving strength, flexibility, and endurance
- Demonstrates appropriate use of medications, communication skills, nutrition education, and decision making
Diabetes Self-Management

- Generates 10-15 Participants
- Supply Diabetic Friendly/Cost Effective Snack
- Provide Infused Water
- Outcomes: Mental Health Improvement and Better Control of Diabetes

Nutrition, Exercise, Wellness & Recovery

- University of Illinois
- NO TRAINING Required
- [http://www.cmhsrpuic.edu/health/weight-wellbeing.asp](http://www.cmhsrpuic.edu/health/weight-wellbeing.asp)
- Focused on the concept of “being intentional”
- Emphasizes that even small amounts of weight loss (5 – 10% of body weight) can make a significant impact on health
Nutrition, Exercise, Wellness & Recovery

- Generates at least 15 Participants
- Provide Healthy/Cost Effective Snack and Infused Water
- Use Exercises Provided
- Outcomes: Weight Loss!

Let’s Get Moving!
https://youtu.be/0IG5GQ6efsE
Background

• Lived Experiences
• Certified Peer Recovery Specialist
• Certified Personal Trainer
• Master Trainer
  • Dimensions: Well Body, Dimensions: Tobacco Free, CDSMP, DSMP

Peer Wellness Coach Role

• Leading groups
• Training staff
• One on one coaching
  • Focus on clients with shared lived experiences
• Model healthy lifestyle
Peers in Evidence Based Groups

- Share lived experiences
- Breaking the stigma
- Dynamics are important
- Vulnerabilities make you relatable
  - *Creating a judgment free environment*

Small Changes Make a BIG Difference

- Blood cholesterol
  - 10% ↓ = 30% ↓ in Cardiovascular Disease (CVD)
- High blood pressure
  - ~ 6 mm Hg ↓ = 16% ↓ in CVD; 42% ↓ in stroke
- Diabetes
  - 1% point ↓ HbA1c = 21% ↓ in Diabetic related deaths, 14% ↓ in Heart Attack

* 2014 PBHCI Presentation by Dr. Joe Parks
Stratton et al, BMJ 2000
Hennekens CH. *Circulation* 1998;97:1095-1102.
**EBP Participation Data**

62% of individuals enrolled in WellConnect participate in EBP activities.

- 60% of EBP activities are **individual** sessions.
- 46% of EBP activities are **group** sessions.

**EBP Participation Data**

<table>
<thead>
<tr>
<th>EBP Wellness Groups</th>
<th># of Participants (year to date)</th>
</tr>
</thead>
<tbody>
<tr>
<td>NEW-R</td>
<td>47</td>
</tr>
<tr>
<td>Tobacco Free</td>
<td>35</td>
</tr>
<tr>
<td>Well Body</td>
<td>28</td>
</tr>
<tr>
<td>Chronic Disease Self-Management Program (CDSMP)</td>
<td>35</td>
</tr>
<tr>
<td>Diabetes Self-Management Program (DSMP)</td>
<td>26</td>
</tr>
</tbody>
</table>
### 6 Months Outcomes - BMI

85% of clients with six-month reassessments were overweight, obese, or extremely obese at baseline.

<table>
<thead>
<tr>
<th>Baseline BMI (n=128)</th>
<th>Lost 5+ lbs. at 6 Months</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overweight (BMI = 25.0-29.9) (n=20)</td>
<td>20%</td>
</tr>
<tr>
<td>Obese (BMI = 30-39.9) (n=61)</td>
<td>36%</td>
</tr>
<tr>
<td>Extremely Obese (BMI = 40+) (n=28)</td>
<td>54%</td>
</tr>
</tbody>
</table>

At-risk clients who lost weight had an average six-month weight loss of **12 pounds**.

### 6 Months Outcomes - BP

64% of clients with six-month reassessments were in the pre-hypertensive or hypertensive range at baseline.

<table>
<thead>
<tr>
<th>Baseline Blood Pressure (n=129)</th>
<th>Improved BP by 6+ points at 6 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prehypertension (129-139/80-89 mmHg) (n=53)</td>
<td>45%</td>
</tr>
<tr>
<td>Hypertension (140+/90+ mmHg) (n=29)</td>
<td>69%</td>
</tr>
</tbody>
</table>

26% of clients improved their blood pressure enough to move to a lower-risk category.
6 Months Outcomes - CO

57% of clients with six-month reassessments had at-risk CO levels at baseline.

<table>
<thead>
<tr>
<th>Baseline Carbon Monoxide (CO) Level (n=129)</th>
<th>Decreased CO by 5+ ppm at 6 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>At-risk CO level (7+ ppm) (n=74)</td>
<td>31%</td>
</tr>
</tbody>
</table>

12 Months Outcomes Lipids

<table>
<thead>
<tr>
<th>Baseline Lipids</th>
<th>Improved at 12 Months</th>
</tr>
</thead>
<tbody>
<tr>
<td>Triglycerides (n=43) at risk (≥150 mg/dL)</td>
<td>67%</td>
</tr>
<tr>
<td>HDL (n=42) at risk (&lt;40 mg/dL)</td>
<td>73%</td>
</tr>
<tr>
<td>LDL (n=37) at risk (≥130 mg/dL)</td>
<td>70%</td>
</tr>
</tbody>
</table>
## 12 Month Outcomes – A1c

<table>
<thead>
<tr>
<th>Baseline A1c (n=44)</th>
<th>Improved A1c at 12 Months</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-diabetic (A1c = 5.7-6.4)</td>
<td>100%</td>
</tr>
<tr>
<td>Diabetic (A1c &gt; 6.4)</td>
<td>89%</td>
</tr>
</tbody>
</table>

59% of clients moved out of risk level entirely.