INTEGRATED CARE MODELS AND OUTCOMES FOR CLIENTS WITH CO-MORBID CONDITIONS

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WELLNESS • RECOVERY • RESILIENCE

Mental Health Services Act Innovation Project on Integrated Care

- 3 year partnerships between mental health agencies, substance use programs and Federally Qualified Health Centers (FQHCs)
- 3 distinct models:
  - Integrated Clinic Model (ICM)
  - Integrated Mobile Health Team (IMHT)
  - Integrated Services Management for Underserved Ethnic Populations
    - African/African American
    - Native American
    - Asian Pacific Islander
    - Latino
    - Middle Eastern/Eastern European

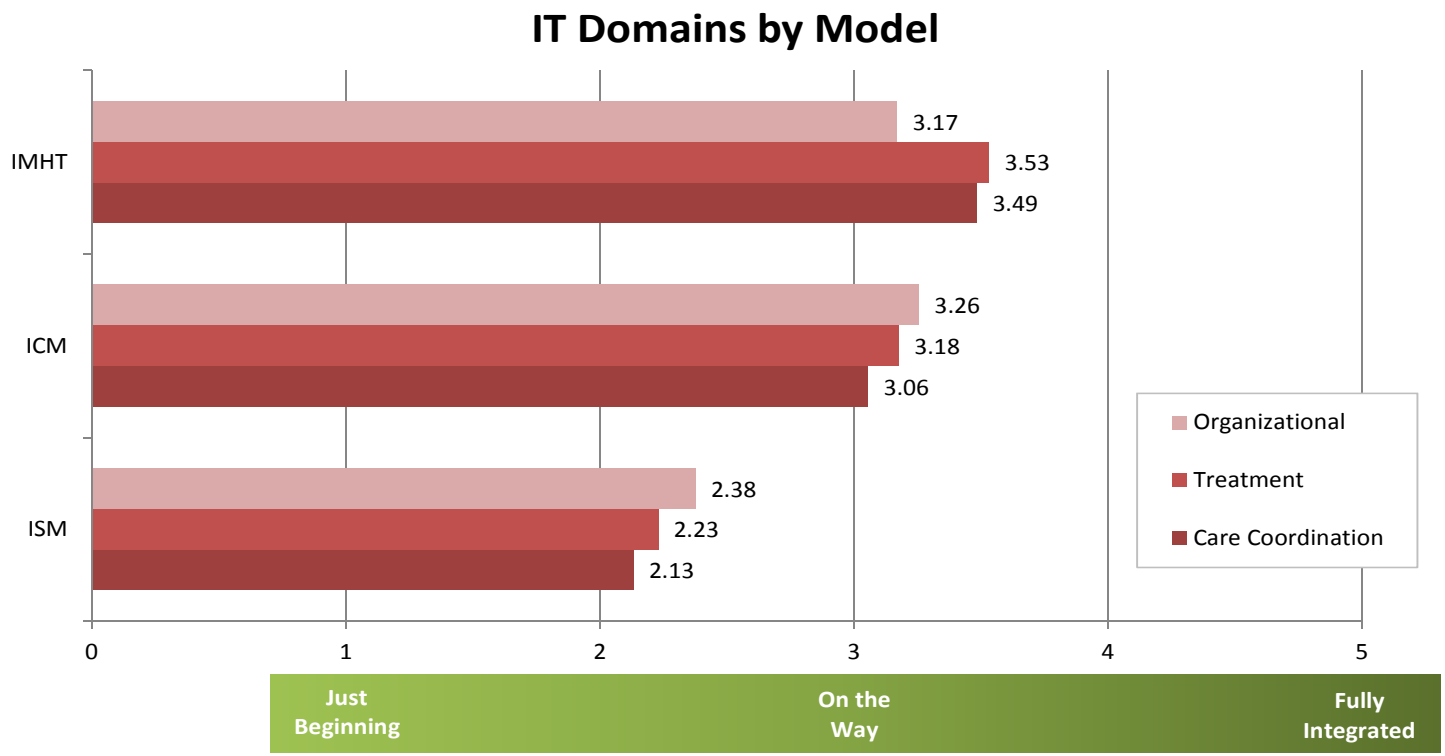
Overview of Client Measures

	# of Items	Collection Frequency	Goal(s) Addressed
PROMIS Global Health	10	Quarterly	• Improved physical health outcomes • Improved mental health status • Successful links to integrated health care
PROMIS-derived Alcohol/Substance Use	12	6 months	• Successful links to integrated health care
Physical Health and Behaviors Survey	39	6 months	• Successful links to integrated health care • Improved utilization of community resources • Decreased use of emergency services (physical or mental) • Culturally sensitive/competent care
CHOIS Supplement	20	6 months	• Positive Recovery Factors • Specific Psychiatric Symptoms • Response Inconsistency
Stigma Survey-10	10	6 months	• Reduction in General Mental Health Stigma
Client Satisfaction Questionnaire	10	6 months	• Culturally sensitive/competent care • Client satisfaction with services • Improved quality of care received
Post-Outcomes Survey	10	6 months	• Improved physical and mental health outcomes • Improved community support • Increased consumer self-efficacy

