? Who - What - When - Where - Why

What is the objective of the HRSA RHND Grant?

- **Goal:** Patients understand where and how to access mental & behavioral health care and wait times are reduced. The strength of the network is increased.
- **How:** Two pilots at Ely-Bloomenson Community Hospital and other sites: an ED telepsychiatry program to offer patient visits, medication consultations, and support hospital physicians in patient care. The second pilot is a therapy service that sets patients up with a mental health practitioner via a telehealth platform powered by Adaptive Telehealth. Patients can receive a diagnosis and short or long term therapy. Short term therapy can be used to bridge the gap until a local therapist becomes available. In addition to the pilots, community education, media campaigns, care team education, and innovative technology will be utilized to improve patient care navigation.

Why is Wilderness Health involved?

- Wilderness Health identified a need for regional resources to communicate and work together to streamline patients' continuity of behavioral healthcare. There is also a need to bring in additional supportive resources to care teams and the community.

Who is involved?

- Wilderness Health, network members, community organizations, regional educational systems, community members, and private practice mental health providers are involved.

Where is this taking place?

- Northeastern Minnesota and Northwestern Wisconsin.

When will this happen?

- July 2023 – June 2027. This FAQ covers goals and activities completed from June 2023 through July 2024 and looks ahead into future program years.

Key Goals & Objectives

- Leverage technology to increase treatment pathways and decrease length of time for care referrals
- Reduce the number of patients who no-show or don't complete the intake process for referred services
- Add capacity with integrated mental health resources within primary care (either in-person or via telehealth), including through consultation and educational opportunities with the care navigation team
- Continue annual survey of our members to assess gaps in mental health resources and educational needs
- Continue working with members to increase consistent screening processes for depression and anxiety
- Improve patient health literacy
- Provide training to network members and community on change management and care coordination
- Increase the percentage of patients closing the referral loop for social determinants of health needs
- Continue development work with other community-based organizations and referral providers to inform local community needs, reduce duplication of efforts, and partner with them to coordinate efforts
- Provide outreach on mental health stigma and how to access care in the community
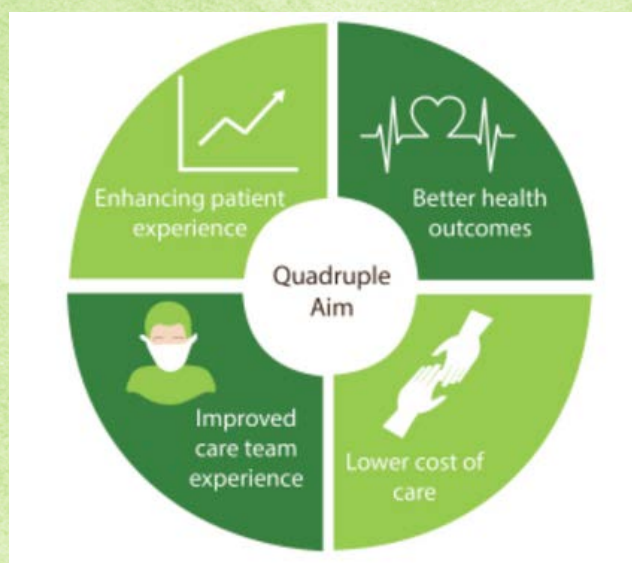
Key Partners

- **Adaptive Telehealth and Digital Health Innovation:** Software developer for ED telepsychiatry and ambulatory referral pilot programs
- **Kim Dauner, Ph.D.:** Consultant for program evaluation and data gathering
- **Krista Harju MSW, LICSW, M.Ed.:** Consultant for behavioral health care coordination best practices, supported care coordination newsletter and all work with care coordination teams
- **Northspan Group, Inc.:** Consultant and contracted support for community listening sessions
- **Reframe Ideas, Nelle Rhicard:** Contracted for community listening session graphic recordings
- **Rural Wisconsin Health Cooperative:** Contractor for change management education
- **YourPath:** Partner in SUD media campaign, offering the advertisement of their services alongside WH messaging
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RWHC Instructors, Corrie Searles and Cella Hartline, with Wilderness member care coordinators at the Care Coordination Change Management Training, 2024.

