I am continually impressed by the creativity of our partners and staff as they use DSRIP investments to develop and implement sustainable initiatives that will benefit our region for many years to come. In this issue you will read about work resulting from collaborations with community-based organizations (CBOs); from our Innovation Fund grant to Arms Acres; and from a highly-competitive grant from the Centers for Disease and Prevention and Control to the Hudson Community Health Alliance. We are also highlighting an initiative on mental health awareness to show what one very committed and inspired person can do in an organization -- fulfilling the “be a change agent” message from Dr. Helen Bevan and the MHVC Workforce Development team.

We are also sharing a summary of the results of our Cultural Competency and Health Literacy survey. Although we learned a lot from the survey, we learn even more from our partners and CBOs -- so let us know about the great ways you are changing health care in your areas. It can be as simple as one corner store at a time, or one employee who has a mission.
to YOU
NYC RING convocation follows this partners-only workshop

MHVC has prioritized and driven change management education for its partners, and now we are excited to offer an exclusive workshop with acclaimed Change Management expert Dr. Helen Bevan on Thursday, December 6th, at the Doubletree by Hilton Hotel, Tarrytown. The MHVC Workshop will be 12:30-4:30 PM, followed by the NYC RING convocation, 5:00-8:00 PM.

At this instructor-led workshop, “Leading Change,” Dr. Bevan, Chief Transformation Officer of the English National Health Service Horizons, will help us explore some of the latest ideas, tools and approaches from leading practitioners of large scale health care change around the globe. Participants will reflect on the practical implications and opportunities for their work in a world where the balance between “old power” (positional power and authority) and “new power” (networks and social movements) is shifting. They will also consider how to build our individual and collective capability for leading change and delivering results in this new world.

This will be a lively and interactive workshop, and an incredible opportunity to interact one-on-one with Dr. Bevan, one of the most recognized figures worldwide in health care change management. Click here to register or contact Montefiorehvc@montefiore.org for more information.

Dr. Bevan will deliver the keynote speech, “Leading Change in a Changing World,” at the 15th Annual New York City Research Improvement Networking Group (NYC RING) Convocation of Practices and Poster Session that immediately follows the workshop, from 5-8 PM. (Register here.)

New this year is a poster session featuring work on MHVC’s Innovation Fund projects, quality and improvement work, WMTY implementation, and original research. This is an exciting partnership between MHVC, Montefiore Health System, and the Albert Einstein College of Medicine that highlights the potential for future collaboration around research related to innovative care models and quality improvement paving the way towards value-based payments (VBP).

MHVC Out Front | Leading initiatives and collaborations in the region

MHS a Finalist at SDH Innovation Summit
State DOH sponsored SDH “Call for Innovations” Initiative

MHVC Medical Director, Damara Gutnick, MD, and Amanda Parsons, MD, MBA (Montefiore Health System), presented, “Addressing Social Determinants of Health: A Three Pronged Approach,” as one of nine finalists at the Social Determinants of Health (SDH) Innovation Summit on September 26, 2018, at the New York Academy of Medicine. The Summit was sponsored by the New York State Department of Health.

The solicitation for innovations, a first of its kind in New York State, attracted over 200 applicants from across the country, all of whom came up with creative
and effective ways to address SDHs for Medicaid members. The nine finalists, including Montefiore, represented community-based organizations, healthcare providers, and technology companies. It was an opportunity for organizations to share best practices in the field. Audience members watched the top finalists present their innovations, and heard a lively discussion between distinguished panelists and the finalists on how we can improve population health by addressing SDH.

The final proposal highlighted MHVC’s Innovation Fund work, WMTY implementation, VBP training, the ROI calculator, and standardized SDH screening implemented by MHS. (View the MHS PowerPoint presentation here.)

MHVC Champions Mental Health Awareness

Initiative elevates “Break the Stigma” to be a year-round effort

When Jasmine Cruz, MHVC Senior Human Resource Specialist, introduced a “Mental Health Moment” during weekly team meetings, she was hoping to start a conversation. It was so well received that it is now a regular part of the meetings and, more importantly, part of the vocabulary at MHVC. “Starting the conversation was the goal,” Cruz said, “and now the number of us having that conversation has grown exponentially.”

May is Mental Health Awareness Month, but this year MHVC put the spotlight on the first week of October, which was Mental Health Awareness Week, and October 10th, 2018, which was World Mental Health Day.

