Promoting Chronic Disease Management: A guide for behavioral health care teams

In the evolving organization and delivery of health care services, Washington State is initiating transformation efforts to ensure improved, affordable care can be accessed statewide. Washington's focus on whole person care is strengthening integration efforts between physical health, mental health, substance use, and community services.¹

A note from Washington Council for Behavioral Health:

As part of healthcare transformation in Washington State, behavioral health care team members must be prepared to play a role in providing whole person care. This means assisting clients to address all aspects of their health and wellness, including chronic physical health diagnoses. New and expanded roles for behavioral health providers include helping clients better understand and manage their diagnoses, assisting them to access needed healthcare, providing care coordination, and/or being part of an integrated care team. To succeed in these roles, behavioral health providers may need knowledge of common chronic medical conditions.

Chronic Disease and Behavioral Health

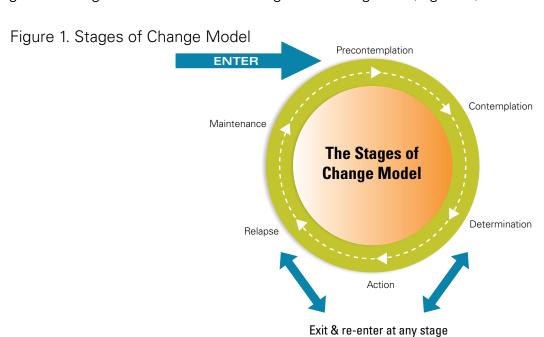
Most clients served in community behavioral health agencies are already living with one chronic condition, a serious mental illness and/or substance use disorder. Because many chronic physical conditions are rooted in lifestyle factors, they can be compounded or exacerbated by behavioral health diagnoses. A person experiencing mental illness or a substance use disorder is at a greater risk for developing chronic physical health conditions than the general population because of the illness itself as well as potential consequences related to treatment of the mental illness or substance abuse.² People experiencing mental illness or substance use disorder also have a reduced life expectancy, as many as 27 years for people living with schizophrenia, due to preventable medical conditions.^{3,4}

Conversely, a person managing a chronic disease is at risk for developing behavioral health conditions or maladaptive health behaviors because of physiological factors and potential stressors related to managing these conditions. The <u>relationship between behavioral health and chronic disease</u> is one that should be explored and understood by primary care and behavioral health providers to foster integrated care efforts. This guide is intended to provide behavioral health professionals with a better understanding of some common chronic physical diseases to support whole-person care.

While the symptoms and treatment of chronic diseases can vary, there are some common steps that behavioral health providers and care team members can take to assist clients in understanding, accepting, and managing their chronic disease. Common chronic diseases with behavioral components include diabetes, hypertension, hyperlipidemia, and asthma.

Client Engagement

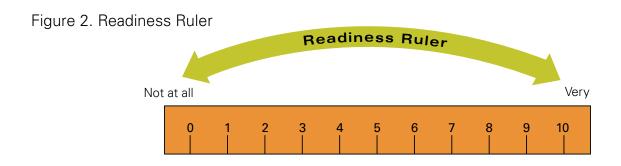
The road to managing a chronic disease is often not a straight line or single solution. It is important to meet clients where they are in terms of acceptance, knowledge, and readiness for change. Providers support clients through disease management by first assessing where they are in terms of both their stages of change and their understanding of their diagnosis (Figure 1).



If clients understand their diagnosis and role in treatment, they are often more likely to take proactive steps in managing a chronic disease. It is important to work with clients to build their knowledge and confidence to make change, utilizing a tool such as the Readiness Ruler (Figure 2).

For each change being considered apply the ruler to these questions:

- On a scale from 1-10, how important is it for you to make these changes?
- How certain are you that you can be successful making this change?
- How realistic is it that you would be able to make this change?



Chronic Disease Diagnoses

"The integration of physical and behavioral health care teams is increasingly important as Washington State continues to focus on integrated, whole person care. Behavioral health professionals are positioned in a crucial role at the intersection of chronic disease management and behavior change."

