



BRONX PARTNERS FOR HEALTHY COMMUNITIES






SBH Update

DSRIP Project Approval and Oversight Panel Meeting

January 21, 2016

BPHC Profile

Bronx Partners for Healthy Communities PPS	
	<p>SBH Health System (lead)</p> <ul style="list-style-type: none"> • 150 years of serving the Bronx • Over 70% Medicaid patients
	<p>Member organizations</p> <p>225 organizations, 1200 sites ~35,000 employees</p> <ul style="list-style-type: none"> ▪ Hospitals ▪ FQHCs ▪ D&TCs ▪ Health Homes ▪ Home Care ▪ Behavioral Health ▪ TCs ▪ IPAs ▪ CBOs ▪ Hospices
	<p>Patient Population</p> <ul style="list-style-type: none"> • 357,424 attributed patients



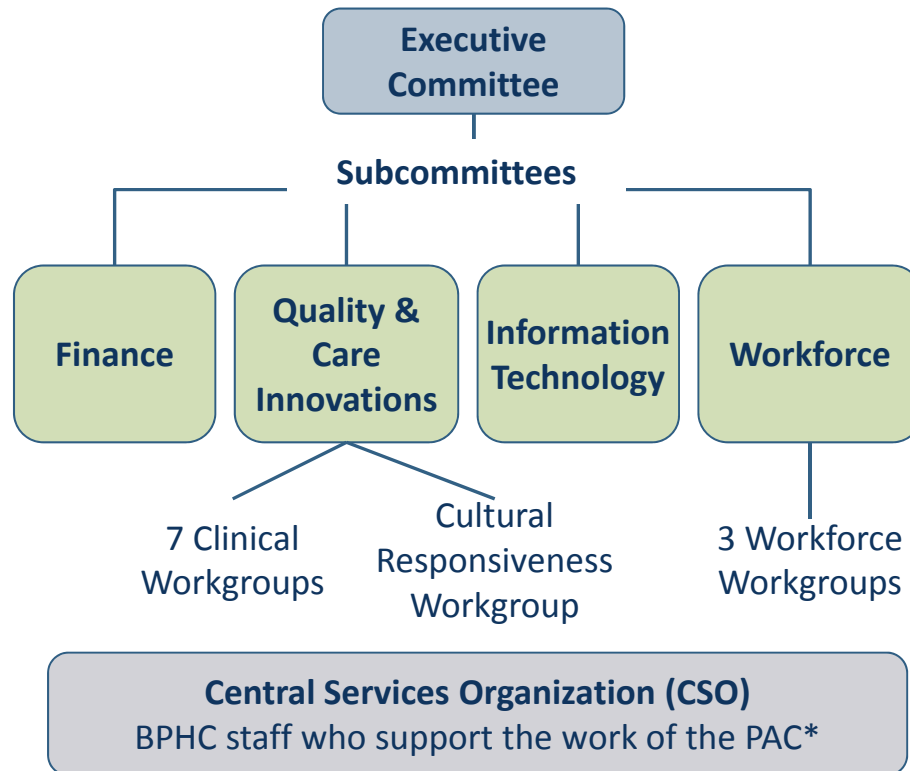
The Bronx is ready for DSRIP:

- Least healthy county in NYS*
- Poorest urban county in the US
- Less than 70% of adults have attained a high school diploma or equivalent
- More than half of residents speak a language other than English at home

* Based on the Robert Wood Johnson Foundation's annual County Health Rankings and Roadmaps

Governance

BPHC Governance Structure and Guiding Principles



* PAC is made up of the Executive Committee and Subcommittees

Reflect the diversity of BPHC's members

- 75 committee and subcommittee seats
- 69 workgroup seats

Include non-clinical stakeholders

- Executive Committee includes: CBO (**BronxWorks**), MCO (**HealthFirst**), workforce (**1199**), and the **Bronx RHIO**
- CBOs have seats on all committees, subcommittees and workgroups

Promote transparency and collaboration

- Frequent and targeted communications
- All-PPS Meeting (2x/year)
- Project Advisory Committee *(4x/year)

Funds Flow Strategy

Wave 1: Investing in PPS Expertise

August 2015

- Identify best practices for care delivery
- Contract with select expert organizations for implementation support

CBOs &
Non-Clinical Orgs

Wave 2: Implementing Foundational Requirements

October 2015

- Fund organization-based project managers
- Fund PCMH coaching services
- Workforce recruitment and training