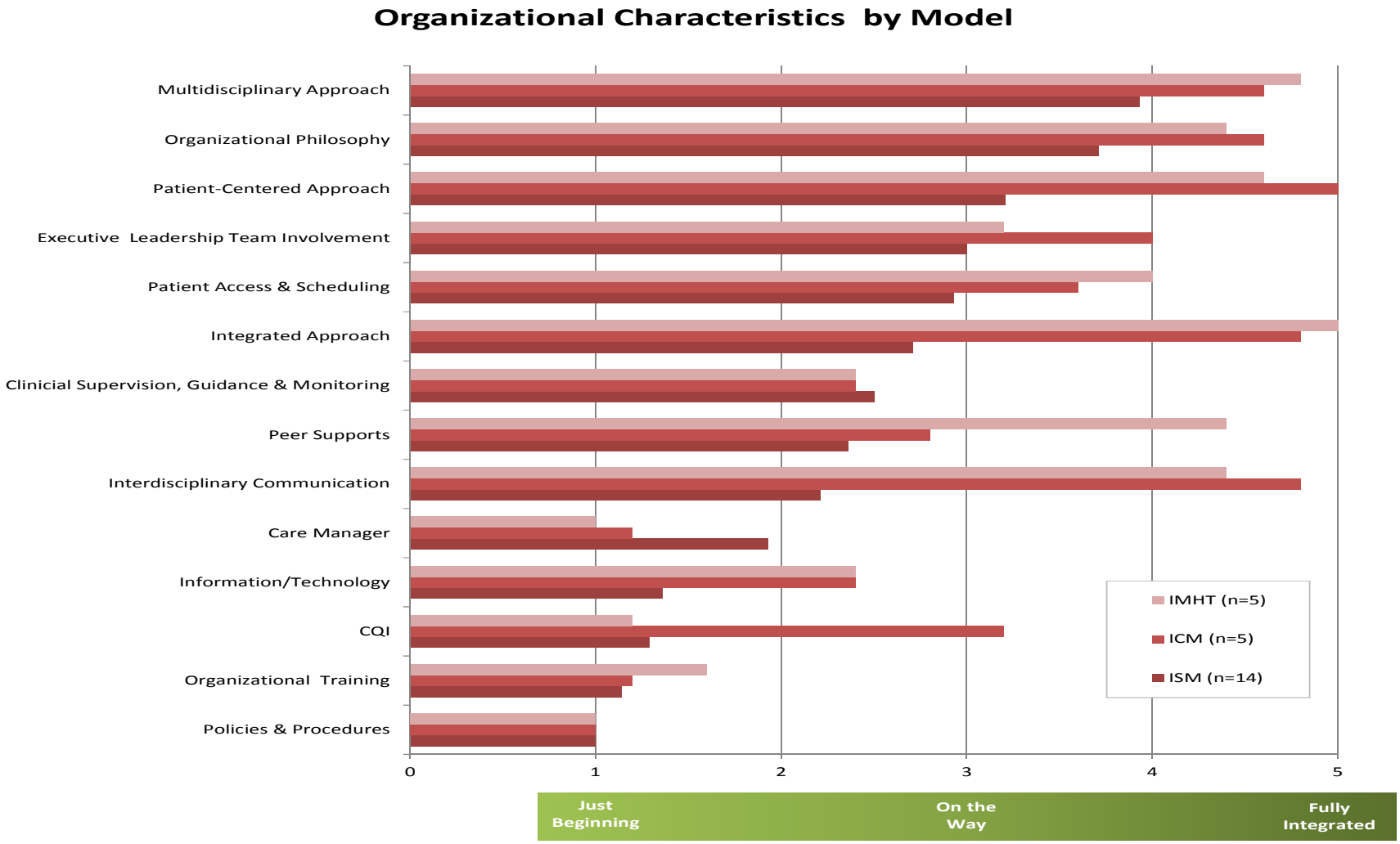
Overview of Clinician Measures

	# of Items	Collection Frequency	Goal(s) Addressed
Physical Health Indicators	10	6 months	• Improved physical health outcomes
Illness Management& Recovery Scale (IMR)- Clinician Version	18	Quarterly	• Community improvement/integration into the community • Improved quality of care received by client • Improved quality of care given by Clinician/Staff • Improved mental health outcomes • Successful links to integrated health care
Milestones of Recovery Scale (MORS)	1	Quarterly	• Improved mental health outcomes • Increased involvement in care
Staff Satisfaction Questionnaire	TBD	6 months	• Culturally sensitive/competent care • Improved quality of care given by Physician/Staff