-Jeff Hummel, MD, MPH Medical Director for Healthcare Informatics, Qualis Health

If a behavioral health client has reported that they have been diagnosed with or are living with a chronic disease, it is important to ensure that they understand the diagnosis. Having a clear understanding of an illness is essential to management, including following a treatment plan.⁵

Chronic Disease	Description	Measures	More information
Diabetes	Condition that causes elevated blood glucose levels. Type 1 occurs when the pancreas produces little or no insulin, a hormone needed to allow glucose to enter cells. Type 2 occurs when the body does not use insulin properly. Over time, the body cannot produce enough insulin to normalize blood glucose levels.	A blood sugar meter measures the concentration of glucose in the blood, reported in mg/dL. A separate measure, hemoglobin A1C, is used to gauge long-term glucose control.	American Diabetes Association Diabetes Basics
Hypertension (high blood pressure)	Occurs when the force of blood pushing against the walls of blood vessels is consistently too high. If left untreated, hypertension can lead to heart failure, heart attack, or stroke due to weakened blood vessels.	Two numbers measure the pressure against the blood vessel walls and are reported as systolic mmHg/ diastolic mmHg.	American Heart Association Fact Sheet
Hyperlipidemia (high cholesterol)	General term for too many lipids in the blood. If left untreated, it increases risk of plaques (blockages) in blood vessels, which can lead to heart attack or stroke.	There are two types of cholesterol- HDL ("good") and LDL ("bad"). These numbers are recorded in mg/dL, a measurement of how much cholesterol is in the blood.	Prevention and Treatment of High Cholesterol
Asthma	Respiration condition that makes it difficult to move air in and out of the lungs as airway becomes swollen or inflamed.	Patients with asthma measure a "peak expiratory flow" to know if symptoms are in control of worsening.	Asthma Basics

It can be helpful to ask the client what they believe is wrong, what will happen as a result of the condition, and what else they want to know about their diagnosis. Based on the client's responses, care team members can work to assist the client in acquiring appropriate information.⁶ Discussing basic information about a condition can be helpful, but it may be necessary to assist the client in creating a list of questions for their primary care provider to aid in understand their specific diagnosis. These questions may include:⁷

- What is my diagnosis?
- What is the cause?
- What is the expected outcome for me?
 - Will symptoms get better?
- What are the symptoms of my condition?
- Are there complications that could develop? How will I know? Can I prevent them?
- Could this affect other parts of my body?
- I also have another condition; how will this affect this diagnosis?
- I don't feel sick; what is happening to my body?
- Are there regular tests/labs that I need to have to monitor my condition?

Medications

As with treatment for serious mental illness, many chronic physical diseases may warrant the use of one or more medications. These medications can play a key role in managing an individual's disease. Approximately half of individuals with chronic disease do not take their medication as prescribed. Lack of medication adherence can have significant health consequences, including decreased quality of life, poorly managed symptoms, and death. Medication adherence can be influenced by many factors, including economics, patient perception and understanding, beliefs, and concerns. Coaching clients to discuss medication questions with their primary care provider can be helpful and might include:

- What is the name of the medication? (generic and brand name)
- Why do I need to take it?
- How does the medication work? How long will it take to be effective?
- How much and when should I take it?
- Do I need to take it with or without food?
- What are the side effects of the medication?
- Are there foods, supplements, or other drugs that I should avoid while taking this medication?
- Will this medication change the effectiveness of other medications or vice versa?

Lifestyle and Behavior Change

Factors such as smoking, alcohol, diet, lack of physical activity, lack of social support, environmental stressors, and inadequate stress relief can be contributors in the development and progression of many chronic diseases. People living with serious mental illness and/or substance use disorders have among the highest smoking rates of any demographic group in our state. Tobacco use contributes significantly to this population's reduced life expectancy and multiple co-morbidities. Changes in behavior in conjunction with other treatment interventions can improve client outcomes. Studies have shown that common chronic conditions can be significantly improved with ongoing lifestyle modifications. It is important for clients to understand that some behavior changes can improve their overall health.

Additional discussions with a physician will help clients develop an appropriate plan for change.

- Are there other things I can be doing to improve my health? Exercise, diet?
- What types of exercise or diet?
- Is this hereditary?
- If I have additional questions, what is the best way to get in touch with you?
- Is there someone else at the practice I should contact?
- Who should I contact if they are not available?
 - What are some red flag symptoms that I need to look for?
 - What symptoms do I need to call/email the practice about if I'm experiencing them?
 - What symptoms should I make an appointment to discuss?
- What symptoms should I go to urgent care/ER to address?
- Are there other specialists I need to see?

Motivational Interviewing in Chronic Disease Management

As with treatment planning related to recovery from a serious mental illness or addiction disorder, it may also be of value to assess how motivated a client is to adhere to the lifestyle changes that are necessary to control chronic disease symptoms. Motivational interviewing techniques can be useful in working with a client to guide them toward positive change with respect to physical health conditions. Empowering a client to believe that they are capable of succeeding can be a key to change, as well as educating them that even small reductions in risk factors can cause significant reductions in disease.

