SASH / HOWARD CENTER

Mental Health Pilot

February 2020







SASH: Improving Health, Saving Money

Non-profit Area Agencies on Aging

Home Health Agencies

Medical Homes

SASH is...

- a partnership among community organizations and agencies in housing and health care
- Based in nonprofit, affordable housing
- Part of Vermont's All-Payer Model (APM)
 healthcare reform initiative
- Able to target high-cost and high-risk populations
- Focused on evidence-based wellness and prevention to serve the whole population



SASH **Funding &** Administrative Structure



Statewide Administrator



Designated Regional Housing Organizations (DRHOs) & Counties Served





Bennington









Windham

Addison, Chittenden, Franklin, Grand Isle

Addison County

Community Trust

Burlington

Housing Authority

Caledonia, Essex, Orleans

Rutland

SASH Housing Hosts (where groups ["panels"] are based, each with a FT care coordinator and PT wellness nurse), overseen by each DRHO

Brattleboro **Housing Partnership** Springfield Housing Authority

Shires Housing

Twin Pines **Housing Trust**

Valley Cares Inc.

Windham & Windsor **Housing Trust**

Housing Authority

Bennington

Cathedral Square

Champlain **Housing Trust**

Vermont State Housing Authority

Winooski Housing Authority

Rural Edge

National Church Residences

Rutland Housing Authority

Housing Trust of Rutland County

Barre Housing Authority

> Downstreet Partnership

Lamoille Housing Partnership

Montpelier Housing Authority

Randolph Area Community Development Corp.

Vermont State Housing Authority

Partner Organizations & Providers Represented on Each SASH Team





Developmental, Mental Health & Addiction Services



Area Agencies on Aging



ORLEANS Island Pond **FRANKLIN ESSEX** LAMOILLE Cathedral Morrisville • CALEDONIA Square CHITTENDEN WASHINGTON Rural Edge **ADDISON** ORANGE DOWNSTREET **RUTLAND RUTLAND** WINDSOR **Brattleboro Housing** BENNINGTON **PARTNERSHIPS** WINDHAM

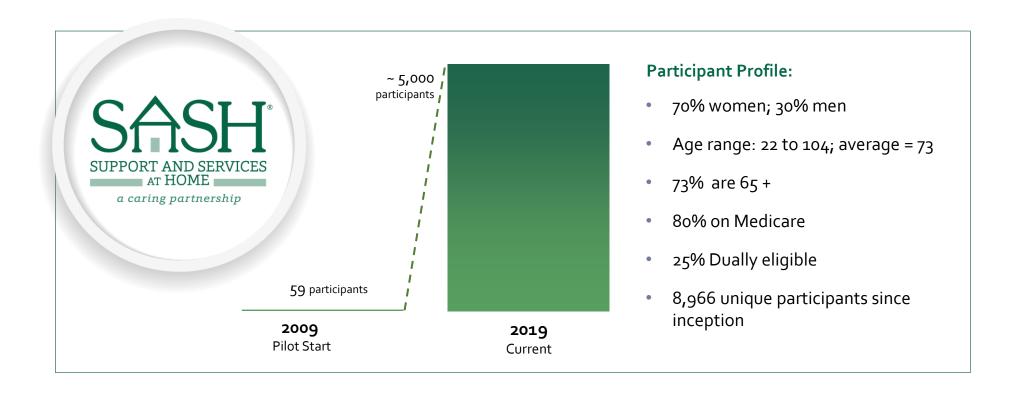
SASH: A Team Sport

SASH is embedded in affordable housing, where most participants live. By using Vermont's affordable-housing network, SASH is able to provide services in just about every corner of the state.

SASH is a partnership. It combines the strengths of 70+ partners at the local level that have been providing supports and services for years: home-health agencies, area agencies on aging, primary-care providers, community hospitals, and agencies providing developmental, mental health and addiction services.

Six designated regional housing organizations oversee the program, working with **22 housing organizations** that operate SASH at **140 affordable-housing sites** throughout Vermont.

SASH coordinators and wellness nurses coordinate services and programming. They also work with local partners at the local level, who collaborate in promoting individual and community health and well-being. It is very much a team sport!











