Helping people manage their chronic conditions

Each week, Carla Ann Mitchell, a trained "Peer Leader," spends an afternoon at Health People - Community Preventive Health Institute giving a workshop to community members on how to better understand and manage their Type 2 diabetes.

Carla Ann Mitchell at Peer Leader graduation.

Topics covered over a six-week period include: handling symptoms of diabetes, fatigue, pain, hyper/hypoglycemia, and emotional issues like depression, anger, fear and frustration. They also address exercise, healthy eating, appropriate use of medication and working more effectively with health care providers.

Participants make weekly action plans, share experiences, and help each other solve problems they come across in developing and carrying out their own diabetes management plan.

This DSRIP project is a collaboration of BPHC and one of its member organizations, Health People, which recruits, trains and certifies Peer Leaders to administer the national Stanford Diabetes Self-Management Program (DSMP).

"I lost several family members to diabetes and I live with the disease so people know that I can relate to their experience," says Carla Ann. "That's one of the reasons people respond so well to the program. They know that I understand their lives and where they are coming from."

Rosemary Lopez (right) is a community health worker with a.i.r. nyc, an asthma home-based self-management program designed to help adults and children struggling with asthma control their condition.

Asthma is a serious, chronic disease and its prevalence in the Bronx ranks among the highest in the United States, including 20% of children and 1 in 11 Medicaid patients.

Rosemary has been trained to engage people in learning more about managing their asthma and available services in their communities. In her role, she visits families at their homes to help identify any asthma triggers that may be present, such as smoke, dust or poor ventilation. She reviews their asthma medications, and if needed, refers them to other support services that can make their home environment healthier.

"The outcome can be fewer hospital stays, less time off work and fewer school absences," Rosemary says. "It can change families' lives."

BPHC's partnership with a.i.r. nyc on this DSRIP project drives our goal to keep people with asthma healthy, active and out of the hospital.

Shoshanah Brown, Executive Director, a.i.r. nyc (right), congratulates Rosemary Lopez, Community Health Worker, at a special BPHC celebration.

NYC Council Member Ritchie Torres (15th-NY) (far right) joined BPHC in thanking Peer Leaders and Community Health Workers for their role in helping people in the Bronx stay healthy.

Collaboration
Transformation
Outcomes

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NEWSLETTER

Spring 2017

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A message from Irene Kaufmann, Executive Director

Hello friends,

Across New York, a transformation in how we care for people is taking place and I am very optimistic about what it means for all of us in the Bronx.

We're in the middle of a five-year state initiative called DSRIP, which aims to reduce avoidable emergency room (ER) and hospital admissions by 25% by building a provider system of coordinated, community-based care that focuses on treatment, wellness and disease prevention.

DSRIP is about making sure patients are receiving care ahead of time so they don't need to go to the ER. It's about providers working together and sharing information so that the patient's care is coordinated. It means that doctors and all members of the care team have the technology to share information seamlessly, and, whenever possible, that care is taking place close to home in the community, not in a hospital.

SBH Health System has taken a lead role in DSRIP and that is why it formed Bronx Partners for Healthy Communities (BPHC). More than 200 organizations have joined us in 10 important projects that will help us create a healthier Bronx.

Changes are starting to happen and I am excited to tell you about them in this newsletter.

DSRIP is…

Assessing the needs of our community

Before launching DSRIP in 2015, BPHC conducted an intensive analysis of the health care challenges facing Bronx residents with input from diverse organizations that have deep roots in the community.

They include higher rates of cardiovascular disease, asthma and HIV/AIDs, and lack of mental health services. For instance, short-term diabetes hospitalizations are nearly 50% higher than the New York City average.

Among the Medicaid population, the Bronx ranks highest among all boroughs in New York City in the rate of potentially preventable hospital admissions.

Using this information, BPHC identified 10 projects focused on preventing the need for hospital care by keeping people well and making sure that those who become sick receive quality, coordinated care by doctors and other community providers.

