



Activation the “Secret Sauce” To Promote Recovery And Wellness

Sue Bergeson, VP Consumer and Family Affairs, Optum



Activation: The “Secret Sauce” To Promote Recovery And Wellness

Five goals:

- Become familiar with the research showcasing the importance of activation
- Consider activation through lens of the five stages of recovery, the PAM, The Transtheoretical Model (TTM), and Motivational Interviewing.
- Understand the critical role of Peers within activation
- Learn five strategies to promote activation
- Briefly review a few consumer created activation tools

Program Description: How do we support a consumer’s movement from just “coming to an appointment” to being actively engaged in their own recovery between visits? The art and science of activation gives us practical insights. We’ll look at research, consider different frame works and share a series of free resources and tools that can be put to use immediately

Engagement and Activation

Engagement

- Engagement and activation are often used synonymously, but they are two different aspects of a continuum of health, wellbeing, care, and management.
- Engagement is the process by which an and health care systems are able to establish the bond that links health, illness, and wellbeing to a system of care.
- This will include prenatal care for pregnant mothers well baby and ongoing pediatric care for children; primary and specialty care across the adult years; and, palliative care later in life.
- An individual can be engaged and not activated

Activation

Six core elements of activation have been identified by Hibbard (2004) and include

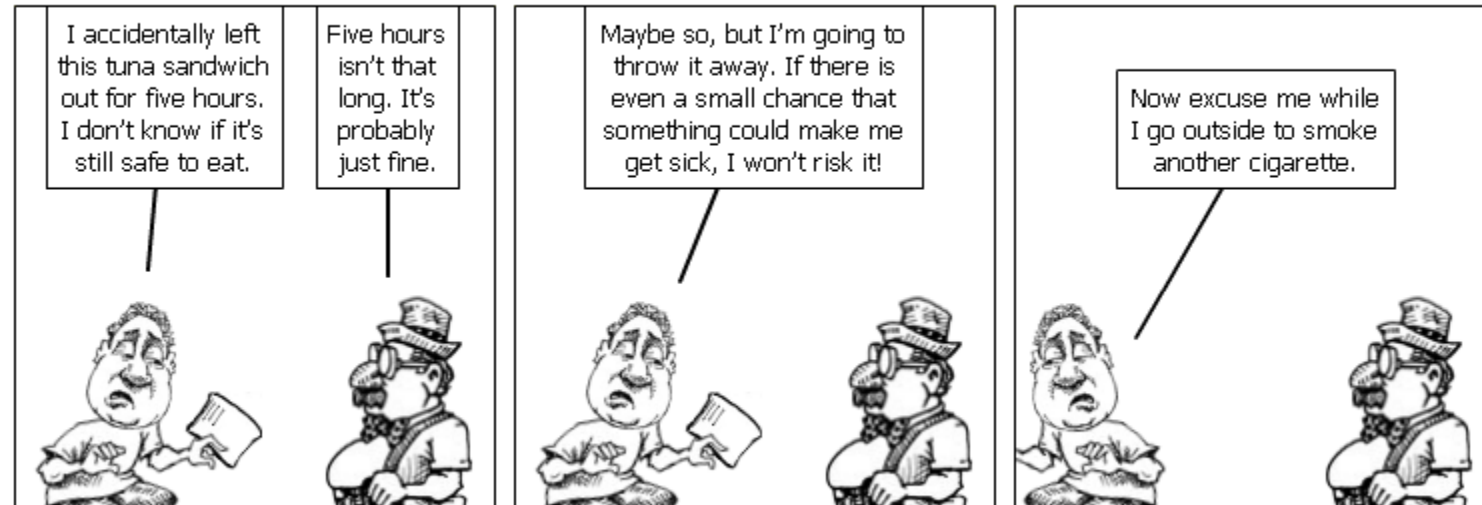
- 1) Symptom self-management;
- 2) Engagement in actions that support health and functioning maintenance;
- 3) Involvement in treatment decision making;
- 4) Collaboration with health care providers;
- 5) Critical, performance-based selection of providers; and
- 6) Navigation of the provider system.

Fundamental to each of these elements of activation also include a patient's beliefs, knowledge, skills, and securing emotional support.