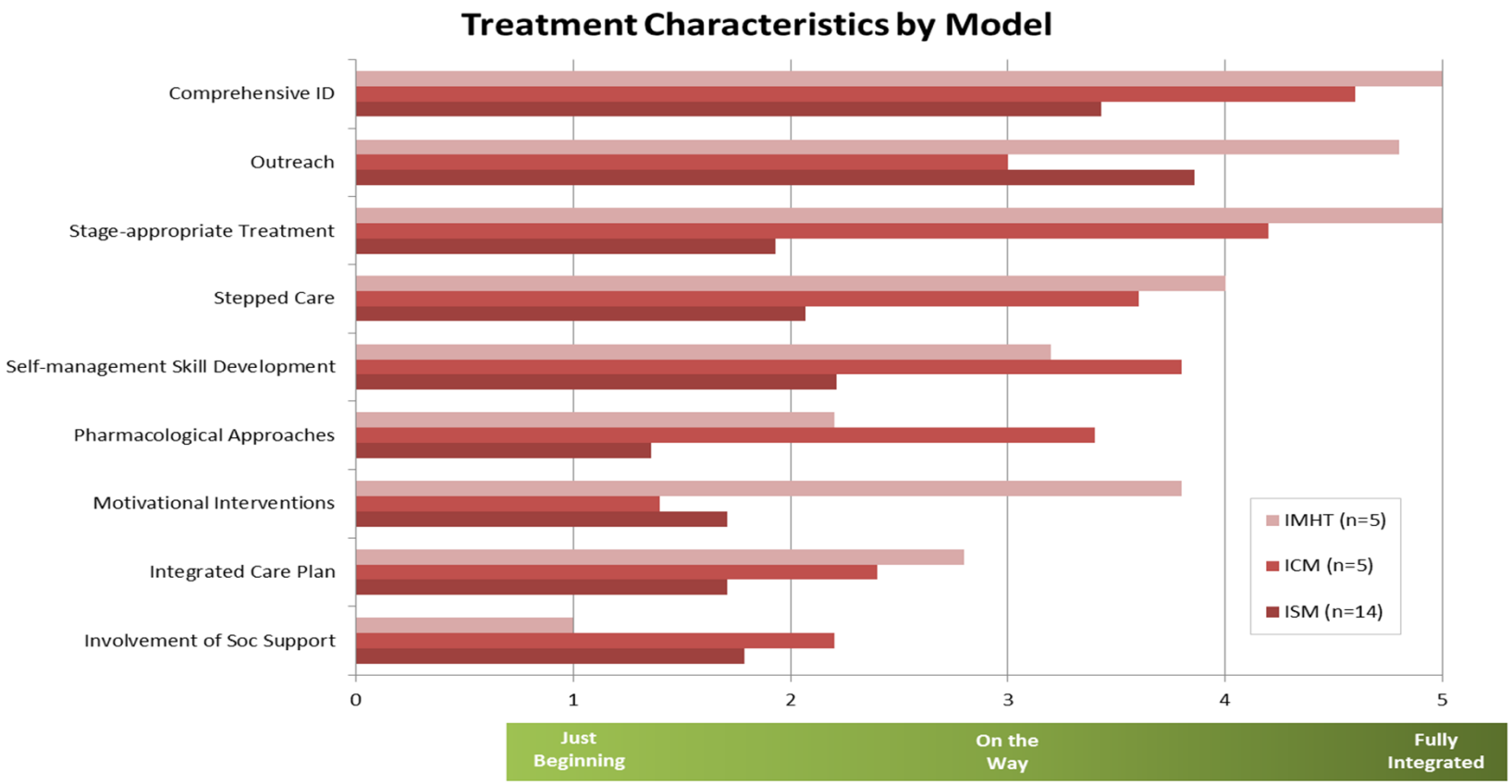
Integrated Treatment Tool: Ratings by Model



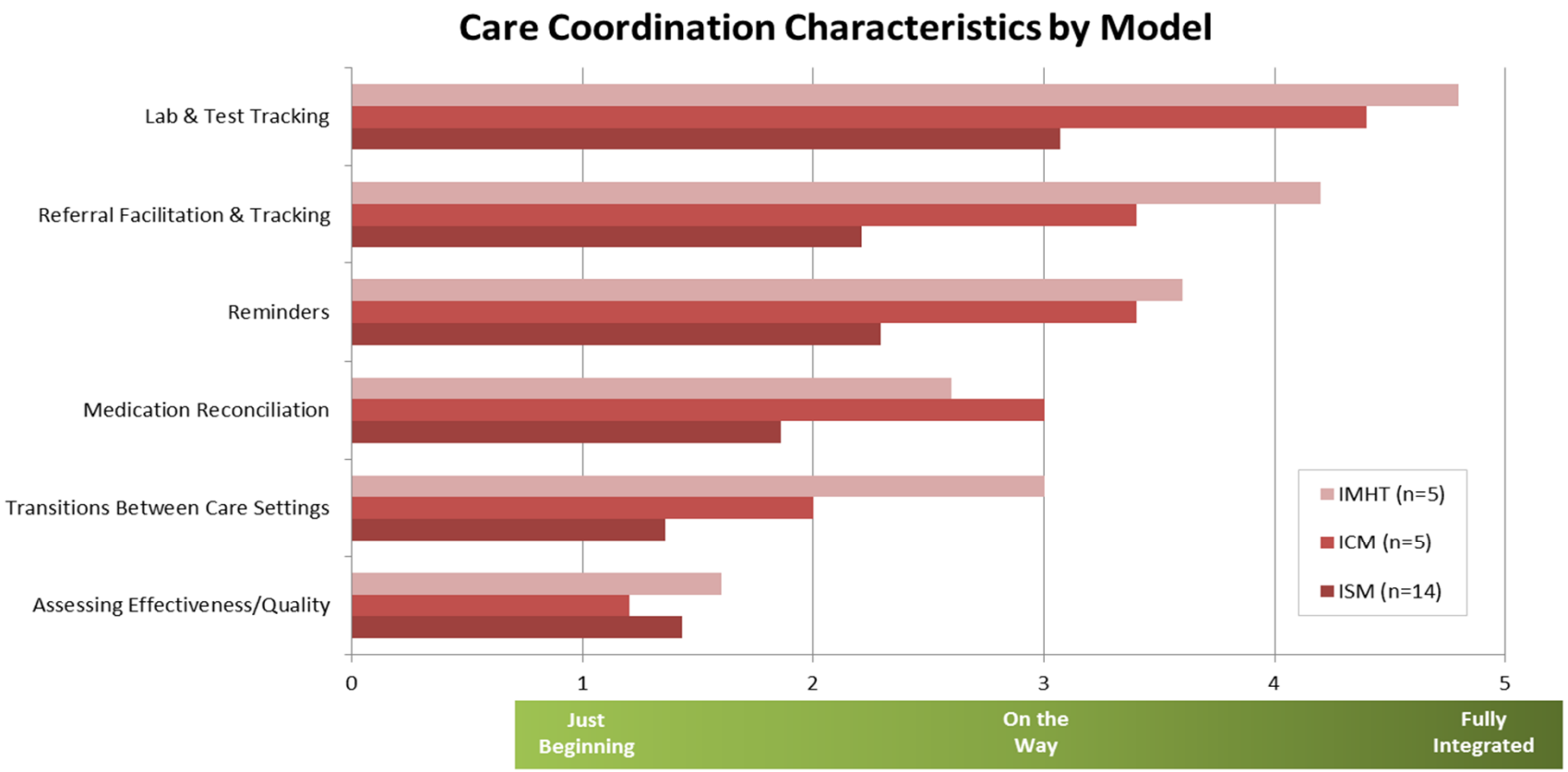
Integrated Treatment Tool: Organizational Domain by Model