All provider types

Wave 3: PCMH and Project Support

February 2016

Funding for:

- Team-based care
- Care Coordination and transitions
- Connectivity
- Analytics

All provider types

Wave 4: CBO Support

April 2016

CBO project funding, prioritizing:

- Capacity building
- Connectivity
- Innovative approaches to DSRIP goals

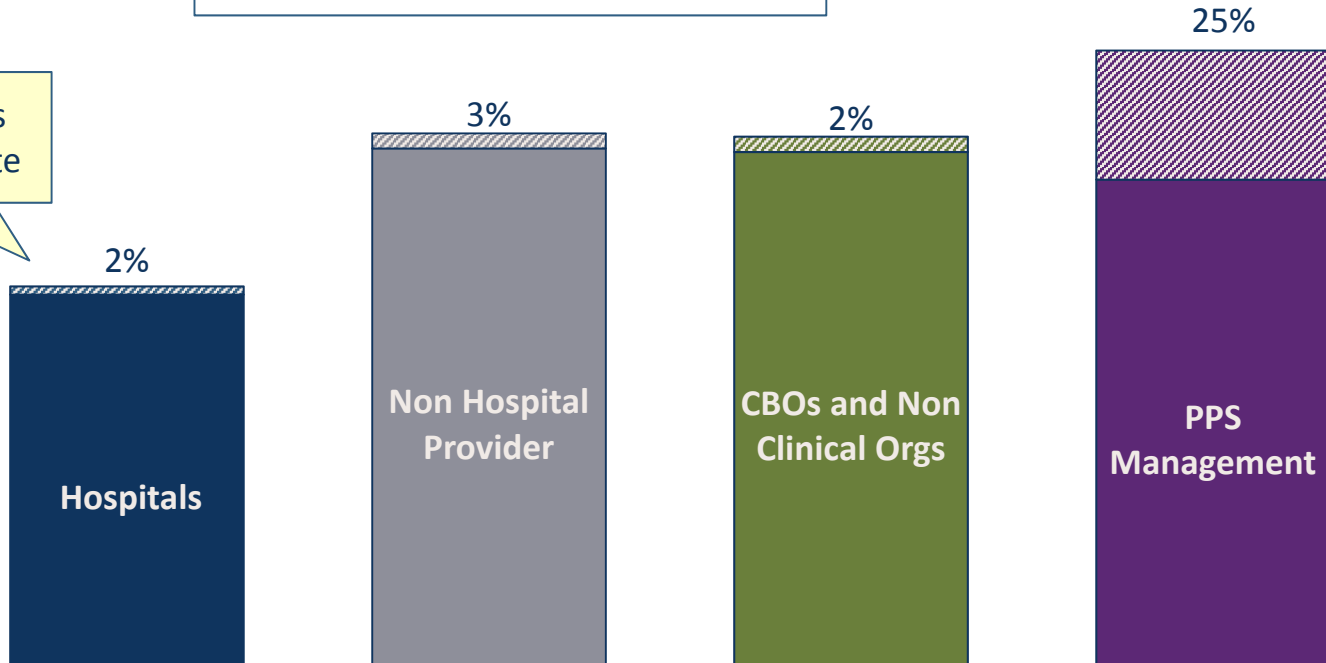
CBOs &
Non-Clinical Orgs

*Funds distribution contingent on availability of funds.

BPHC Planned Allocation through DY2

Total Allocation: \$60,532,033
Distribution to date: 8%

Shading indicates distribution to date



Allocation	\$11,403,136	\$15,640,948	\$15,551,112	\$17,936,837
% of total	19%	26%	26%	30%

Primary Care: PCMH 2014 Level 3 Support

Challenges

- Primary care practices must achieve PCMH 2014 Level 3 by March 2018
- 952 BPHC PCPs, 150+ locations
- Varied practice settings
- Different levels of preparation and experience