- Judith Hibbard, PhD

I am engaged when I go see the doctor, I am activated when I actually do the work to stop smoking

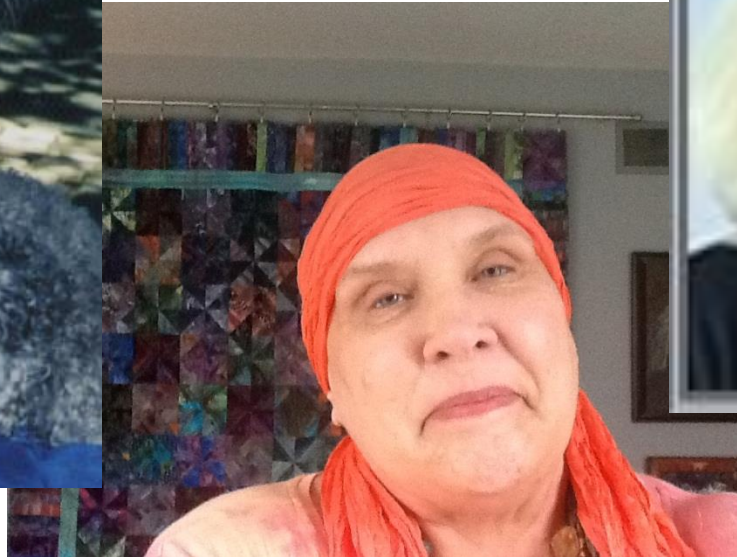
Outgoing Personality by Eric Perlin



Self Care

- In 2009, The World Health Organization defined self-care as follows
'Self-Care is the ability of individuals, families and communities to promote health, prevent disease, and maintain health and to cope with illness and disability with or without the support of a health-care provider.' www.searo.who.int/entity/primary_health_care/.../sea_hsd_320.pdf
- Self-care is a critical component of behavioral health where even in the best clinical conditions with combined medication and therapy, the outcomes for depression (the most common mental health issue) show that less than 33% became symptom free after one medication and less than 70 % of those who did not withdraw from the study became symptom-free after four different medication combinations.
<http://www.nimh.nih.gov/funding/clinical-trials-for-researchers/practical/stard/allmedicationlevels.shtml>
- It can also take 4-6 weeks before the effects of any Medication is felt.
- Medication and therapy work, but they take time and for almost a third of consumers, they will not work. Self-care is an important step in managing symptoms during treatment and when treatment is not effective.

Cancer, Mental Health and Me



“People fear getting cancer more than losing their job, developing Alzheimer's disease or having a heart attack, ...losing a home, debt, and being in a car crash” <http://www.dailymail.co.uk/health/article-1337096/Cancer-greatest-fear-poll-reveals-scarier-old-age-losing-homes.html>

What is the research saying?

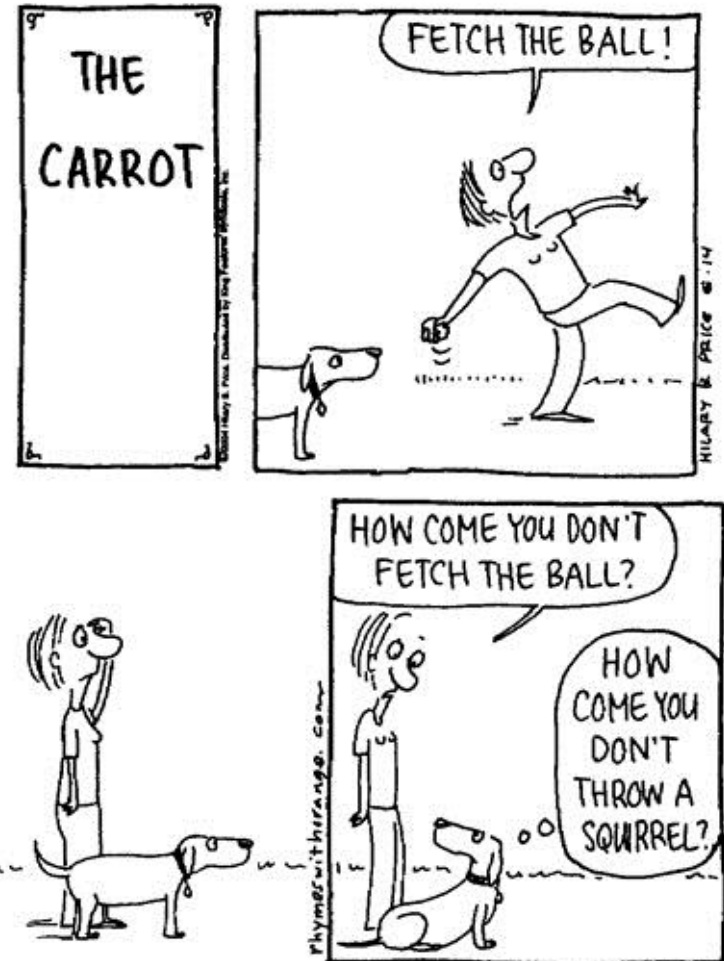
- “...being an engaged and active participant in one’s own care is linked to better health outcomes (Von Korff et al. 1997; Lorig et al. 1999; Von Korff et al. 1998; Bodenheimer et al. 2002) and measurable cost savings (Glasgow et al. 2002).”
- “Training patients with chronic diseases to self-manage their disease is effective, at least in the short term, in increasing functioning, reducing pain, and reducing health care costs (Lorig et al. 1999).”
- Research also indicated a positive relationship between self-efficacy, preventive actions, and health outcomes (Bandura 1991; Grembowski et al. 1993; O’Leary 1985; Day, Bodmer, and Dunn 1996; Kaplan, Greenfield, and Ware 1989).
- Collaborating on care and engaging in shared clinical decision making are also linked with better health outcomes (Von Korff et al. 1997; Kaplan, Greenfield, and Ware 1989; Glasgow 2002).
- Coaching patients to be more involved and to have more control in the medical encounter has been shown to produce better health and functioning in patients (Wasson et al. 1999; Greenfield, Kaplan, and Ware 1985; Greenfield et al. 1988).