Integrated Treatment Tool: Treatment Domain



Integrated Treatment Tool: Care Coordination Domain



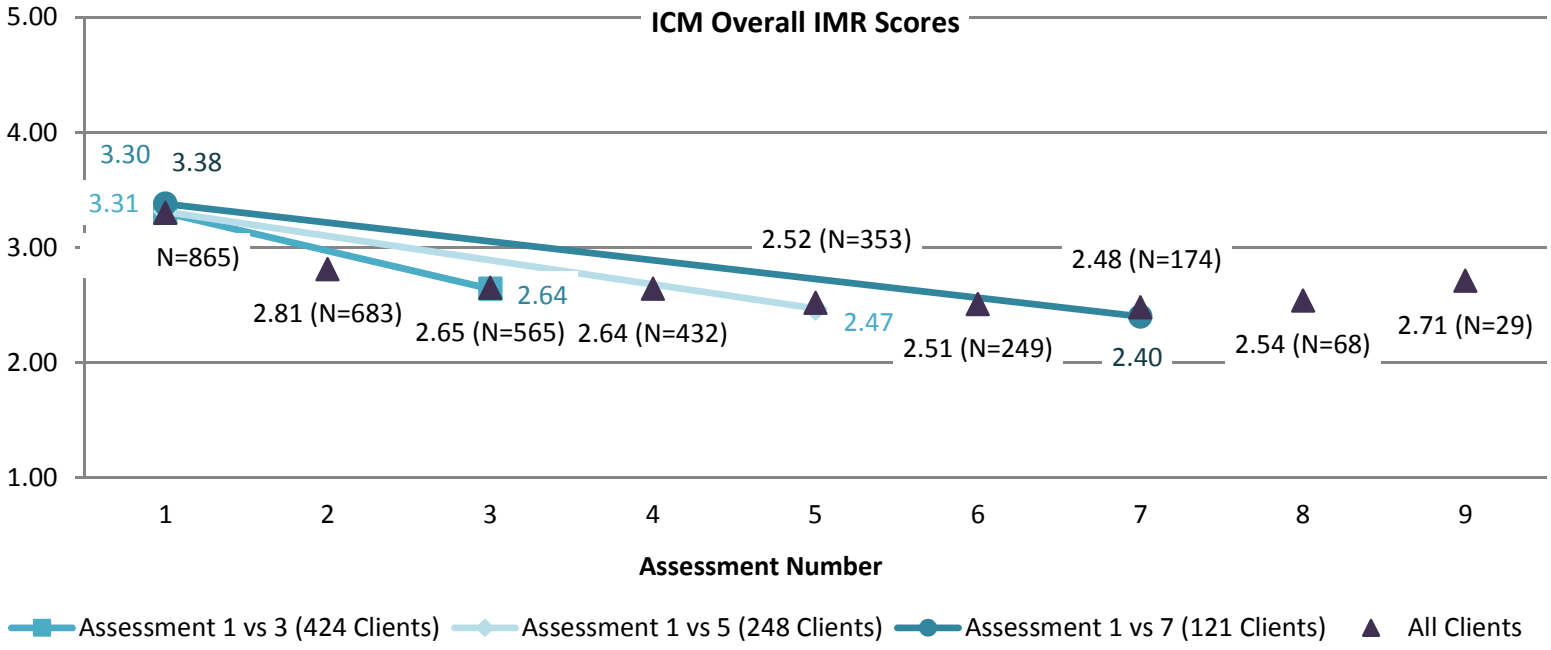
Successful Model Outcomes

- All 3 models were successful in improving health, mental health and substance use symptoms
- There were no differences in improvements in health status and mental health status across models
- In both ICM and IMHT, the more highly integrated models had poorer health status at baseline, and in general, greater improvements in health status
- Successful programs had staff that were willing to expand their professional roles in order to improve care (*whatever it takes* approach)