Best Practices

CSO funding for PCMH coaches

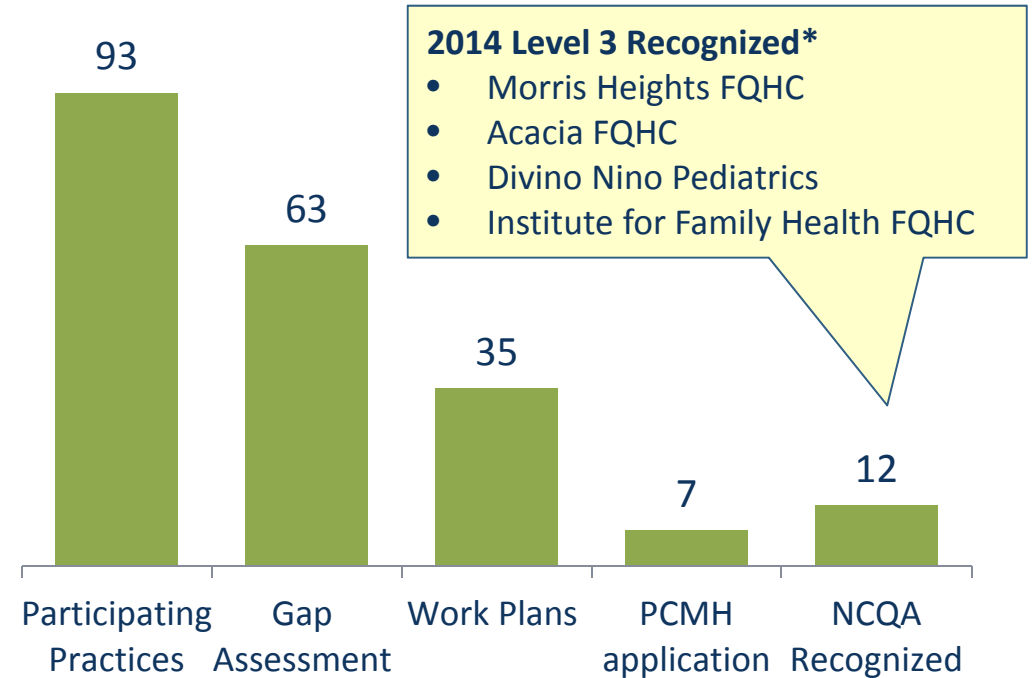
- CSO recruited consultants
- Organizations selected their coaches based on fit with coaches' focus area

Create a Community of Practice

- Coaches meet regularly to exchange learnings

Establishes one standard of care across the PPS and the skills to succeed in the DSRIP Program

PCMH Milestones Achieved



* Data current as of 1/14/2016

CBO contracts



3.d.ii Asthma Home-Based Services

- Provide home visits and coordinate Integrated Pest Management (IPM), with **DOHMH Healthy Homes Program**
- Train community health workers



3.a.i. PC/BH Integration

- Provide Implementation support for co-location of Primary Care and Mental Health Integration and IMPACT
- Develop curriculum and provide training



4.a.iii: Strengthen Mental Health and Substance Abuse Infrastructure

- Strengthen BH infrastructure in schools
- Increase referrals to school and community resources



3.c.i. Diabetes Management

- Coordinate **Diabetes Self-Management and Lower Extremity Amputation Prevention (LEAP)** program
- Training for peer health educators

Behavioral Health Integration

3.a.i Primary Care/Behavioral Health Integration

Organization*	Models	Sites
Acacia Network	1, 2, 3	20
Bronx United IPA	3	20
IFH	1, 3	5
Montefiore	1,2,3	22
Morris Heights	1,3	5
SBH Health System	1,2,3	5
Union Community Health	3	3

Supported by **Institute for Family Health**

- Model 1 = Co-location of BH in PC
- Model 2 = Co-location of PC in BH
- Model 3 = IMPACT

*Discussions ongoing, numbers subject to change

Community Based Support for Behavioral Health Care Transitions

- CBOs join our ED Care Triage and Care Transitions Workgroup to help establish smooth transitions to community and home:
 - RAIN
 - RMHA Respite Center
 - Centerlight
 - BronxWorks
 - VNS Mobile Crisis services
 - Kings Harbor
- **Critical Time Interventions** for homeless/homeless-at-risk patients after psychiatric discharge
 - Intensive 6 to 9 month evidence-based model

CBO/Community Engagement

BPHC is leveraging CBO expertise and using engagement to drive effective integration.