What is the research saying?

- Several studies document the problems consumers have in understanding and navigating the health care system, which may lead to reduced access to appropriate and timely care (Isaacs 1996; Hibbard et al. 1998, 2001).
- Consumers who use comparative quality information to choose health care providers will receive higher-quality medical care (Marshall et al. 2000).
- To summarize, the review of the literature indicates that people who are able to:
 - self-manage symptoms/problems;
 - engage in activities that maintain functioning and reduce health declines;
 - be involved in treatment and diagnostic choices;
 - collaborate with providers;
 - select providers and provider organizations based on performance or quality; and
 - navigate the health care system, are likely to have better health outcomes

The Art of Activation/Self Care – the way I frame this

- Built on trust
- Starts with the consumer's strengths
- Based on *Stage of Recovery*
- In synch with consumer's own recovery goals and personal preferences
- Exploration of the best self care/activation tools and strategies is done by the consumer themselves often in partnership with a trusted other (especially in the early stages of recovery)



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Frame work one: Stages of Change, Stages of Recovery

- The Transtheoretical Model (TTM) (Prochaska & DiClemente, 1983; Prochaska, DiClemente, & Norcross, 1992) is an integrative, biopsychosocial model to conceptualize the process of intentional behavior change.
 - This model of change found that people move through a series of stages when modifying behavior. can stay in each stage is variable the tasks required to move to the next stage are not.
 - Certain principles and processes of change work best at each stage to reduce resistance, facilitate progress, and prevent relapse.
- Appalachian Consulting (Fricks et al) layered recovery concepts onto the stages of change from the perspective of the consumer community to create the five stages of recovery



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Five Stages of Recovery

Stage 1: Impact of Illness	Stage 2: Life is Limited	Stage 3: Change is Possible	Stage 4: Commitment to Change	Stage 5: Actions for Change
<p>The person is overwhelmed and confused by the disabling power of the illness/addiction.</p> <p>Persons with a substance disorder may not identify the problem nor open to changing behavior.</p> <p>The task is to decrease the emotional distress by reducing the symptoms.</p>	<p>The person has given into the disabling power of the illness/addiction and is not ready/able to make a change.</p> <p>The task is to instill hope, a sense of possibility, and to rebuild a positive self-image. This stage in addiction recovery is that an openness exists and is opportunity to learn more about the nature of the problem.</p>	<p>The person is beginning to question the disabling power of the illness/addiction and believes that his/her life can be different.</p> <p>The task is to empower the person to participate in his/her recovery by beginning to take small steps while planning a course of action to change for addiction recovery.</p>	<p>The person is challenging the disabling power of the illness/addiction and is willing to explore what it will take to make some changes.</p> <p>The task is to help the person identify his/her strengths and needs in terms of skills, resources and supports</p>	<p>The person is moving beyond the disabling power of the illness/addiction and is willing to take responsibility for his/her actions.</p> <p>The task is to help the person use his/her strengths and to get the necessary skills, resources and supports. For those in addiction recovery, recognizing the risks of old behaviors happens in this stage.</p>