Community Collaborators: Discovery and Program Development

- Anna Solem, Director of Case Management, Aspirus St. Luke's Hospital
- Avera IHP
- College of St. Scholastica Associate Professor and Director of Social Work Undergraduate, Krista Harju MSW, LICSW, M.Ed.
- College of St. Scholastica Social Work Program
- Face2Face
- Fairview Range Behavioral Health Home
- Fairview Range Inpatient Mental Health Unit
- Fairview Range Outpatient Care Coordination
- Grand Itasca Community Hospital
- Health E Med
- Janelle Hale, Director of Home Care Hospice, Aspirus St. Luke's Hospital
- Julianne Davis, PsyD, LP, Essentia Health
- Juniper
- Lake Superior Community Health Center
- Lifehouse
- Mankato Clinic IHP
- Mesabi Behavioral Health
- MNCARES Study
- National Alliance on Mental Illness – Wisconsin
- National Rural Health Resource Center
- Rural Wisconsin Health Cooperative
- Sanford Community Health Workers program
- St. Louis County Public Health
- Thrive Family Recovery Resources
- University of Minnesota Associate Professor of Health Care Management and Director of Health Care Management, Kim Dauner Ph.D.
- University of Minnesota Writing Studies BA Program Coordinator and Professor of Rhetoric, David Beard Ph.D.
- YourPath

Data & Survey Results

Results of care coordination survey

A survey using a 5-point Likert scale was deployed across the Wilderness Health network which asked questions about how care coordination is financed, resourced, and deployed. Survey results were analyzed to identify areas of improvement and design solutions to strengthen care coordination services across the network.

Audiences that were surveyed included:
- Board of Directors
- Care Coordinators
- Human Resources
- Utilization Management
- Quality
- Child and Teen Checkup

Initial survey review shows that the highest scoring areas were in:
- "Organization's EHR can run population registries."
- "Organization has briefed staff on project clinical outcome measures and reviews data regularly."

The lowest scoring areas were in:
- "Organization regularly assesses access to care during non-typical clinical hours to identify gaps and opportunities (e.g., emergency department use for non-emergent conditions)"
- "Organization engages a non-traditional health care workforce (e.g., community health workers, health coaches) in care management."

This information will be communicated across Wilderness Health's members to increase transparency and enhance overall understanding. Additionally, this informs the strategic development of initiatives to enhance patient experience and quality outcomes, reduce cost, and improve the care team experience. A future survey will be deployed to reassess.

Results of community listening sessions

Hot topics we heard about from community members:

- Transportation barriers
- Health literacy needs
- Inadequate access to services
- Complicated care pathways
- Lack of supports for complex patients

Key aspects of the data dashboard

The Wilderness Health data dashboard measured three focus topics: Continued development of value-based care services; Development of a talent pool for current and future workforce needs; and enhance the use of innovative practices. The dashboard was developed to track these grant aspects with both quantitative and qualitative metrics gathered from patient health data, surveys, and participation numbers.

Preliminary data shows room for improvement across all metrics. Wilderness expects grant work to maintain or improve metrics depending on the measure. For instance we expect that we will reach similar or increased amounts of community members through outreach each year. We expect wait times, follow-up with patients, capacity for utilization management, and self reports of integrated behavioral health integration to improve throughout the course of the grant.

Key evaluation elements

Multiple evaluation elements are included to provide a comprehensive picture. For example, education is evaluated based on number of participants and participant satisfaction. The Adaptive Telehealth pilot program is evaluated based on wait time from referral to appointment. The results of the activities and outcome data is shared with network stakeholders such as the Board of Directors, the Care Coordination Roundtable, pilot site workgroups, and our committees. With stakeholder input, Wilderness Health reviews data and determines program changes based on expected vs actual outcomes.

Ely-Bloomenson Community Hospital Pilots
- Launched March 2024
- Goal: Utilize telehealth to schedule hospital patients experiencing mental or behavioral health needs with a therapist who can provide care short- or long-term as needed -- or until a local therapy option becomes available.
- Expected Outcomes
  - Shorter wait times for therapy
  - Reduce readmissions for mental or behavioral health concerns
  - Increase patient access to care

 *Expected launch December 2024: ED telepsychiatry expanded from North Shore Health to Ely-Bloomenson Community Hospital

Community Pilot
- Wilderness Health has been working with Lake County's North Shore Mental Health Group (NSMHG) to explore ways to support folks with a community-based approach. Wilderness and NSMHG have worked to bring the community together for discussions on what is needed. Wilderness plans to circle back to identify a pilot project after the community listening session results are reviewed.

Care coordination support
- Newsletter
- Mental/behavioral health provider resource list
- Community Health Worker (CHW) research

Have more questions?

We'd love to hear from you!

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🌐 https://wildernesshealthmn.org/telemental-health/