CBOs own the Community Engagement Strategy

- 40+ CBOs participated to develop the *Community Engagement Plan*, LegalHealth (NYLAG) as chair
 - 3 workgroups established: Communication Strategies, Outreach and Engagement, and Interconnectivity. Their work prioritizes:
 - Identification of CBO training needs
 - Strategies for interconnectivity including referral management
 - Ongoing assessment of community and CBO client needs (surveys, focus groups)
 - Ongoing networking and communications

CBOs developed the *Cultural Competency and Health Literacy Plan*, in collaboration with QCIS

- Best practices to identify, engage and link hard-to-reach populations to appropriate services
 - Priority populations include:
 - Low and non-utilizers
 - LGBTQ
 - Homeless
 - Recently decarcerated
 - SMI

Collaboration

Cross-PPS Collaboration

Monthly meeting of 4 Bronx PPSs

- Joint public communications
- Unified strategy for QE Engagement
 - Communications and Operations
 - Training

PPS Workforce consortium

- Discussion of workforce goals (9 PPSs)
- Data collection collaboration (4 PPSs)
- Jointly developed RFP, vetted and selected consulting support for workforce surveys

CVD Learning Collaborative

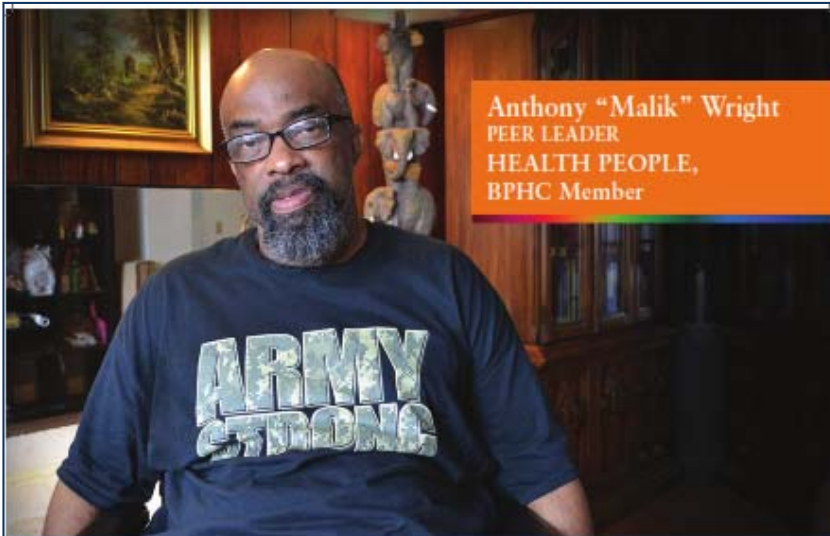
- Monthly call about 3.b.i (7 PPSs)

County/LGU Collaboration

- **DOHMH** - subject matter expertise on both Domain 4 Projects
- **CUNY (Hostos)**– developing a “refresher” curriculum for current Medical Assistants to achieve NHA certification as a Clinical Medical Assistant
- **Center for Workforce Studies**– support administration of workforce surveys and workforce strategy for future state

Hospital Community Benefit Plans

- Working with SBH Health System staff to align clinical priorities and efforts



Anthony "Malik" Wright
PEER LEADER
HEALTH PEOPLE,
BPHC Member

“There are people out here just like me and they don’t know what to do. If I can reach one of them then it’s worth it.”

BPHC – Getting Peer Education Right



Nina Pejoves
STAFF ATTORNEY
LEGALHEALTH, NYLAG,
BPHC Member

“It helps to learn how social issues affect a patient’s health, and to know that there is a legal professional who will step up.”

BPHC – Getting Health Justice Right



Ursula Soler
PATIENT NAVIGATOR
UNION COMMUNITY
HEALTH CENTER,
BPHC Member



“For patients, it’s about having someone they can identify with - a familiar face - and knowing my door is always open.”

BPHC – Getting Care Coordination Right

Teresa Pica
SOCIAL WORKER
SBH HEALTH SYSTEM,
BPHC Lead Applicant



“Our patients have been able to stop going to the ED and now come to the clinic on a regular basis, because they have a relationship with their doctor.”

BPHC – Getting Patient-Centered Medicaid Hours Right



Fatima Kourouma
COMMUNITY HEALTH WORKER
a.i.r. BRONX,
BPHC Member

“You have to be able to put yourself in somebody’s shoes to understand where they’re coming from. From there you can help them.”

BPHC – Getting Cultural Competency Right



Veronica Alberto
FRONT DESK COORDINATOR
DIVINO NIÑO PEDIATRICS,
BPHC Member

“My team makes sure the patient gets the care they need, that they know what is going on with their health, and that they leave happy and come back.”

BPHC – Getting Team-Based Care Right