Frame work two: Levels of Patient Activation

- PAM scores have been demonstrated as predictive of healthcare outcomes.
- Patients with low levels of activation have been found to have significantly greater health care costs than those with higher levels of activation)
- When socioeconomic factors and the severity of health conditions are controlled, patient activation remains predictive of health care costs and utilization. (Hibbard et al., 2013)



<http://www.insigniahealth.com/solutions/patient-activation-measure>

Framework three: Motivational Interviewing based Levels of Activation

- Based on the concept of Motivational Interviewing (MI) developed by clinical psychologists Professor William R Miller, Ph.D. and Professor Stephen Rollnick, Ph.D.
 - People who need to make changes in their lives approach this at different levels of readiness to change their behavior.
 - Some people may have thought about it but not taken steps to change, while some may be actively trying to change their behavior and may have been doing so unsuccessfully for years.
- The four levels include:
 - Level 1 – Engaging the person
 - Level 2 – Evoking the person’s perspective
 - Level 3 – Broadening perspectives and building momentum for change
 - Level 4 - Moving into action: developing the practical steps consumers want to use to implement the changes they desire.

Peers as Activation Specialists

“Peers offer the disbelieving, dispirited, and demoralized person the opportunity to witness and come to believe in the possibility and reality of recovery through the cultivation of a trusting and transparent relationship with someone the person can readily identify through the sharing of lived experience.”

Bringing Recovery Supports to Scale Technical Assistance Center Strategy (BRSS TACS) Expert Panel
Equipping Behavioral Health Systems and Authorities to Promote Peer Specialist/ Peer Recovery Coaching Services
Expert Panelist (2012)

The Role of Peers in Activation

Activation

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- Judith

Hibbard, PhD

The Role of Peers

- Georgia became the first state to provide Medicaid reimbursement for peer specialists in 1999.
- The success of Georgia's program was evaluated in a 2006 study conducted by the Georgia Department of Behavioral Health & Developmental Disabilities that compared consumers using certified peer specialists against standard care.
 - individuals using the peer specialists showed **reduced symptoms/behaviors, increased skills, and improved ability to access resources and to meet their own needs.**
 - use of the peer specialists cost Georgia on average \$997 per year compared to \$6,491 for in day treatment.



Peer Coaching Programs In Optum

- Five current models in place
 - Peer Coach (Adult Mental Health)
 - Recovery Coach (Adult Addiction Recovery)
 - Whole Health Coach (MH/AR & Physical health)
 - Peer Bridger – ONLY in NY with NYAPRS
 - Family Support Partner (“Parent” of child ↓ 18)
- In process:
 - Young Adult Coach (18-25+)

Optum is currently paying peers for their work in supporting activation in CA, DE, FL, HI, IA, KS, MA, MI, MS, NM, NH, NY, OH, OR, PA, RI, TN, TX, UT, WA, WI (21)

Significant Decreases in % who use inpatient services

- NY: 47.9% decrease (from 92.6% to 48.2%)
- WI: 38.6% decrease (from 71.5% to 43.9%)
- Significant Decreases in # of inpatient days
 - NY: 62.5% decrease (from 11.2 days to 4.2)
 - WI: 29.7% decrease (from 6.4 days to 4.5)
- Significant Increases in # of outpatient visits
 - NY: 28.0% increase (from 8.5 visits to 11.8)
 - WI: 22.9% increase (from 9.1 visits to 11.8)
- Significant Decreases in total BH costs
 - NY: 47.1% decrease (from \$9,998.69 to \$5,291.59)
 - WI: 24.3% decrease (from \$7,555.49 to \$5,716.31)



Statement of Work

Support the referred member in the recovery process, including the following:

- Understand the concerns and needs of the member and offer support, encouragement and hope based on the mutuality of the lived experience
- Help the member state their recovery goals in terms that make sense to the member and reflect the values and motivations of the member in the members own words. Then help the member identify what actions they believe they need to take to achieve these goals. Encourage and support the member to take the actions they have identified as important to achieve their own recovery goals
- Offer the member a range of engagement and activation tools such as WRAP, Symptom tracking, journaling, creation of advance directives etc. that the member can use to manage symptoms, build wellness, manage anxiety, cope with escalating symptoms, plan for crisis, increase communication with family, friends and providers, build support networks and maintain wellness.
- Support the individual's agreement to and adherence of treatment through the creation of tips and strategies that the consumer decides works for them.
- Work with the member before each psychiatrist and therapy appointment to help the member consider what they wish and need to communicate in order to maximize their time with their providers.
- Based on the members own recovery goals and their identification of things they need to do to move forward, the peer will help the members build confidence in everyday living tasks like riding a bus, grocery shopping, going to a laundromat, etc.
- Based on the members stated needs and goals, the peer will orient the member to community resources such as support groups, drop in centers, food banks, clothing closets, places the member can volunteer to build back their confidence, job placement and supported employment resources, housing resources, ways to access transportation, programs to help the member pay for utilities and so forth.

Roles of Peers And Family Members Within Systems

MCO Staff

- National, State, County, Region

Peer and Family Coaches

- Peer Coaches
- Peer Bridgers (NY) or Peer Link
- Recovery Coaches
- Family Support Partners
- Whole Health Coaches
- Navigators

Facility Staff

- Welcome and Orientation
- Intake Coordination
- Recovery Planning
- Creation of Advance Directives
- Activation and Self Care
- Community Resource Connection

Trainers and Group Leaders

- WRAP
- Pathways to Recovery
- Seeking Safety
- NAMI Family to Family, Basics, Peer to Peer
- WHAM, Wellness Institute,
- Mutual Support Groups
- Mental Health First Aid
- QPR for Suicide Prevention

And More...

- Warm Lines and Phone Recovery Check Ins
- Smoking Cessation
- Weight Loss programs
- Prison Programs
- On Line Support Groups
- Peer Run or Engaged Crisis Respite
- Supportive Housing Mentorship

Non BH: Community Health Workers, Promotores, Cancer Reach to Recovery, Mended Hearts, HIV/AIDs, and more...

How do you leverage peers with difficult to engage members? Activation...

- Is the work of listening carefully and responding to elicit the members own motivations and building that into a recovery goal, not a treatment goal. It takes time and trust. *Mary's Story*
- Is the work of aligning the members own motivation and recovery goals to the treatment plan the provider has created.
- Is the work of helping the member prepare for the visit to the doctor so the consumer and the doc can get the most of their limited time together and work as equal partners in care.
- Is the work of identifying where the member is in the stages of recovery and levels of activation and curating a selection of self care tools and programs for the member



One Example

- http://video.uhcdev.com/content/dam/mediashare/media/UHC_Kansas_Final_V11_720p.wmv.form.html/content/mediashare/home/player.html

Five strategies to promote activation

- Connect the members own motivation to the use of activation tools and strategies using motivational interviewing to elicit the members own motivation
- Ensure you are providing consumer with consumer friendly written educational materials on their condition
- Introduce a self care tool and reinforce the members own motivation for change at every interchange.
- Consider the level of activation and stage of recovery, match the self care tool to both
- Hire a peer coach on staff and/or routinely recommend consumer participate in free local or online support groups

Activation – Another Set of Steps

- Identify with the member their strengths and build on these strengths
- Help the consumer develop their own personal recovery goal(s) and help them use that to shape treatment and self-care choices.
- Provide meaningful education about their condition and help them understand their treatment choices.
- Place empowerment tools into the consumers hands based on the stage of recovery, level of activation, preferences, strengths and goals of the member
- Help the consumer access community programs including support groups.
- Help the member identify their own triggers and create a plan to manage those triggers, perhaps through the use of the WRAP, the WRAP APP and/or the SAMHSA WRAP tool <http://store.samhsa.gov/product/Action-Planning-for-Prevention-and-Recovery-A-Self-help-Guide/SMA-3720>
- Help the consumer look at the whole health, both physical and mental and access care for both.

Activation Tools and Strategies

- Toolkits: <https://www.liveandworkwell.com/public/content/showHotTopic.asp?hid=8&lang=1>
- Just Diagnosed videos: <https://www.liveandworkwell.com/public/content/showHotTopic.asp?hid=19&lang=1>
- Smart Phone Apps: <https://www.liveandworkwell.com/public/content/showHotTopic.asp?hid=8&lang=1>
- Peer Support online or face to face groups
<https://www.liveandworkwell.com/public/content/showHotTopic.asp?hid=8&lang=1>
- Video Stories of Hope: <http://www.optum.com/landing/testimonial-video-directory.html>
- Building Your Way to Wellness:
<https://www.liveandworkwell.com/public/content/showHotTopic.asp?hid=18&lang=1>
- Optum WRAP APP: use **Optum** to open the app
- <https://play.google.com/store/apps/details?id=com.uhg.mobile.wrap>
- Five sets of Wellness Tools



"I'm going to be late for work this morning. I was listening to my motivation tapes and suddenly found myself driving farther and faster than I ever imagined I could!"

