The Richmond Health & Wellness Program (RHWP)

RHWP Road Map

The RHWP Experience

1. RHWP Background
2. Program Model
3. Highlight: Behavioral Health Clinic
1. Measures/Outcomes
2. Grant Support
3. Policy and Sustainability
Third Annual Emswiller Interprofessional Symposium

**RHWP**
Identified Community Need

- **Health Professional Shortage Areas (HPSA)**
  - Of 930,000 elderly residents in Virginia, approximately 50% live in federally designated HPSAs

![Virginia Primary Care Health Professional Shortage Areas (HPSA)](image)

Joint Commission on Health Care, 2009

- **Healthcare Hotspots**
  - Population clusters with a high burden of chronic illness that can benefit from targeted care delivery interventions

![Gawande. The Hot Spotters. The New Yorker, 2011](image)
Community & RHWP Concerns:
- Aging in place with high chronic disease burden
- Average # of medications taken per day = 9 [pilot data]
- Average # of chronic conditions = 5 [pilot data]
- High emergency room utilization

Richmond Ambulance Authority
- Documented 138 transports to emergency department from DP in 2012 alone
  - Of the 138 transports, 133 were deemed non-emergent

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RHWP Interprofessional Collaborative Practice (IPCP) Teams

- Inter-professional Teams
  - Nursing
  - Pharmacy
  - Social Work
  - Medicine
  - Psychology

- Care Coordination
  - Link to appropriate care (liaison)
  - Surveillance
    - Diabetes – A1C monitoring
    - Hypertension – BP monitoring
    - Cholesterol
  - Counseling & Education
  - Triage
  - Weight Management
Dominion Place
Background

- **Company:**
  - DP is a Beacon Community
  - Property housing management group
  - Independently owned apartment complex for seniors
  - Managed under the guidelines of Section 8 housing for low-income eligible elders

- **Location:**
  - Located near the VCU Monroe Park Campus

- **Building & Residents**
  - One bedroom apartments
  - Approx. 247 residents living independently
Randolph Place

**Background**

- **Company:**
  - RP is a Better Housing Coalition property
  - Managed under the guidelines of Section 8 housing for low-income eligible elders

- **Location:**
  - Located near the VCU Monroe Park Campus

- **Building & Residents**
  - One bedroom apartments
  - Approx. 50 residents living independently

Carter Woods

**Background**

- **Company:**
  - CW is a Better Housing Coalition property
  - Managed as a Tax-Credit property for low-income eligible elders

- **Location:**
  - Located 5 miles from the VCU Medical Campus

- **Building & Residents**
  - One bedroom apartments with 8-10 couples
  - Approx. 150 residents living independently
**Year 3**

**Community**
- Dominion Place
- Randolph Place
- Carter Woods
- Fay Towers
- 4th Avenue

**Coordination**
- PCP
- Dental
- Behavioral Health
- Pharmacy
- Community Partners

**Outcomes**
- Students
  - Nursing
  - Pharmacy
  - Social Work
  - Medicine
  - Psychology
- Richmond Health & Wellness Program
- ED Visits
- Patient Improvement
- Partner Satisfaction
- Student Performance

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**RHWP Road Map**

**The RHWP Experience**

1. RHWP Background
2. Program Model
3. **Highlight: Behavioral Health Clinic**
   1. Measures/Outcomes
   2. Grant Support
   3. Policy and Sustainability
• Behavioral Health Interprofessional Teams
  ➢ Psychology
  ➢ Nursing
  ➢ Pharmacy
  ➢ Social Work

• Goal
  ➢ Behavior Change

• Strategy
  ➢ Brief, evidence-based interventions
  ➢ Can we make a difference in 1-5 sessions?
  ➢ Refer to long-term community resources if needed

Behavioral Health Clinic Services & Referrals

• Smoking Cessation
• Insomnia
• Grief & Bereavement
• Weight Management
• Anxiety
• Medication Adherence
• Stress & Relaxation
• Depression

• Substance Abuse
• Housing Concerns
• Interpersonal Relationships
• Cognitive Screening
• Patient/Provider Communication
• Connections to Community Resources
RHWP Behavioral Health Clinic

Acute Care & Behavioral Health

Service Population
- Overflow Home Visits
- Urgent Care Walk-in’s
- Crisis/Acute Needs
- Care Coordination