Measuring Client Recovery

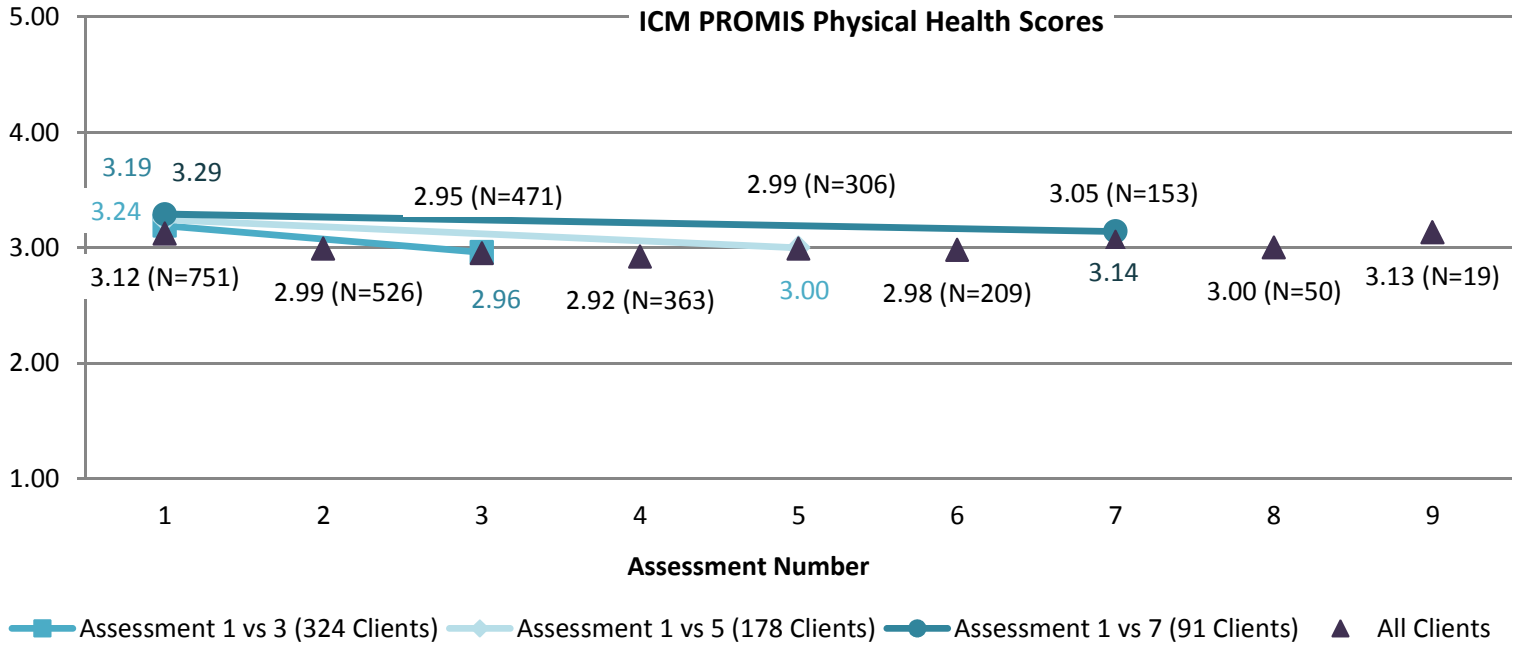
- Paired samples t-tests and chi-square tests were used to examine the statistical significance of changes in scores on the measures over time
- Clinical significance is determined using the Minimal Important Difference (MID), which represents the smallest improvement in a scale score that would indicate an observable change in client health
  - If the difference between a client's baseline and follow-up scores on a specific outcome measure is greater than the MID, that client is considered to have achieved a clinically meaningful change for that outcome
- Both Statistical Significance and Clinically Meaningful Changes are reported

ICM Mental Health Outcomes



- There were significant improvements on the IMR, a clinician-rated mental health measure, 6,12 and 18 months after enrollment in INN services, compared to ratings at baseline
- The majority of ICM clients had clinically meaningful improvement in Overall IMR scores 6 months (71.0%), 12 months (79.4%) and 18 months (81.8%) after enrolling in services