A client-centered and goal-oriented approach can be very effective when working with individuals with chronic disease. Asking questions regarding feelings, goals, and aspects of the disease can be useful ways to initiate change talk—words that show consideration of or commitment to change. The use of open-ended questions can play a key role in moving individuals toward positive change. Asking open-ended questions does not suggest potential answers and allows the respondent to answer in their own words. Soliciting the individual's perspective on various aspects of their diagnosis can provide valuable information that can assist in creating meaningful goals and move the individual to make positive changes. Here are some sample questions that might elicit change talk related to physical health conditions from a client:

Sample Questions¹¹

Impact of Chronic Disease

- How is the chronic disease (CD) affecting you physically?
- How is it affecting you socially?
- Are you saying that this is restricting you or stopping you from doing/visiting/attending...?
- If you did not have chronic disease, how would things be different?
- So, chronic disease is affecting you in...
- To what extent has chronic disease stopped you from participating in social outings/physical exercise/home duties/showering/going outdoors, etc?
- Do you believe chronic disease is affecting you in another way? How?
- Is there an upside to having chronic disease?
- In summary, chronic disease is affecting your... because... Is that correct?

Sample Questions			
Desired Outcome	 If you could wave the magic wand, what would you like to see yourself doing? What is the most significant part of the picture you are seeing? How do you see yourself in this picture? Describe the sort of activities you see yourself undertaking What does that mean to you to undertake these activities? Would you say that you value? How important is it for you to be able to do these things? How often do you think "I wish I could do?" 		
Feeling/Emo- tion	 How is the chronic disease affecting you emotionally? How are you managing your frustrations? How are you managing your moods? What have you done to date to deal with your chronic disease better? What was good about this? What was not so good about it? What are the things you tried to get that you wanted but did not work? What do you feel inside when you look at the idea picture? 		
Reality	 Is this ideal picture realistic? If not, do you think you could change this picture? Is what you are doing helping you to change the picture you currently have? What could you start doing differently so that you would feel a little better? So you are saying that doing response might help you to get what you want? 		

Additional Key Points:

- It is important to meet clients where they are and move toward positive lifestyle choices at a pace and course they choose. Client voice and choice is essential when assisting clients to make lasting changes.
- Each client is an individual and will respond differently to diagnoses and treatment, as well as have different capacities to change. All treatment should be customized to the individual.

Conclusion

Behavioral health care teams have the skills necessary to improve client outcomes for both behavioral health conditions and chronic disease. Behavioral health and physical health are profoundly interlinked, and both primary care and behavioral health providers need to work together to coordinate and integrate care in order to provide whole-person care. Behavioral health care team members are an essential piece to whole person care when discussing behavioral health or chronic diseases.

Additional Resources

Motivational Interviewing

Motivational Interviewing Network of Trainers (MINT)

Community Care of North Carolina Motivational Interviewing Resource Guide

SAMHSA-HRSA Center for Integrated Health Solutions: Motivational Interviewing

Case Western Reserve University: Center for Evidence Based Practices - Motivational Interviewing

Behavioral Health Interventions

Behavioral Activation

Society of Clinical Psychology: Behavioral Activation for Depression

University of Michigan: Behavioral Activation

Problem-Solving Therapy

Society of Clinical Psychology: Problem-Solving Therapy for Depression

Solution-Focused Therapy

Institute for Solution-Focused Therapy

Chronic Disease Information/Resources

Medical Recommendations and Guidelines

US Preventive Services Task Force

CDC Disease Conditions

Chronic Disease Associations

American Diabetes Association

American Heart Association

American Lung Association

Chronic Disease Self-Management Resources for Clients

National Council on Aging: Chronic Disease Self-Management

Stanford Self-Management Resource Center

YMCA: Health, Well-being, and Fitness Resource

CDC HealthyLiving

Chronic Disease Management Resources for Staff

Smoking and Serious Mental Illness

Asthma/COPD and Serious Mental Illness

Congestive Heart Failure and Serious Mental Illness

Hypertension and Serious Mental Illness

Type 2 Diabetes and Serious Mental Illness

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The project described was supported by Funding Opportunity Number CMS-1G1-14-001 from the U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services. The contents provided are solely the responsibility of the authors and do not necessarily represent the official views of HHS or any of its agencies.