**Agenda Item Number:**

**ORANGE COUNTY BOARD OF HEALTH**
**AGENDA ITEM SUMMARY**

**Meeting Date: March 23, 2016**

**Agenda Item Subject: Integrated Behavioral Health Pilot**

**Attachment(s): Powerpoint Presentation**

**Staff or Board Member Reporting: Kathleen Goodhand, Home Visiting Services Supervisor, Hannah Welch, UNC-PrimeCare Intern & Andrea Mulholland, FNP**

**Purpose:** **X**___ Action
____ Information only
____ Information with possible action

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**Summary Information:** UNC-PrimeCare Intern Hannah Welch, Kathleen Goodhand and Andrea Mulholland will provide an overview of the results of the integrated behavioral health/prime care pilot and make a recommendation for funding a behavioral health (Social Work Clinical Specialist) position.

The attached presentation details the need and projected cost for funding this position.

**Background**: Behavioral and social factors contribute to nearly every cause of death, illness and disability (Journal of the American Medical Association 2004). As much as 85% of physician visits are for problems that have a significant psychological and/or behavioral component (American Psychological Association 2016). Research has shown that integrating mental health, substance abuse and primary care services, enhances services, improves quality of care, reduces health care costs and produces the best outcomes for caring for people with multiple healthcare needs.

In August 2015, we initiated integrated behavioral health as a part of the health department's primary care services. Utilizing a UNC-PrimeCare MSW Intern (UNC-PrimeCare interns are masters in social work students, trained to work in primary care settings as behavioral and mental healthcare specialists), we piloted providing integrated behavioral health and prime care services in both OCHD clinics.

From August 2015 to February 2016, our UNC-PrimeCare Intern received 85 referrals and provided services to 56 patients with mental or behavioral health issues and/or substance abuse. Issues ranged from suicidality, postpartum depression, domestic

violence and PTSD to medication compliance, smoking cessation and anger management.

Staff recommends that the Board of Health vote to approve the request for one additional FTE for a Social Work Clinical Specialist to provide integrated behavioral health services. The current fiscal year cost for salary and benefits is $6,323 and the total annualized cost for this position is $79,694. Funds to cover this position will come from the Medicaid Cost Settlement.

**Recommended Action:**

___Approve
X__Approve & forward to Board of Commissioners for action
___Approve & forward to _____
___Accept as information
___Revise & schedule for future action
___Other (detail):

# INTEGRATED BEHAVIORAL HEALTH & THE ORANGE COUNTY HEALTH DEPARTMENT

March 23, 2016

ORANGE COUNTY
HEALTH DEPARTMENT
*Improving health. Inspiring change.*

# Integrating Behavioral Health: Why?

- Addressing mental health and physical problems in a comprehensive, coordinated way, saves lives and improves all patient health outcomes.
- Behavioral and social factors contribute to nearly every cause of death, illness and disability and cause approximately half of deaths each year (Journal of the American Medical Association 2004).
- > 50% of patients with a mental Health diagnosis are seen by their primary care provider (American Psychological Association).
- 85% of physician visits are for problems that have a significant psychological component.
- 45% of individuals who die by suicide have visited their primary care provider within a month of their death and over 75% had contact within one year. (Agency for Healthcare Research and Quality).

# Integrating Behavioral Health: It Works! Research and Data

- Impacts of Integrated Behavioral Health
  - Increased Patient, Family, and Provider Satisfaction[1,3]
  - Increased Patient and System Outcome Improvements[1,3,4]
- The Patient Protection & Affordable Care Act (PPACA)[2,3]
  - Mental Health as a part of Physical Health
    - Incentives linked to patient and caregiver experience, care coordination, safety, preventative health.
- Prevention and Public Health Trust Fund to invest in prevention, wellness, and public health activities (Sec. 4002)[5]
  - ACA initially appropriated $500 million in FY 2010 increasing to $2 billion by 2022.*

# OCHD Integrated Behavioral Health Pilot: Goals

1. **Improve patient health outcomes, by integrating behavioral and mental health services as part of OCHD clinical services.**

2. **Increase client access to and utilization of behavioral and mental health services.**

# OCHD Integrated Behavioral Health Pilot: Patients Treated

- Total Number of Encounters: >300
  - Encounters include phone calls and in-person visits
- Total Number of Patients Referred: 85
  - Whitted: 48
  - Southern: 37
- Total Number of Patients Served: 56
- Total integrated visits: > 30
- Total ongoing psychotherapy appointments: 71

# OCHD Integrated Behavioral Health Pilot Intervention

**Behavioral Health services were provided in two main ways:**

- As requested by clinicians during a clinic visit. As patient issues were identified, providers would ask Hannah to step in to see a patient during a primary care visit. Hannah would provide crisis management and/or other short term interventions during these visits.
- Follow up interventions – for issues that required longer term intervention - were provided by phone and through in person counseling sessions, depending on needs.

# OCHD Integrated Behavioral Health Pilot: Conditions/Issues Addressed

- Substance abuse, suicidality, interpersonal violence.
- Anxiety and Depression (many clients disclosed a history of trauma including sexual abuse, rape and human trafficking).
- Mental Health conditions including bipolar disorder, eating and adjustment disorders and PTSD.
- Stress Management, Social Isolation and Emotion Regulation issues.
- Parenting and Child Behavior Management.
- Smoking Cessation, Medication Adherence and Healthy Goal Setting.

# OCHD Integrated Behavioral Health: Client & Provider Benefits

## Patient

- Immediate, open access to mental health services
- Safety net (many of these clients have no insurance and/or are unlikely to ever seek traditional mental health services)
- Less stigma
- Client comfort & safety
- Improved health outcomes

## Provider

- On-site, accessible specialty care
- Support for clinic staff
- Better control of chronic conditions
- Lower no-show rates
- Improved clinic efficiency
- Indispensable service!
- Lifeline for patients & providers!

# OCHD Integrated Behavioral Health Pilot: Provider Feedback & Patient Examples

- Patient survived a recent sexual assault. Hannah used skills to provide crisis support, legal resource connection and ongoing trauma focused counseling.
- Postpartum patient suffering from shock of fetal demise, grieving and emotional at first clinic visit. Hannah provided immediate and ongoing counseling and coordinated with provider on additional physical treatment options.
- Patient newly diagnosed diabetic with a lot of stressors & personal crises. With Hannah's interventions, diabetes in better control, which would not have been possible without integrative behavioral health care.
- Patient with untreated mood d/o for 'years' and former approach of referring her to outside services was not successful. Pt engaging in unhealthy, high risk behaviors. Pt has been in counseling with Hannah for several weeks, on mood stabilizer, stable, and will return to nursing school.
- One Monday, we had two new moms in distress, tearful and overwhelmed. Hannah was able to reach out, provide brief interventions to stabilize and then provide ongoing counseling.
- Patient with poorly controlled bipolar disorder in manic phase. Hannah was able to meet with patient & provide ongoing counseling services.

# Recommendation & Costs

- Recommend funding 1FTE (Social Work Clinical Specialist) to provide behavioral health services in both OCHD clinics.

| Line Item | FY 2015-2016 Cost | FY 2016-2017 Cost |
|---|---|---|
| Salary and Benefits | $5,623 | $74,694 |
| Interpreter Costs | $200 | $2,400 |
| Clinical Supervision Costs | $500 | $2,600 |
| **Total** | **$6,323** | **$79,694** |