“Having the conversation is very healthy, but organizations need to provide a safe environment and make the time to talk. We also need to change the language we use around the issue so it is more positive,” said Cruz. “There are a lot of hashtags -- including #timetotalk -- that give ideas on how to get started.” Another theme is, “it’s okay not to be okay” -- especially in the workplace. Cruz continued, “Everyone thinks they always have to be happy, but they don’t. We need to show them how to navigate that and to be mindful.”

At MHVC, Cruz provides exercises for what staff can do -- there is something different every week. “For example, we dedicate 10 minutes in our weekly team meetings to talk about stigma, workplace wellness and ways to continue the conversation.” More than conversation and resources, MHVC is training partners on how to identify, understand, and respond to signs of mental illnesses and substance use disorders in their communities. In collaboration with the National Council for Behavioral Health, MHVC hosted an instructor training on Adult Mental Health First Aid, October 17-19, 2018. All 12 participants in the training are now certified to teach the eight-hour curriculum.

“We want to keep the conversation and ideas fresh, so that May 2019, Mental Health Awareness Month, becomes a real PPS-wide effort, building on all of this work,” concluded Cruz. You can share your initiatives on mental health awareness with Cruz, jascruz@montefiore.org, and she will post them on the website to inspire others.
MHVC Wears Purple
Safe Homes inspires support for survivors and victims of domestic violence

MHVC staff on October 16, "Wear Purple Day," during which they shared facts on domestic violence to bring awareness to the team. Learn more through MHVC partner Safe Homes of Orange County.

Innovation Driving Change | Best practices from the nation to you

Delivering Value: Arms Acres "Recovery Coaches"
MHVC innovation investment achieves impressive after-care connections and return-on-investment

Arms Acres, like many providers of inpatient and outpatient substance use (SU) treatment services, had a problem getting patients to attend their first follow-up visit after inpatient treatment. Data demonstrated that only 47% of discharged patients made that visit, and mostly due to staff bringing patients to their first visit.

Then Eric D'Entrone, M. Ed., CRC, Associate Director of Regional Services for Arms Acres and Conifer Park, heard about MHVC's Innovation Fund. "The integration of Recovery Coaches into care teams is a proven way to facilitate more effective transitions between inpatient and outpatient care, but it was new to our region. We created a pilot project that integrated Recovery Coaches into the care team at Arms Acres, and fortunately we were successful in being selected for funding."

The project uses rapid-cycle improvement methodology to demonstrate the value of adding a Recovery Coach to the multidisciplinary team in order to improve 7- and 30-day follow up HEDIS metrics (transitions of care between inpatient and outpatient substance use treatment). The results show increased
adherence among clients with Recovery Coaches (85.1% compared to 54% without Recovery Coaches). There was high visit-adherence throughout the first seven months of project implementation, and Recovery Coach intervention improved transition to outpatient care by 31.1%, increased routine discharge by 13.6%, and reduced readmission by 12.6%.

**RECOVERY COACHES: Results**

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<th>Adherence with Recovery Coaches</th>
<th>85.1% adherence</th>
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<tr>
<td>Adherence without Recovery Coaches</td>
<td>54% adherence</td>
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<tr>
<td>Improvement in transitions to outpatient care</td>
<td>31.1% improvement</td>
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<tr>
<td>Increase in routine discharge</td>
<td>12.6% increase</td>
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<tr>
<td>Reduction in readmission</td>
<td>12.6% reduction</td>
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Utilization of Recovery Coaches to support transitions of care for patients with addiction demonstrated a decrease in readmissions, improved transitions to outpatient care, and led to higher routine discharge rates. Next steps include continuing to collect and analyze data with a goal of demonstrating a return on investment of the Recovery Coach intervention, and considering the various settings in which the use of peers could be spread.

D'Entrone and his staff are pleased with the results. “Overall, the Recovery Coach intervention improved patient engagement in care leading to positive outcomes for the patients themselves. It also has the potential to reduce downstream healthcare costs, saving money for providers and payers.”

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**Provider Resources and Tools | New and helpful tips**

**How to Talk About Vaping? “Great American Vape-Out” Trains Physicians**

*MHVC and SAS team up with Westchester County for November 14th event*

As a response to the rising use of electronic smoking devices among kids, teens, and young adults in Westchester County, MHVC joined Student Assistance Services (SAS) and Sherlita Amler, MD, Commissioner of the Westchester Department of Health to co-sponsor a free symposium for physicians on vaping.

