



**BHH Designated Provider Agency
Implementation Session**
October 7, 2016 1:30pm to 3:00pm
River Valley Services
Middletown, CT



Call-in number: 1-866-646-8807

Pass code: 3131895

Facilitated By: DMHAS (Jessica DeFlumer-Trapp)

Attendees: Sound (Enrique Juncadella); RVS (Elsa Arce); CRMHC (Kristen Russell); CMHA (Deb Dutkiewicz, Chris Porcher, Lisa Daley); SMHA (Stephenie Guess); CMHC (Lisa Lanouette, Nancy Watsky); WCMHN (Ellen Severn, Arlene Arias); United Services (Lori Behling, Jennifer Mastrangelo); OOC (Lauren Staiger); CHR (Donna Wertz); Bridges (Valerie Mallard, Trish Kramer, Dawn Silver-DeAngelis); SWCMHS (Dorothy Washington); Intercommunity (Suzanne Otlowski); Rushford (Jennifer Vega); ASO (Bonni Hopkins, Amy Miller, Denise Roberts)

Call-in:

1. Provider Spotlight - CMHC

- a. Rotating schedule of different topics every 3 weeks-try to incorporate education and hands-on activities:
 - Medications
 - Foot massages for diabetic patients, with give-away items such as mirrors and filing boards.
 - Pharmacist and nutritionist talk about diabetic diets
 - Pop-up blood pressure clinics – always change time and location to provide service to different populations
- b. Providing health promotion over the phone using the health observances received from ABH, along with other resources
- c. Bilingual Diabetes Champion-Albert Whitaker, Director of Community Health Strategies-Type 2 Programming at the American Diabetes Association, is available and willing to visit agencies to discuss resources/information for people living with diabetes. To contact Mr. Whitaker, you may email him at awhitaker@diabetes.org or call him at 617-482-4580 ext. 3469

2. BHH Round Table – Health Promotion: how do providers decide content for health and wellness services?

- a. How topics are developed:
 - WCMHN – Use seasonal topics (allergies, flu pneumonia, etc)
 - SMHA – Ask people who are currently involved in groups what they would like to see, also looking at data to identify frequent chronic diseases.
 - US – Use BHH health observance topics because of the consistent message. They are also able to share the resources and packets with case managers. They sometimes tailor the classes/handouts to meet the needs of clients and so it's woven into existing programming (ex. offer informative classes as well as creative classes on the same topics)
 - Rushford – Clients complete a post-class or post-activity survey. Use the feedback provided to develop new topics
 - Intercommunity – Work closely with their primary care clinic on site. Clients were falling off after initial class, so now agency provides follow-up classes and resources to keep clients engaged

- b. Examples of topics:
- CHR – Fitness day. Also use telethon-style health promotion to call a bulk of clients and provide information on a specific topic
 - Rushford – Recently has a therapy dog visit the agency. Also has a walking club to encourage clients to stay active
 - Bridges – Dieticians help clients develop health meals. Cooking classes offered by community-support nutritionist that brings their own supplies to assist clients. Peer led self-esteem groups very well received.
 - CMHA – Healthy eating classes with parents and kids. Providing health promotion in clients' home and finding clients more willing to open up and share with case managers in that setting than expected. Instructors able to see exactly what foods are being purchased. Looking at healthy foods in various cultures since current education tends to focus on American foods.
- c. Topics that have had an unexpected high number of attendees:
- Sex education for YAS clients
 - First-aid training (non-certificate program)
 - Oral Health
 - Self-esteem
- d. Other ideas related to health promotion
- Bridges – Providing play dough, pipe cleaners, and other sensory objects for clients who need that type of stimulation during workshops. Encourage clients to stand or walk around if needed.
 - CHR – If a client passes away before they are able to meet a health promotion goal, agency works to meet that goal by providing the service or class to all BHH clients
 - Smoking cessation-if agencies choose to bill for it, staff need to be Bachelor's level; no license is required. CMHA choosing to have case managers provide as a BHH service instead of billing Medicaid directly through their clinic.

3. **Discussions and Updates**

- a. Data Quality Efforts
- Scrub report – very important for providers to fix issues presented in the Beacon Scrub Report. If anyone has questions about an anomaly in the report, they can contact the ASO at 1-844-551-2736 or email Amy (amiller@abhct.com) or Denise (drobot@abhct.com) directly.
 - Missing Data Report-providers should also be working on errors related to the DMHAS missing data report.
 - Report Cards-feedback on weekly report card can be sent to Jessica.
- b. Health Assessment Updates
- PNP's update – Attendees were given a snapshot of a report that shows how many clients, who were enrolled from October 2015 through January 2016, did or did not receive a health assessment
 1. Every enrollee should have at least 1 health assessment/year
 2. Information does not have to be collected by the provider to be used in the health assessment

- c. Practice Guidelines –Two new practice guidelines were given to providers, email to go out next week:
 - Referrals for ICM and Waiver Clients
 - Clients Being Served by Two Health Homes

- d. Audits
 - Beacon will begin calling agencies to schedule audits. During the call, providers will receive verbal instructions of the audit process and be told about any criteria for picking charts.
 - Two staff members from Beacon, and either Jessica, Amy, or Denise will attend the Audit
 - It will take all day (9:00am-3:00pm) to complete the audit. During that time, ASO will talk to BHH team, and any clients who are available, about top successes within the BHH program
 - Some concerns that language on tool is very clinical and some agencies have a large number of NAE clients who are not involved in a clinical program.

- e. Eligibility Lists – Rosters will be available within next few weeks

- f. PNP Field Trip
 - Tuesday, October 11 is the last day to express interest in attending the field trip CHR is hosting. A follow-up will be sent to PNPs on Wed, Oct 12th. CHR will reach out to Directors to develop an agenda after the date and time are confirmed. If anyone has any questions, they should contact Denise at droberts@abhct.com

4. Upcoming Meetings

- a. Next IS Meeting – October 21, 2016 at RVS @ CVH-Portland View Room
 - Guest: Karen Haberlin on DMHAS Consumer Satisfaction Survey
- b. November 4th Implementation Session – NEW LOCATION – Beers Hall at CVH
 - Cocilovo Room, the Mt View Room and SWS Conference Room
 - Meet and Greet with DMHAS Waiver staff by region