Services
- Home Visits
- Wellness Checks
- Care Coordination
- Referral Coordination
- Wound Care
- Medication Management
- Patient Education
- Blood Pressure
- Glucose Check

RHWP BH Flow

Clinic Room 1
Team 1
Psych Pharm SW

Clinic Room 2
Team 2
Psych NP Pharm

Clinic Room 3
Team 3
Psych NP SW
RHWP
Behavioral Health Clinic

1. Learn about the Patient’s Reason for visit
2. Assess the Patient’s Priorities, Motivation, and Resources
3. Negotiate Intervention
4. Agree on Goals; Create Specific Tasks (Homework)
5. Plan Follow-Up

“According to the Wellness Clinic’s notes, it sounds like you have tried many different medications to help you sleep, all of which work while taking them, but then your problems with sleeping always return once you stop the medication. The Wellness Clinic is thinking that a behavioral approach would help you improve your sleep. Is that your understanding of why they wanted you to see us, or do you have another take on this?”
RHWP Behavioral Health Clinic

Behavioral Health Clinic Session Tools

- **Patient/Provider Rapport**
- **Relaxation Techniques**
- **Evaluation/Assessment**
  - Self-Report Questionnaires
    - GDS-30 & 15, GAD-7, Mini-Cog, etc.
  - Focused interview
- **Motivational Interviewing**
  - Rolling with resistance
  - Amplified reflection
  - Looking for change talk
- **Cognitive-Behavioral Therapy**
  - Challenging thoughts
  - Exposure
  - Activity planning
- **Psycho-education**
- **Self Monitoring Assignments**
- **Time-Specific Goal Setting**

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Third Annual Emswiller Interprofessional Symposium

RHWP
Evaluation Team

- **Leticia R. Moczygemba**, PharmD, PhD
  - Assistant Professor, School of Pharmacy
- **Paul E. Mazmanian**, PhD
  - Associate Dean, Assessment and Evaluation Studies, School of Medicine
- **Moshe Feldman**, PhD
  - Assistant Professor, Assessment and Evaluation Studies, School of Medicine
- **Antoinette B. Coe**, PharmD, PhD Candidate
  - Research Assistant, School of Pharmacy
- **Arzo Hamidi**, BA
  - Research Assistant, School of Pharmacy

RHWP
Leadership Team

- **Alan Dow**, MD, MSHA
  - Assistant Vice President of Health Sciences for Interprofessional Education & Collaborative Care
- **Peter Boling**, MD
  - Division Chair of Geriatric Medicine
- **Ann Hamric**, PhD, RN, FAAN
  - Associate Dean of Academic Programs
- **Patricia Slattum**, PharmD, PhD
  - Vice Chair for Graduate Studies, Director of the Geriatric Pharmacotherapy Program
- **Leland “Bert” Waters**, PhD
  - Assistant Professor, Virginia Geriatric Education Center
- **Sheryl Garland**, MHA
  - Vice President for Health Policy and Community Relations, VCUHS
**RHWP**

**Measures/Outcomes**

- **Patient Outcomes**
  - Care coordination (care coordination tool)
  - Improved disease-state management (i.e. BP, A1c)
  - Reduction in ER visits

- **Student Outcomes**
  - Behavioral interventions
  - Disease-state knowledge
  - IPE principles/Leadership

- **Cost Savings/Cost Avoidance**
  - Decreased healthcare utilization
  - Provision of services and associated cost

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**Resident Enrollment**

*Current*

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<td>(173 signed up since 2012)</td>
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<tr>
<td><strong>Randolph Place</strong></td>
<td>24</td>
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<tr>
<td><strong>Carter Woods</strong></td>
<td>27</td>
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<tr>
<td><strong>Total</strong></td>
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RHWP Measures/Outcomes

**Resident Visits**

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<th>Spring 2013</th>
<th>Summer 2013</th>
<th>Fall 2013</th>
<th>Spring 2014</th>
<th>Summer 2014</th>
<th>Fall 2014</th>
<th>Spring 2015</th>
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<td>184</td>
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<td>105</td>
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<td>Total (1870)</td>
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<td>237</td>
<td>211</td>
<td>177</td>
<td>371</td>
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RHWP developed forms