“The Great American Vape Out: A Symposium for Pediatricians and Family Practitioners,” was held on November 14th at SAS in Tarrytown. Dr. Richard Stumacher, a pulmonologist with Northern Westchester Hospital, was the keynote for the session, which focused on vaping prevalence, vaping devices, potential health risks, and how to discuss vaping with patients and parents.

Dr. Amler set the tone with her invitation, which made clear that vaping is a major public health issue. Physicians were also able to earn CME credits.
more information about how to address vaping in your community, contact Judith Mezey, Director of Community Based Programs for SAS, judy.mezey@sascorp.org.

Are You VBP Ready? MHVC “Build-A-Value-Proposition” Workshops Can Help
MHVC can train your team on how to develop a value proposition

What if your community-based organization received an email today from your health care provider, hospital system, or Medicaid payer asking for your value proposition for a service you provide? Do you know what a value proposition is? Do you know if you provide a service that will improve health outcomes at a cost that a payer is willing to pay?

MHVC is pleased to offer “Build-A-Value-Proposition” workshops, giving partners the opportunity to develop a value proposition to use in marketing their innovations to Medicaid Managed Care or health system payors. A value proposition is a business plan communicating how your work can deliver improved health outcomes at reduced cost to potential payors. It sounds simple, but it takes some thinking and practice to do this well.

According to Adyna Gamboa, MHVC Training Manager, “The workshop will offer a combination of training, tools, and personalized coaching for teams. To get the maximum benefit, we are encouraging partners to include a range of staff on their teams, including leadership, service delivery management, finance, quality/reporting, and IT.” Teams will gain shared understanding of value propositions and their potential VBP services, and will actually write a value proposition.

The next workshop will be held in Tarrytown on December 10, from 10:00 AM to 2:00 PM, facilitated by Kristin Woodlock, MS, NP, who is a consultant to MHVC. “Teams usually want to know how to prepare for the workshop. Any ‘raw materials’ -- such as service descriptions, performance data, qualitative impact, and costs -- will be helpful. If they are just getting started, that works too: The session will still help to develop a value proposition outline.”

Prospective participants can learn more by watching this video and by contacting Rachel Evans, MHVC Manager for Community Engagement, racevans@montefiore.org. Register for this training here.

Around MHVC | Partner activities

Local IMPACT: Addressing Health Disparities, One Corner Store and Pharmacy at a Time
HRHCare leads development of Hudson Community Health Alliance

When one thinks of the the Centers for Disease Prevention and Control (CDC), walking, neighborhood stores, community pharmacies, and flavored seltzer don’t usually come to mind. In fact, these are a few of the 15 mutually-reinforcing strategies that the Hudson Community Health Alliance (Alliance)
implemented as part of Local IMPACT -- an acronym for Local (I)nitiatives for (M)ulti-Sector (P)ublic Health (Act)ion.

The New York State Department of Health (NYSDOH) is the lead for the **The New York State Local IMPACT**, a CDC grant program to help prevent and control obesity, diabetes, heart disease and stroke, and to reduce health disparities among adults. "The CDC vision was to evaluate specific strategies: healthy corner stores, how to scale and sustain their diabetes prevention program, and the engagement of community health workers evaluating diabetes and hypertension," said Elizabeth L. Phillips, MPH, MCHES®, Director of Health Education Services/ Local IMPACT Project Manager, HRHCare. "We recognized that these initiatives could make measurable differences in our region."

HRHCare is the lead entity for the Alliance, which was awarded one of the four upstate grants, totaling $7 million, by the NYSDOH in 2015. The Alliance was awarded $1.4 million for its work, which began in 2016 and was completed in September 2018. "Even though the grant has ended, we are excited to move forward and build upon the areas with the most potential for sustained engagement," said Phillips.

"This was a regional grant," she continued, "so we took a close look at the relationship between Westchester and Rockland counties, and made strategic decisions when we were seeking stakeholders." Grant subcontractors were awarded funds with MOUs (Memorandum of Understanding) that facilitated long-term relationships. "We also recruited and engaged partners while we were launching and delivering programs," Phillips said. Quarterly stakeholder meetings had representatives from 20-25 entities. "We achieved great success as a collaborative program, bringing together a number of different partners and laying the groundwork for the future for individual projects with partners and teams of partners."

The HRHCare leadership team will be evaluating what aspects of the work can be replicated. Phillips shared success stories in the four component areas: CHWs, Food Walks, diabetes prevention programs, and walking paths.

