The Health Care Workforce Transformation Fund supports training programs that address workforce skill needs identified by health care providers as they work to improve patient care and reduce costs. Commonwealth Corporation administers this fund on behalf of the Executive Office of Labor and Workforce Development.

Fellowship Health Resources (FHR) is a non-profit behavioral health care agency with corporate offices in Lincoln, RI and operations in 7 states. In Massachusetts (Cape Cod & the Islands, Fall River and New Bedford regions), FHR serves 728 individuals annually. FHR integrates wellness and innovative, therapeutic practices to provide community-based, recovery-oriented behavioral health services that promote independence, stability and increased skill levels.

Workforce Challenge:

FHR was experiencing an increase in the acuity level and number of individuals affected with medically-compromised serious mental illness, further complicated by legal issues, addictive disorders and homelessness. Some do not know how to access services or lack the resources to understand their conditions. In particular, FHR found that 32% of their Transitional Age Youth (TAY, ages 18-24) patients had an addiction, 11% did not have an identified Primary Care Physician (PCP), 20.5% had asthma, 14% had documented weight issues, and the majority smoked cigarettes. To effectively address the needs of this population, FHR’s staff and peer specialists required training and coaching on the integration of self-care, medical, and addiction services into their behavioral health model.

Training Strategy and Expected Outcomes:

With the support of Planning and Training grants, FHR surveyed the needs of their TAY patients in Massachusetts, with special focus on those in residential units. They hired a Lead Nurse Trainer to train staff in case management essentials, addiction prevention, nutrition/food education, Wellness Recovery Action Planning, Whole Health Action Management, sensory needs, vital signs, chronic health conditions, smoking cessation, and changes to the DSM.

After almost two years of training, coaching, and conducting health and wellness groups, FHR saw improvements in the education and self-monitoring of symptoms of their TAY patients. Some of their outcomes include:

- 100% of participating TAY patients selected a PCP and had a yearly physical.
- 100% of TAY patients living in the Cape & Islands region chose a dentist, and either had or scheduled a dental exam.
- 50% of TAY patients reduced or stopped smoking.
- Unnecessary/preventable hospital visits were reduced by 27% during the grant period.
- Drug use by TAY patients was reduced by 57%.
- 42% of TAY patients were engaged in physical activity and 38% either reduced or eliminated their soda consumption.

In addition, FHR reduced its unbillable days* by 4,657 R Days, or the revenue equivalent of $333,953. They have also seen estimated yearly training cost savings of $13,400, which will allow them to extend training to all their staff and patients in MA and experienced a 70% reduction in denied claims following staff training in DSM V and ICD-10.

* Unbillable days include those in which an individual is hospitalized and is unable to work on their mental health recovery.