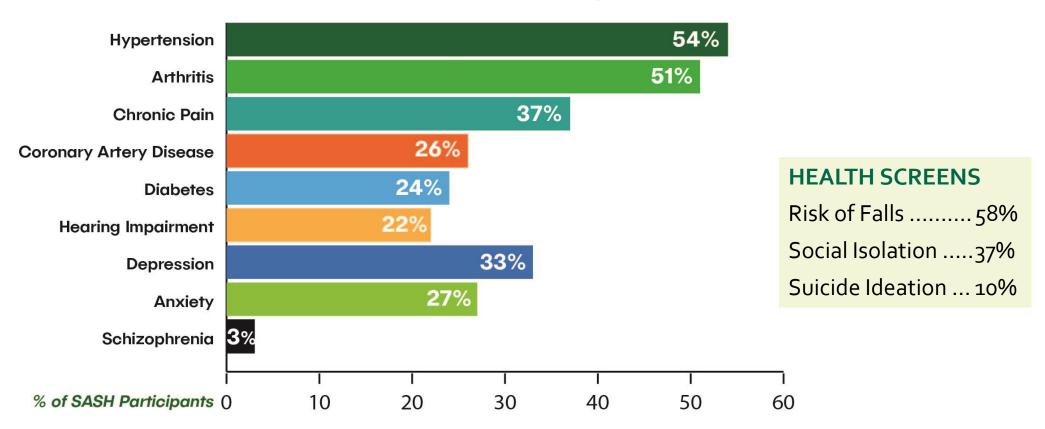




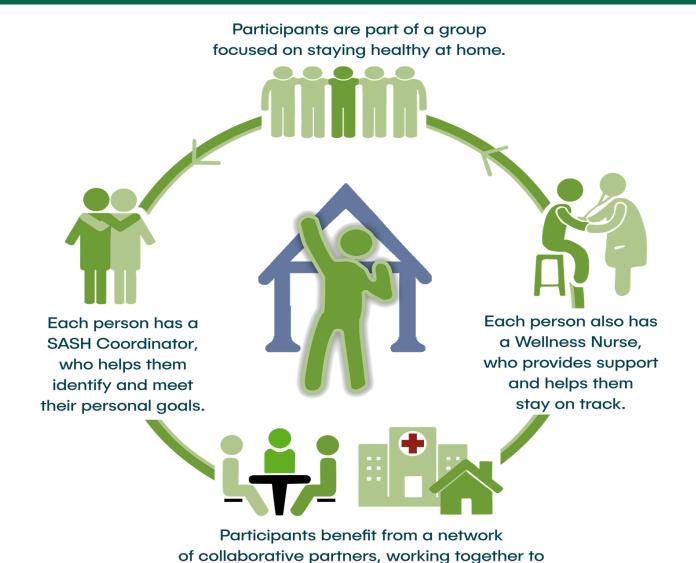
Health of SASH Participants Statewide

Median # of chronic conditions: 6

People with 3 or more diagnoses: 75%



Elements of SASH



support comprehensive community health.

Evidence-Based Prevention & Wellness Programs





70+ SASH staff throughout Vermont are trained and certified to lead these programs

- Stanford Chronic Disease Self-Management
- Falls prevention: Tai Chi for balance and arthritis
- Physical Activity: chair yoga, walking programs, strength training, "Bone Builders" and more
- Cognitive impairment and mental health interventions
- Nutrition education and programming (DASH, etc.)

Outcome: Health-Care Savings

The latest independent federal evaluation found statistically significant **Medicare savings** of \$1,100* to \$1,400** per person per year.

"SASH participants and wellness nurses were able to identify health issues early before those issues progressed to more serious incidents."

—RTI/Leading Age Four-Year SASH Evaluation (Summary)

EFFICIENCY

COST QUALITY

^{*}rural panels | **urban (Chittenden Co.) panels —RTI/Leading Age Five-Year SASH Evaluation, October 2018

Outcome: Reduced Medicaid Spending

KEY FINDING from October 2018 analysis by same third-party evaluator, published in June 2019:

SASH is helping Vermonters stay in their homes as they age and not move to long-term care settings.



- <u>SASH participants living in affordable-housing communities where</u> <u>SASH is based</u> AND <u>participants in all rural panels</u> (i.e., outside Chittenden County) showed a <u>statistically significant reduction in growth in Medicaid spending for nursing-home care</u>.
- All other panels had lower spending for long-term care as well, although the findings did not reach statistically significant levels.