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Highly Rated Free MH Community Resources

- Support Groups, especially those through NAMI, MHA, DBSA, CHADD, CABF, AADHD
- Facing us health and symptom trackers online www.facingus.org
- Wellness Recovery Action Planning (WRAP) especially the free wrap booklet through SAMSHA listed in lynx <http://store.samhsa.gov/product/Action-Planning-for-Prevention-and-Recovery-A-Self-help-Guide/SMA-3720>
- State Specific Advance Directives <http://www.nrc-pad.org/>
- NAMI Tools: Family to Family, Peer to Peer NAMI Basics www.NAMI.org**Shared Decision Making Tools:** These tools help you think through and communicate with your doctors your choices around various treatment options
- SuperBetter: <https://www.superbetter.com/>
- Shared Decision Making Aids for Antipsychotics http://www.samhsa.gov/consumersurvivor/sdm/DA_files/
- Shared Decision Making Aids <http://informedmedicaldecisions.org/shared-decision-making-in-practice/decision-aids/>
- Identifying and Coping with Trauma self help tool <http://store.samhsa.gov/product/Dealing-with-the-Effects-of-Trauma-A-Self-Help-Guide/SMA-3717>

Highly Rated Free SUD Community Resources

- **Recovery Radio programs:** **12Step Radio:** www.12StepRadio.com; **Recovery101.net:** www.recovery101.podomatic.com; **The Recovery Radio Network:** www.s100332911.onlinehome.us/4436.html; **Steppin' Out: The 12 Step Radio Show:** www.steppinouradio.com
- **Hazelden's Social Community:** www.hazeldensocial.org/welcome
- **IntheRooms** online discussions revolving around just about any topic in any Twelve Step group. www.intherooms.com
- **RenewEveryDay.com** The online version of Renew magazine www.reneweveryday.com
- **Phone apps:** **Sponsor Support**, Optimized Telecom Inc., **iOS Free**; **Steps Away — Locate Worldwide 12 Step Meetings** DBJ Apps; **iOS Free Android Free** ; **AA Big Book and More** Rob Laltrello **iOS Free** ; iPromises www.ipromises.org;
- **Mindful Meditation:** These free online meditations can help you support your recovery. <http://marc.ucla.edu/body.cfm?id=22>
- **Guide to Mutual Aid Resources** <http://www.facesandvoicesofrecovery.org/resources/support/index.html>
- **Find AA meetings by state:** http://alcoholism.about.com/od/meetaa/A_A_Meetings.htm
- **AA meetings on line:** <http://www.aaonline.net/>
- **NA Meeting by location** <http://portaltools.na.org/portaltools/MeetingLoc/>
- **A range of groups covering issues like cancer, diabetes, addiction recovery and more:** www.SupportGroups.com
- **Cultural Activation Prompts (CAPS) from Nathan Kline Institute:** <http://ssrdqst.rfmh.org/cecc/index.php?q=node/457>

Peers are the experts at activation and self-management

“If you drill down to the core of person-centered care, it is about self-management supports. Whether it is patient education or technological tools, specific motivational support, groups, or one on one coaching — self-management should be at the heart of an integrated care system.”

Richard Birkel, PhD, MPA, Senior Vice President, Center for Healthy Aging, National Council on Aging



“You busy?”

- Create a Reimbursable Peer Program?



“Somebody has to do something, and it’s just incredibly pathetic that it has to be us.”

--the late Jerry Garcia of the Grateful Dead

I want the health care system to: (n=2,000+)

	consumer	family member
1	Give me hope/seem hopeful about my future	Act in a way that shows they believe that my family member can recover
2	Let me make decisions / have some input into my treatment & care	Focus on my family member's wellness not their illness
3	Focus on my wellness not my illness	Treat my loved one and me with respect
4	Act in a way that shows they believe that I can recover	Listen to what my family member needs instead of telling him/her what they need
5	Listen to what I need instead of telling me what I need	Be more accessible

Thank You!