ICM PROMIS Physical Health

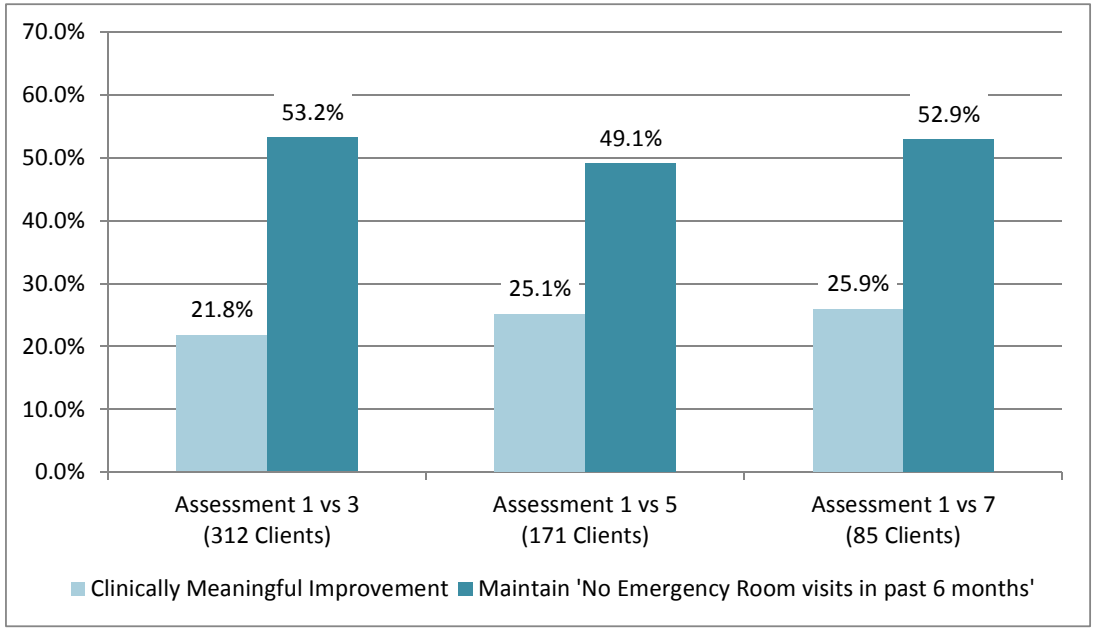


- There were significant improvements in client-rated physical health outcomes 6,12 and 18 months after enrollment in INN services, compared to ratings at baseline
- Close to half of ICM clients had clinically meaningful improvement in PROMIS Physical Health scores 6 months (40.7%) and one year (39.9%) after enrolling in services, compared to baseline

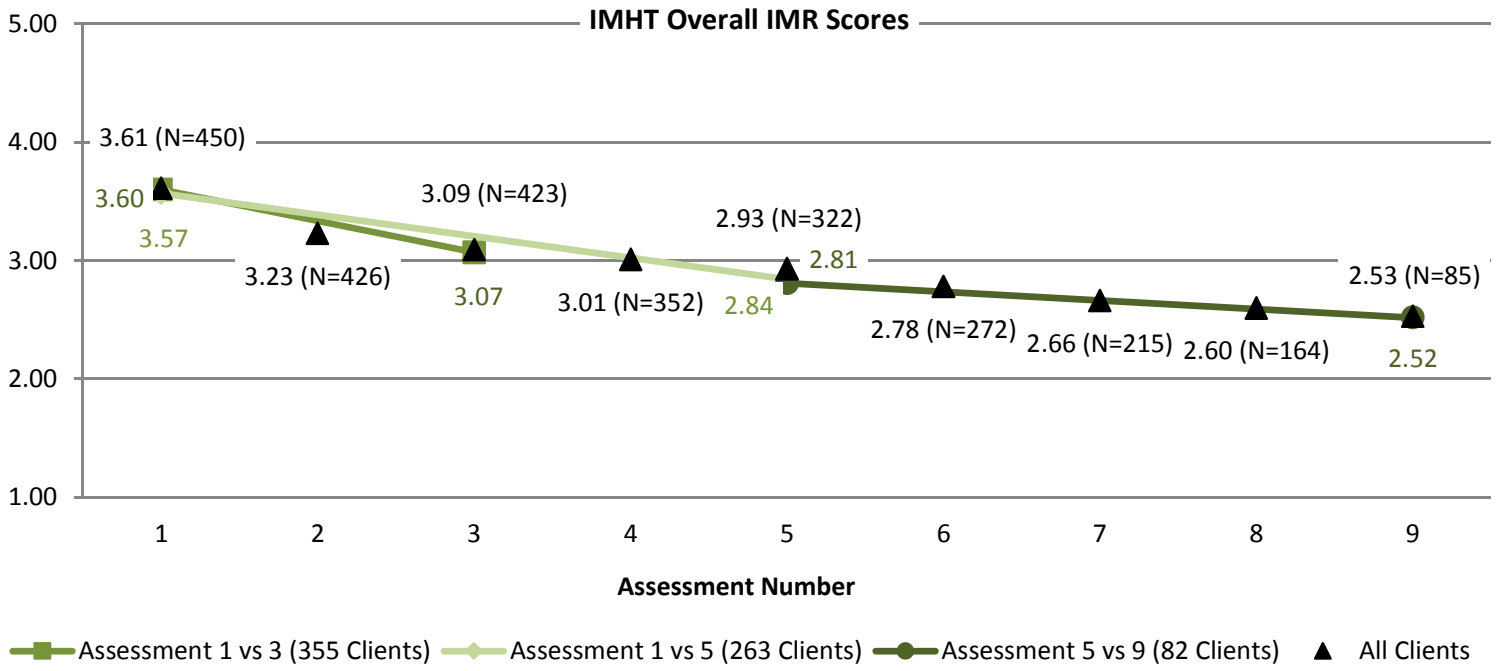
ICM Use of Emergency Service

There was a significant decrease in use of emergency services 6,12 and 18 months after enrollment in INN services, compared to baseline