*(Left) International Farms, Port Chester, recognized as a Healthy Corner Store. (Right) "Mission Impossible: Know Your Numbers": Rockland County Outreach teams up with Crystal Barbershop, Sparkill, NY, to conduct BP and prediabetes screening while linking those in need with health center appointments.*
Can Addressing SDHs Predict "Joy in Work" and "Burnout"?

MHVC CCHL survey finds correlations; resources handbook to be developed

Although the topics of "Joy in Work" and "Burnout" have been common research topics for many years, a recent study conducted by MHVC and Einstein College of Medicine has found a connection between those topics and how an organization addresses social determinants of health (SDH).

"Addressing Social Determinants of Health: Predictors of Healthcare Staff Resilience and Burnout," by Kathleen McAuliff, PhD, and Bruce Rapkin, PhD, Einstein College of Medicine; and Dr. Damara Gutnick, MHVC Medical Director, confirms the connection between SDHs, Joy, Burnout, and an organization’s approach to change management. The research poster can be seen [here](#), and a summary PowerPoint presentation viewed [here](#).

The survey, guided by MHVC’s Cultural Competency and Health Literacy Workgroup, included 46 organizations, with 1930 individual respondents (ranging from 1 to 242 respondents per organization). Data were collected from February to April, 2018. The survey domains included cultural competency, SDHs, and burnout and job turnover. Research questions included:

1. Do SDHs predict burnout, or job turnover (i.e., leaving a job?)
2. If so, which SDH?
3. Do change management concepts predict burnout or job turnover? (i.e., leaving a job?)
4. If so, which concepts?

The top three SDHs that identified as the most challenging to address with patients/clients are (1) money/finances, (2) housing, and (3) physical health including activities of daily living and dependence on assistance. "Many of the
results regarding 'joy' and 'burnout' were expected, almost intuitive,” said McAuliff, “but it is crucial to have sound data and documented results in order to effect change." Comparing Joy in Work and Burnout across job roles, the study found that peers -- people with a lot of 'lived' experience -- had the highest level of Joy. Case managers and social workers had the highest rate of Burnout; senior administrators had the least.

The significant part of the study was connecting organizational readiness to address a patient's SDHs as a predictor of Joy and Burnout. McAuliff continued, "SDHs are a principal source of stressors for staff. Are organizations providing resources, linkages, information, and support? Are they prepared to screen clients and give them access to meet needs?"

MHVC will incorporate the survey results into its efforts in Cultural Competency and Health Literacy, according to Dr. Gutnick. "We are preparing reports that partners can cite, and other resources, to provide support around cultural competency and health literacy, which are critical initiatives for MHVC and DSRIIP. The most important is the readiness to address SDHs and linkage -- know who to go to, show support, and train."

Each participating site will be given a summary report with resources tailored for their results. McAuliff said the next step will be to put together a handbook of resources that will also be available on the MHVC website. For more information about the survey or results, contact Katie McAuliff at kmcauliff@montefiore.org.

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**Best Practices Forum 2.0: MHVC Second CCHL Event Held November 8**

MHVC recently held its second Cultural Competency and Health Literacy (CCHL) Best Practices Forum at the Emergency Services Center in Goshen, NY. Forum topics were focused to highlight CCHL survey domains and results. The 41 participants from 21 organizations took in new content, three breakout sessions, and four panel presentations, and shared CCHL strategies used in the Hudson Valley. The event included topics on stigma reduction, social determinants of health, implicit bias, and how to collect and use CCHL data effectively.

Participants discussed how implicit/unconscious bias and culture can impact the way we engage with each other and service recipients; the interconnectedness of cultural competence and person-centeredness; how to implement a cultural competency plan; and the social determinants that impact health.

**Attendees were able to express their high level of engagement the "What Matters to You?" photo booth. Below left, left to right: Jasmine Cruz and Daniel Fontanez (MHVC); Nadia Allen (Mental Health Association of Orange); Kathy Brieger (Hudson River Healthcare); and Nolly Climes (Rehabilitation Support Services). Below right, left to right: Nadia Allen (MHA of Orange) and Lenora Reid-Rose (Keynote Speaker CCSI).**
Is your organization or staff being honored or recognized? Let us know so we can share the news with the MHVC network.

Ahead: January is Cervical Health Awareness Month

If you have special events or activities around cervical health awareness, let us know so we can feature them in our upcoming newsletters and post them on our MHVC website. Contact us at MontefioreHVC@montefiore.org.

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