- Intake form
- Progress note
  - Wellness Clinic
  - Behavioral Health Clinic
- Point of care results
- Vitals sheet
- Medication profile
- Emergency room notes
RHWP Measures/Outcomes

- **Adapted Care Coordination Tool**: 1
  - Care coordination activities/needs
  - Activity to fulfill needs
  - Outcomes prevented
  - Outcomes occurred
  - Notes

- CPT code list
- ICD-9 list
- Several pilot tests

RHWP Measures/Outcomes

- **Validated Screening Tools**
  - Geriatric Depression Scale-15
  - Katz Activities of Daily Living Scale
  - Vulnerable Elders Survey-13 items
  - Assessing Care of Vulnerable Elders Quality Indicators
  - Frail Questionnaire Screening Tool
  - Mini-Cog
  - Generalized Anxiety Disorder Scale-7 items
**Participant Experience**

- Focus Groups
  - Impact on their health
  - Impact on understanding of health conditions
  - Communication with health care providers
  - Interaction with health care providers and students
  - Overall experience

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### RHWP Measures/Outcomes

#### Student Participation

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<td>41</td>
<td>35</td>
<td>54</td>
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**Student Pre-survey**
- Readiness for Interprofessional Learning Scale\(^9\)
- Collective Orientation Scale\(^{10}\)
- Knowledge questions
- Demographics

**Student Post-survey**
- Collective Orientation Scale\(^{10}\)
- Team Performance Scale\(^{11}\)
- Knowledge questions
- How interprofessional care improves health
- Satisfaction
- Suggestions for improvement, strengths, and weaknesses of the course
- Demographics
**Knowledge questions developed by faculty**
- Communicating with older adults
- Health literacy
- Motivational Interviewing
- Diabetes
- Hypertension
- Cognition
- Falls
- Frailty
- Medications and polypharmacy

**Brief post-survey**
- How interprofessional care improves health
- Satisfaction
- Suggestions for improvement, strengths, and weaknesses
- Demographics

**Focus groups**
- How the team worked together for patient care
- Thoughts on interprofessional education
- Satisfaction with course
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RHWP Road Map

• VCU Division of Community Engagement
  - Community Health and Wellness Program for Older Adults
    - Brief intervention focused on diabetes and hypertension
    - Motivational Interviewing component
    - Timeline: May 2012

• Health Resources and Services Administration (HRSA)
  - The Nurse Education, Practice, Quality and Retention (NEPQR)
  - IPE focused grant to refine and replicate the RHWP
  - $1.5 million over 3 years
  - Timeline: July 2013 – July 2016
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6. **Sustainability and Policy**

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**The “Value Added” of Linking Publicly Assisted Housing for Low-Income Older Adults with Enhanced Services**
Hypothesis

“Publicly assisted senior housing can act as an effective platform for organizing a system of coordinated health and long-term services and supports for low-income older adults”

U.S. Department of Health and Human Service Assistant Secretary for Planning and Evaluation Office of Disability, Aging and Long-Term Care Policy, January 31, 2012.

Need

- 1.8 million older adults live in federally subsidized housing
- More than 50% limited in walking, climbing stairs
- 12% with mental or cognitive disability interfering with ability to perform IADL
- Increased risk of institutionalization

**RHWP Sustainability**

- **Health Service Revenue**
  - Billable services
  - Shadow billing
  - Cost avoidance
  - MCO contracts
  - Medicare claims

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**Cab, schnab. Without the lights and sirens, I'd never make it to lunch on time.**
**Education**
- VCU Quest for Distinction
- Service learning
- Community Based
- Interprofessional
- Team based care
- Competency based
- Prepared work-force

**Research**
- Doctoral Students
- Pre-Doc Awards
- NIH
- Foundation
• **Dissemination Efforts**

![Logos of Urban Institute, LeadingAge, MacArthur Foundation, and Beacon Communities]

• **Team Chemistry**
  - Don’t overlook
  - Make decisions up-front (publication plan, etc.)
  - Defer to better expertise

• **Community Partnerships**
  - Research depends on strength of these relationship
  - Needs to be revisited

• **Funding Preference**
  - Goal and objectives more important than awardee

• **Sustainability**
  - What will you do when funding runs out?
Funding

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Questions?
The Richmond Health & Wellness Program (RHWP)

Promoting Healthy Living at Home