Of those clients that reported visiting the emergency room prior to receiving Innovation services, 25% of these clients reported fewer visits at the 18 month assessment

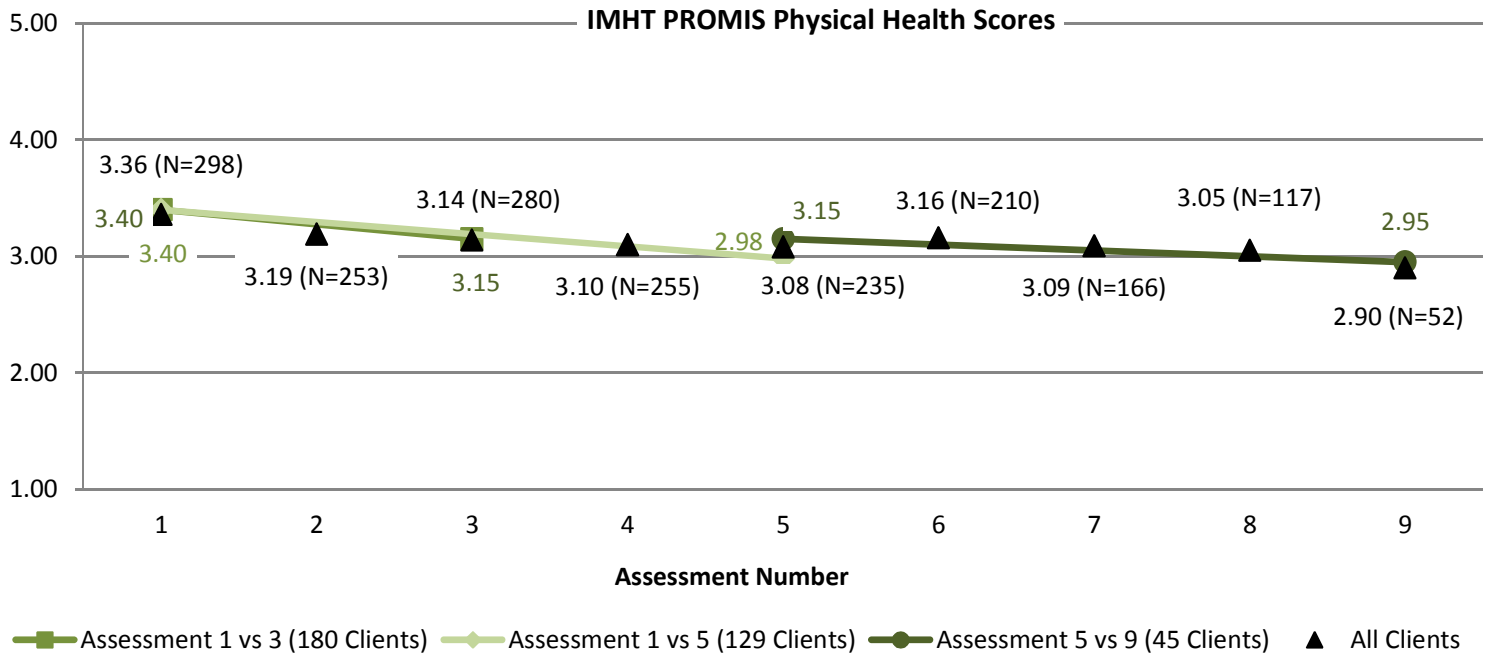


IMHT Mental Health Outcomes



- IMHT clients had significant improvements on the IMR, a clinician-rated mental health measure, 6 and 12 months after enrollment in INN services, compared to ratings at baseline. Clients continued to significantly improve between 12 and 24 months after first receiving INN services.
- The majority of IMHT clients had clinically meaningful improvement in Overall IMR scores 6 months (65.4%) and 12 months (74.9%) after enrollment.