Five goals:

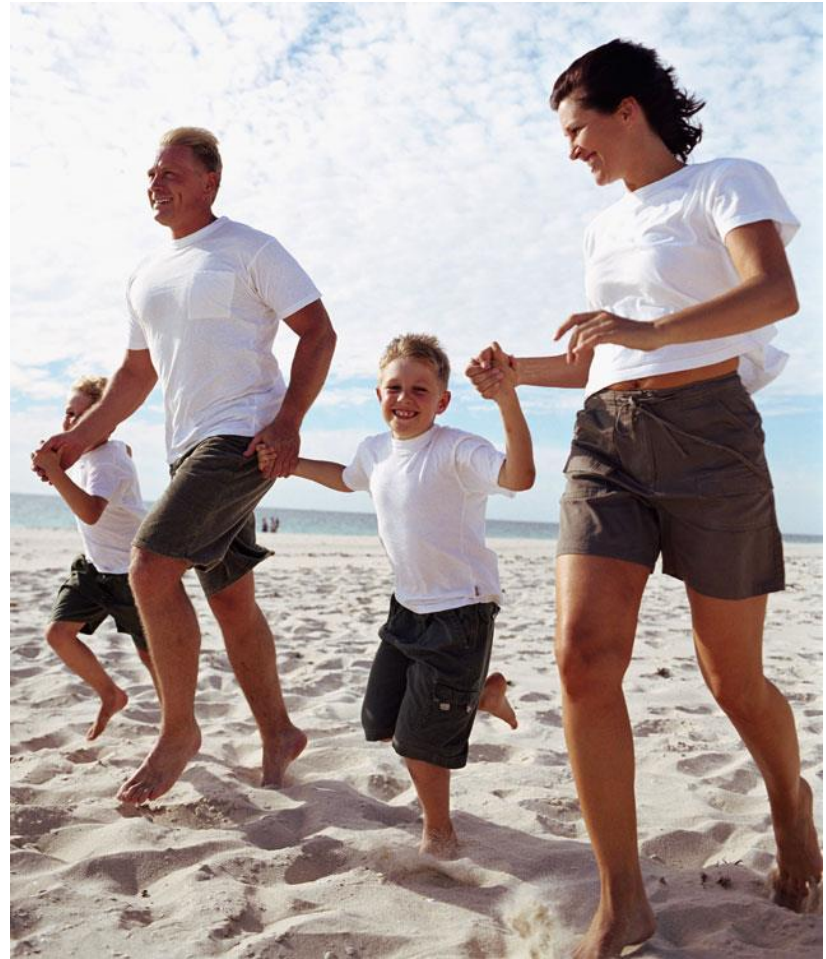
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susan.bergeson@optum.com



Sue Bergeson, VP Consumer Affairs
630-232-2088

Susan.Bergeson@optum.com

Peter Ashenden, Director Consumer Affairs
708-749-7396

Peter.Ashenden@optum.com

How have the self-care tools been selected and vetted?

- Optum Consumer Affairs staff have selected tools in the following ways:
- Do they already exist on *Live and Work Well*? If so they have gone through our clinical vetting process or
- Are they listed in SAMSHA's National Registry of Evidence-based practices and programs? (NREPP)? (I IE WRAP, Seeking Safety, NAMI Family to Family)
- Have they been the subject of research that shows they are effective? (Support Groups, Meditation, gratitude journaling) or
- Are they a product of a national consumer advocacy group with a strong clinical advisory board and review process? (ie. Wellness tracking, Facing us) or
- Are they in use by a national partner with stringent vetting processes ?(IE Veterans use of peer coaches, SAMHSA's tool kits) AND Are they free or charge for our members?

To Further Explore the Topic

- ACMHA Ebook on Activation and Health Literacy www.ACMHA.org
- Supporting people to manage their health: An introduction to patient activation, Judith Hibbard, Helen Gilbert, May 2014 (Pdf, YouTube, Vimeo)
- US Department of Health and Human Services (2010). *Implementation guide to reduce avoidable readmissions*. Chicago, IL: US Department of Health and Human Services. Available at: www.dcha.org/wp-content/uploads/readmission_changepackage_508.pdf (accessed on 23 March 2014).

Consider the Role of Peer Coaches as Activation Specialists

- The Role of Peers in Building Self-Management within Mental Health, Addiction and Family/Child Health Settings, Pillar of Peer Support 2013
<http://www.pillarsofpeersupport.org/POPS2013.pdf>