Getting behavioral health care right

People with mental illness are disproportionately affected by diabetes, high blood pressure, obesity and overall poor health. On average, they die 20 years earlier than the general population because of inadequate medical care. Yet primary care and behavioral health services in New York State have traditionally been provided for and billed separately.

BPHC has brought together more than 40 representatives from leading Bronx behavioral health organizations to develop a model of care that treats people with both mental health and medical needs in a more comprehensive manner.

This includes making sure that behavioral health and primary care teams are working together and communicating about a patient's needs and that all providers are using standardized tools for ADHD, mental health and substance abuse screening.

Reaching young people with mental health or substance abuse issues as early as possible is a major factor to setting the stage for success. As part of this DSRIP project, BPHC is working with 10 Bronx schools to train counselors and teachers to identify and connect kids who have emotional, behavior or substance abuse challenges to the right doctors and support.

Ann Sullivan, MD, Commissioner of the NYS Office of Mental Health (left), and State Senator Gustavo Rivera (right) joined Irene Kaufmann, BPHC Executive Director (center), at the launch of BPHC's Behavioral Health DSRIP project.

Alvin Lin, Senior Managing Director, Strategy and Innovation, Primary Care Information Project / NYC REACH, leads a discussion on new processes for referrals between mental health, substance abuse and primary care providers.

Connecting people to health care and insurance

Heidi Hynes, Executive Director of the Mary Mitchell Family & Youth Center (MMFYC) which serves families in the Crotona and Fordham areas of the Bronx, says that many people in the community MMFYC serves do not realize they are eligible for insurance let alone understand how it works or how to apply.

The result is they wait until they are very ill and need to visit the Emergency Room (ER), leading to costly care and more time away from work and home than if they were treated earlier.

It is estimated that there are more than 70,000 eligible people in the Bronx who are "under-utilizers" of health care services available to them.

MMFYC is one of seven Bronx community organizations partnering in BPHC's "Community Health Literacy" program to reach out to and connect people to insurance, local primary care providers and other community services.

"Ultimately, we want people to understand that they don't have to wait until they are extremely sick and need the ER. They can go to their local clinic and see their PCP," says Hynes.

(Right) Medical Office Assistants completed training and passed the Certified Clinical Medical Assistant exam through the National Health Career Association.

Equipping our workforce to care for people with complex needs

Workers who interact with patients are not limited to hospitals and doctors' offices. They can be found at substance abuse treatment centers, housing services, clinics, home health care agencies, meals programs and more.

DSRIP is opening doors to new jobs, opportunities and roles for healthcare workers – roles that enhance their scope of work and prepare them for community-based care.

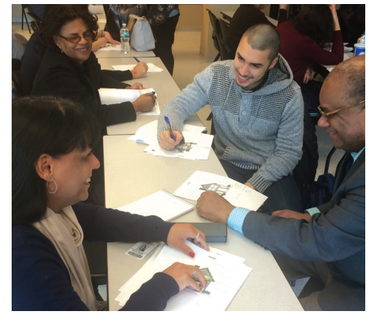
Participants who take BPHC's Medical Office Assistant Refresher Training are eligible to take an exam for national certification, which takes place on the last day of training. To date, participants in three training groups have taken and passed the exam.

One growing and important role is that of the Care Coordinator who works with the patient, doctor and the community to ensure that the patient is going to follow-up appointments and receiving any needed local services such as meal deliveries, smoking cessation programs, mental health services and more.

BPHC provides trainings to ensure that these professionals have the preparation and support needed to coordinate care for people who have many medical and social service needs.

Communication is also critical to working with patients who come from diverse backgrounds and have differing experiences with the health system. BPHC trainings give workers the skills and insights to listen, speak and offer care through the lens of a patient's culture, beliefs, language and communication style.

Marcia Stoddard-Pennant, Community Health Worker with The Bronx Health Link, a BPHC member organization, found the training to be enlightening. "It starts with self-reflection on your own identity and the impact it has on your work. From there you can understand others' worldview and meet them where they are. It's the only way we can truly reach our patients."



Members of the Health Education Literacy Team from ArchCare, a BPHC member organization, participate in Cultural Competency Training.