IMHT PROMIS Physical Health

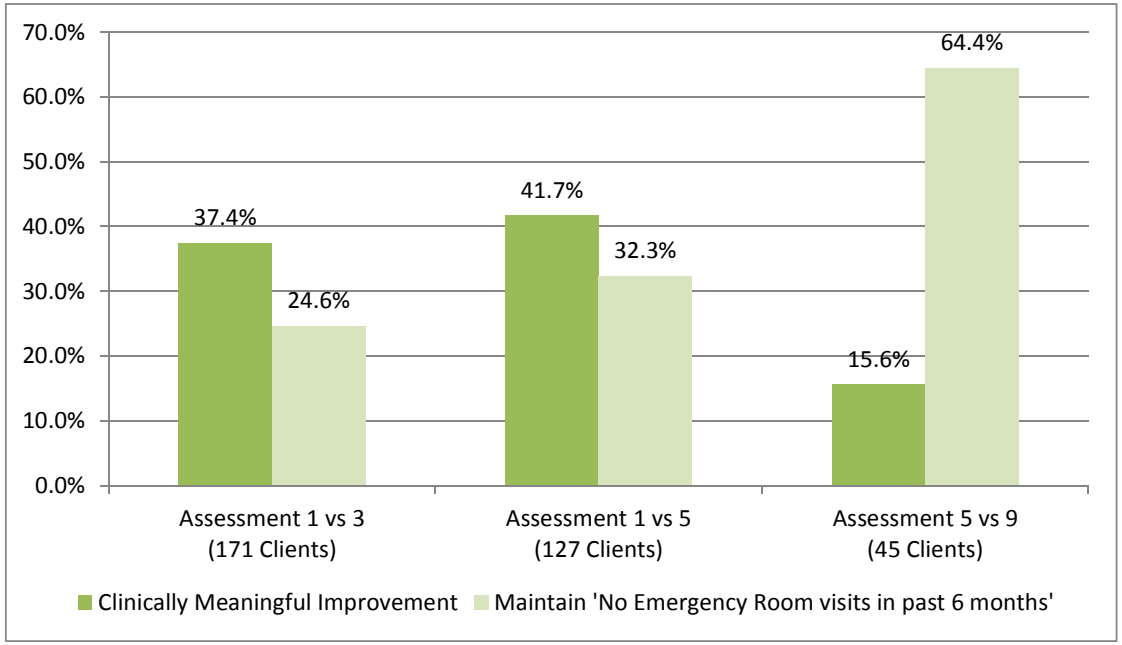


- There was a significant improvement in client-rated physical health 6 and 12 months after enrollment in INN services, compared to ratings at baseline
- 52.7% of IMHT clients had clinically meaningful improvement in PROMIS Physical Health scores 6 months after enrolling in services, and over half of clients (52.7%) had clinically meaningful improvements 12 months after enrollment when compared to baseline

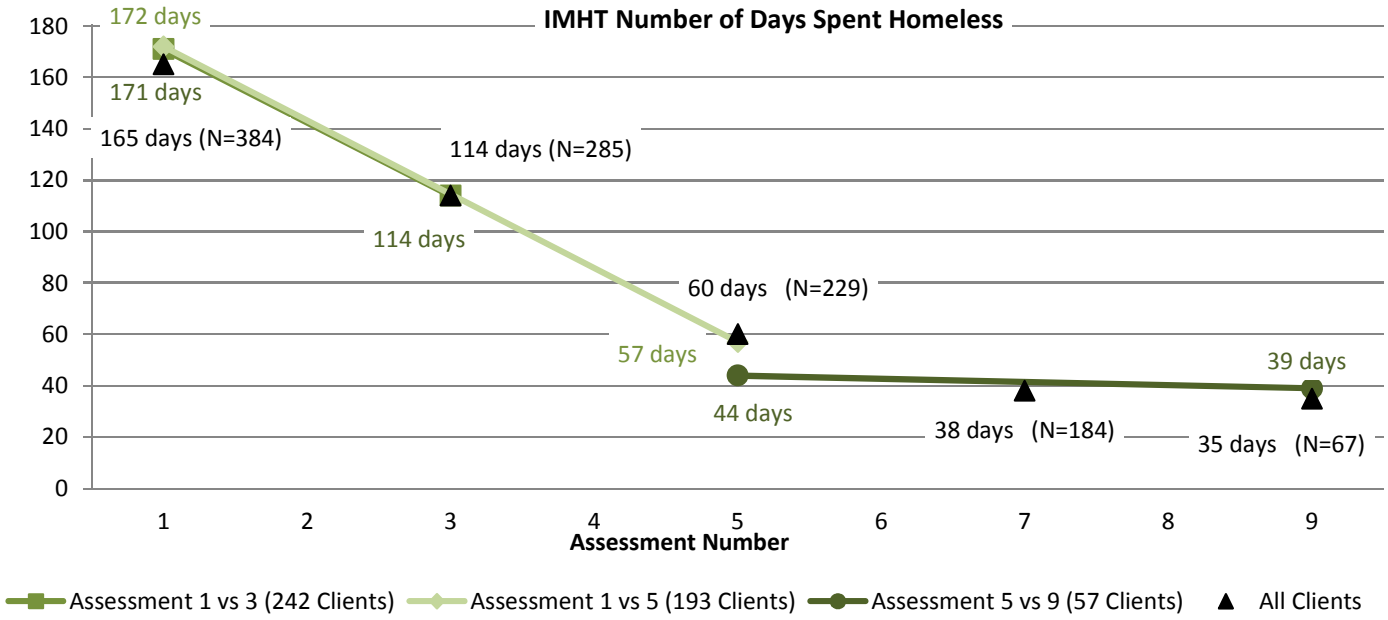
IMHT Use of Emergency Service

There was a significant decrease in use of emergency services 6 and12 months after enrollment in INN services, compared to baseline

Of clients who had visited the emergency room prior to receiving Innovation services, the percentage of clients with fewer ER visits increased during each subsequent assessment period during the first year



IMHT Impact on Homelessness



- Compared to baseline, IMHT clients spent significantly fewer days homeless 6 and 12 months after enrollment in INN services.
- Many IMHT clients (40.1%) reported a clinically meaningful reduction in the number of days spent homeless 6 months after enrolling in services, when compared to baseline.
- More IMHT clients (69.9%) experienced a clinically meaningful reduction one year after enrollment in IMHT.

Effecting Positive Outcomes

- Establish intentional partnerships, clear purpose and service expectations
- Establish a culture of learning and support across the partnership
- Establish a culture of collective investment in patients
- Emphasize the collection and use of outcome measures and promote data driven management
- Promote synergistic learning
- Fund infrastructure development to support integrated care
- Fund care coordination, including shared care planning and review

For More Information

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