Mental Health Pilot: The Basics

Howard Center clinician located at two Cathedral Square communities as part of the on-site SASH staff

- **Year 1:** Nov 2017 Dec 2018
 - funded by OneCare Vermont
- Year 2: Jan Dec 2019
 - o funded by OneCare Vermont, Cathedral Square & Howard Center
- Year 3: Now underway!
 - o funded by OneCare Vermont, Cathedral Square & Howard Center

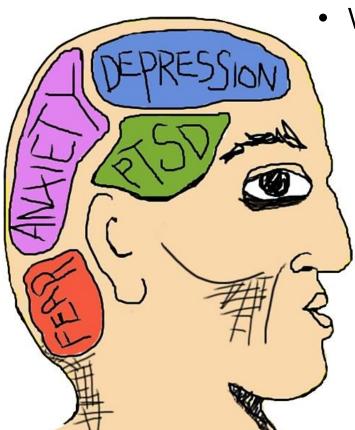






Mental Health Pilot: The Need

- Staff consistently identified mental-health challenges; data backed this up.
- SASH participants have higher rates of depression.*



 Wide range of mental-health conditions identified: generalized anxiety disorder, depression, schizophrenia/bipolar

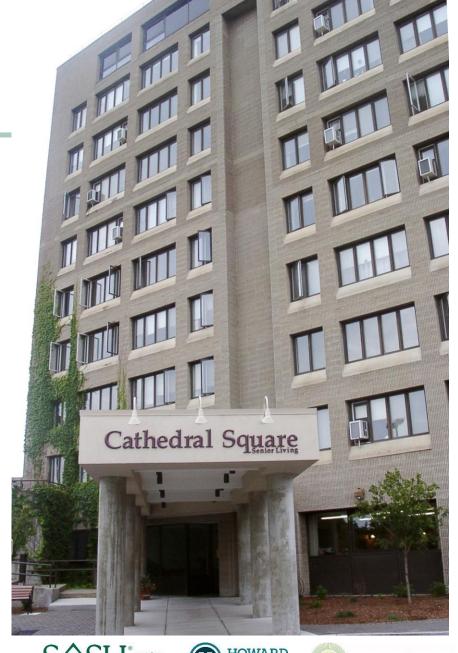
- Concerning suicide risk among SASH participants and older adults in general
- Older adults have high rates of chronic drinking and low rates of help-seeking
- Research shows high percentage of people with mental-health challenges do not seek treatment





Two Pilot Communities: TH & CSSL











Pilot Goals



Prompt Access to Services



Coordinated services by team members



Decline in ER Visits





Mental Health Stability



Primary Care Connections



Better Knowledge & Reduced Stigma of Mental Health Interventions









Pilot Interventions

"The right dose at the right time"
— and at the right place.

Individual & Couples Therapy

Crisis Response

Psychosocial Support

Psychoeducational & Process Groups

Weekly Team Meetings

Collaborate with Providers

Brief consultations / "mental health tune ups"

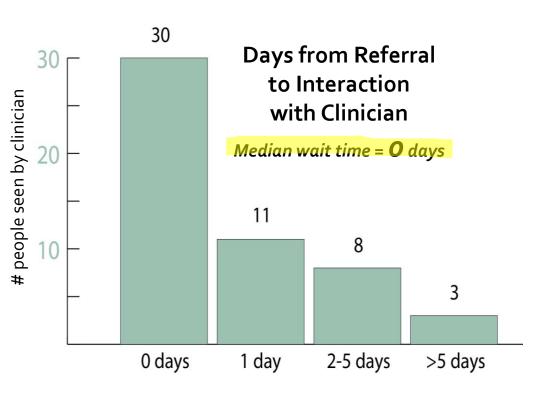






Goal: Prompt Access to Services

November 1, 2017 – December 31, 2018



- 80% of those referred were seen either the same day or the next day.
- Clinician had 2,059 unique encounters with participants at both sites.

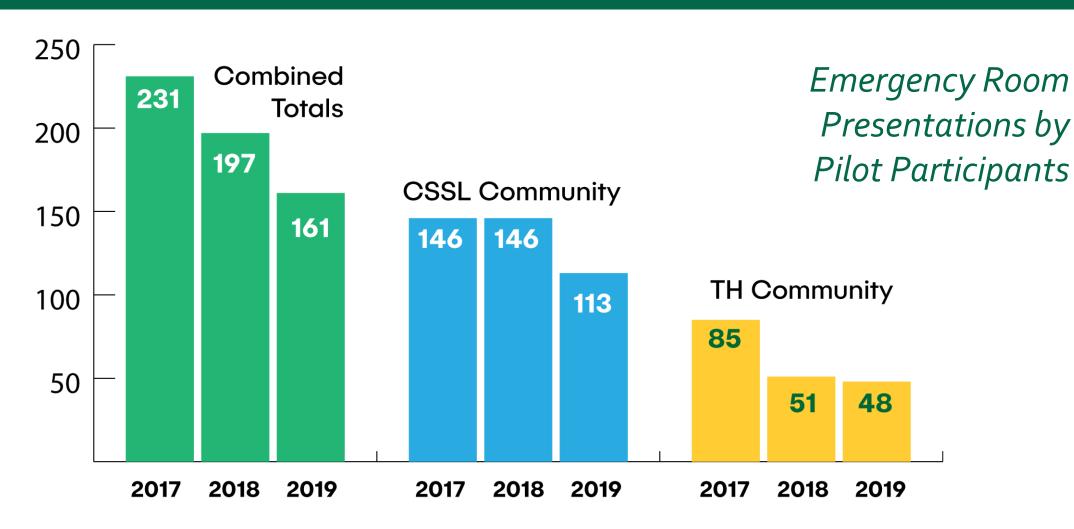
(includes individual visits, consults with staff, group programs, educational activities, social-wellness visits)







Goal: Decline in ER Visits





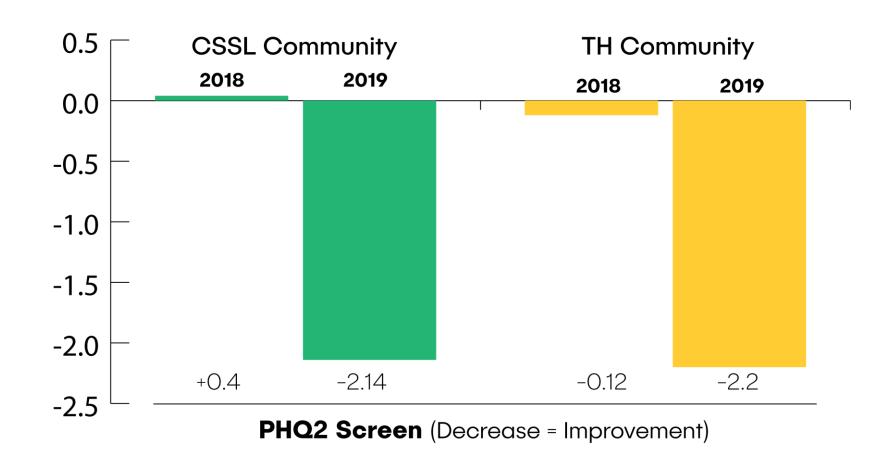




Goαl: Mental Health Stability

Reduced Risk for Depression

For those receiving group or 1:1 support





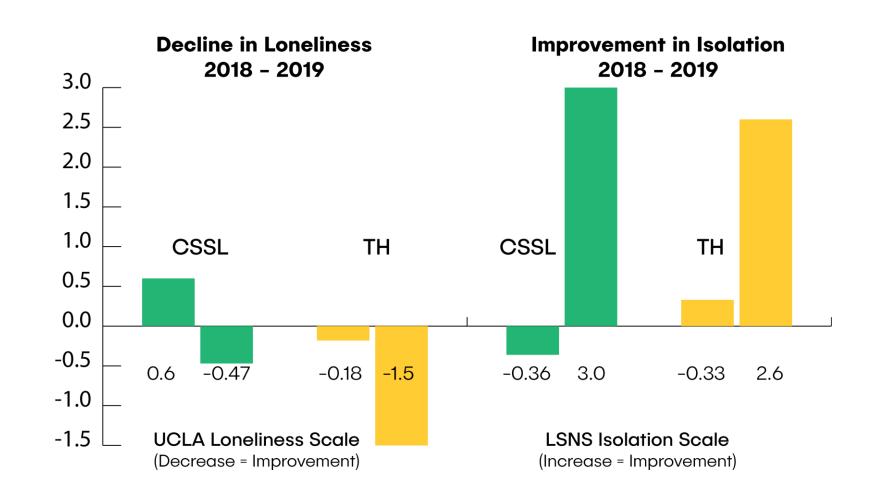




Goαl: Mental Health Stability

Decline in Risk for Loneliness & Isolation

For those receiving group or 1:1 support









Goal: Improved Participant Experience

Survey Results & Comments from Group Participants

- 72% "learned new skills to help cope."
- 91% "learned about a new resource."
- 79% agreed they feel less stigma in seeking mentalhealth support.
- 100% agreed "I now know where I can go for help."

"I felt comfortable talking about my anxiety with the group."

"...feeling I am not alone, and empowered to cope."

"I met a new friend."







Questions?





