Behavioral Health Network of Greater St. Louis

Strengthening the System of Behavioral Healthcare for Missouri's Eastern Region

Presented to Missouri Mental Health Commission
February 8, 2018

Who We Are

BHN is a collaborative effort of providers, advocacy organizations, government leaders and community members dedicated to developing an ***accessible and coordinated system of behavioral healthcare*** that encompasses:

- *The **full spectrum of services and supports** (prevention, treatment and community supports for recovery)*
- ***Across the lifespan** (children and adults)*
- *With emphasis on the uninsured, underinsured and underserved population of the DMH's "Eastern Region"*

  (City of St. Louis and Missouri counties of Franklin, Jefferson, Lincoln, St. Charles, St. Louis & Warren)

Our History

- Grew out of an initiative from Missouri Foundation for Health, facilitated by Regional Health Commission at the invitation of community based providers.
- Based on the recommendation of the St. Louis Regional Health Commission's four year "***Eastern Region Behavioral Health Initiative***" to establish a permanent structure for ongoing regional behavioral health system planning and coordination.
- BHN formed as a 501(c)3 non-profit formed in 2010

This initiative was also a component of the Governor's Mental Health Transformation effort and activities were included in the **Missouri Comprehensive Plan for Mental Health.**

Our Partners

- Behavioral Health Response (crisis access)
- Regional Hospital Systems (11 hospitals)
- Community Mental Health Centers (7)
- Substance Use Treatment Centers (4)
- Advocacy Groups
- Generate Health (maternal, child, family health)
- University System
- Social Support Services
- Department of Mental Health
- Department of Corrections
- Veterans Administration
- Child Welfare

Mission & Vision

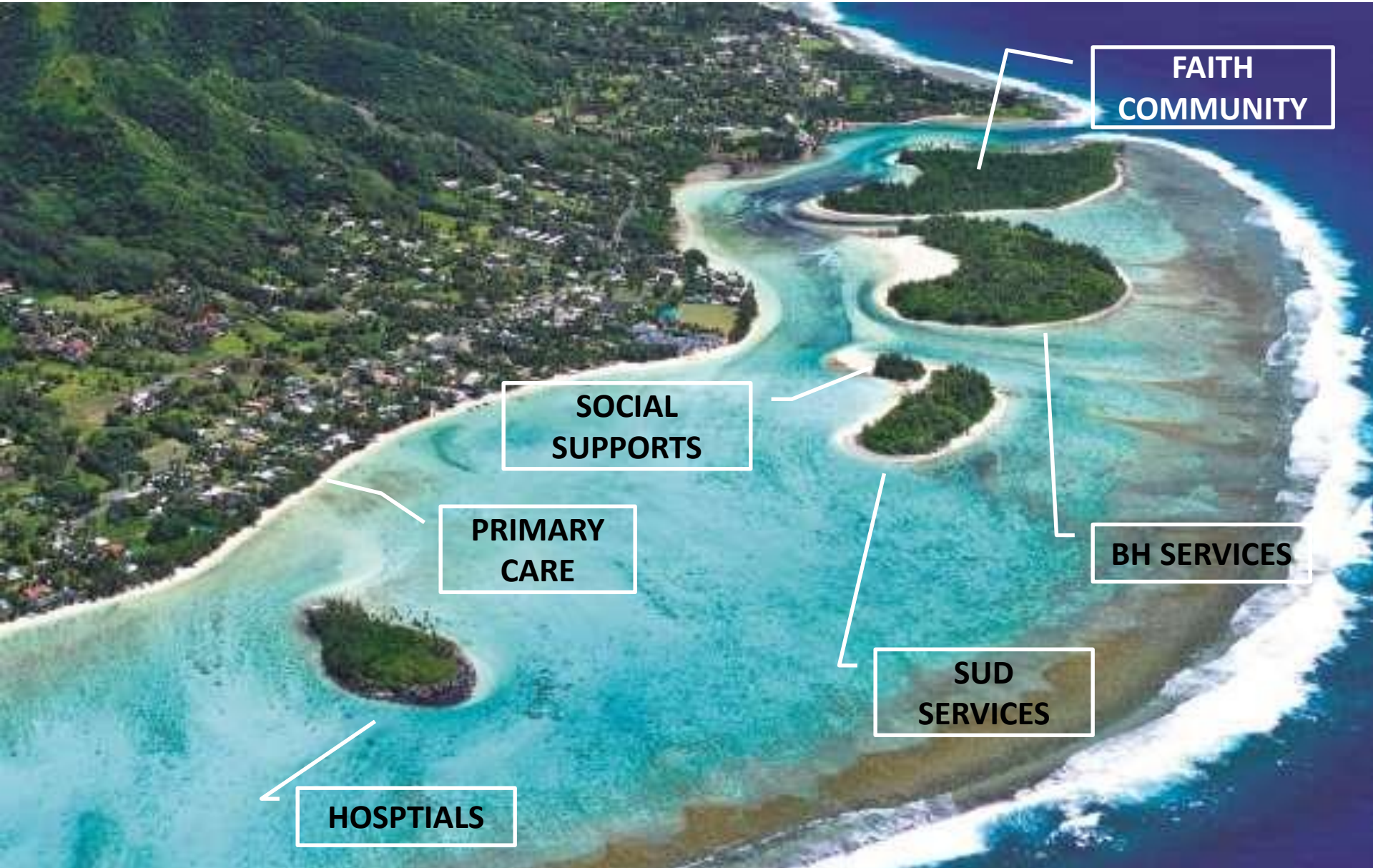
Mission: To improve our community by leading behavioral health **planning** and **coordination**.

Vision: Through the development of a **coordinated**, **accessible**, **effective** and **accountable** system of behavioral health and support services, the people in our region will reach their highest potential.

BHN's Role

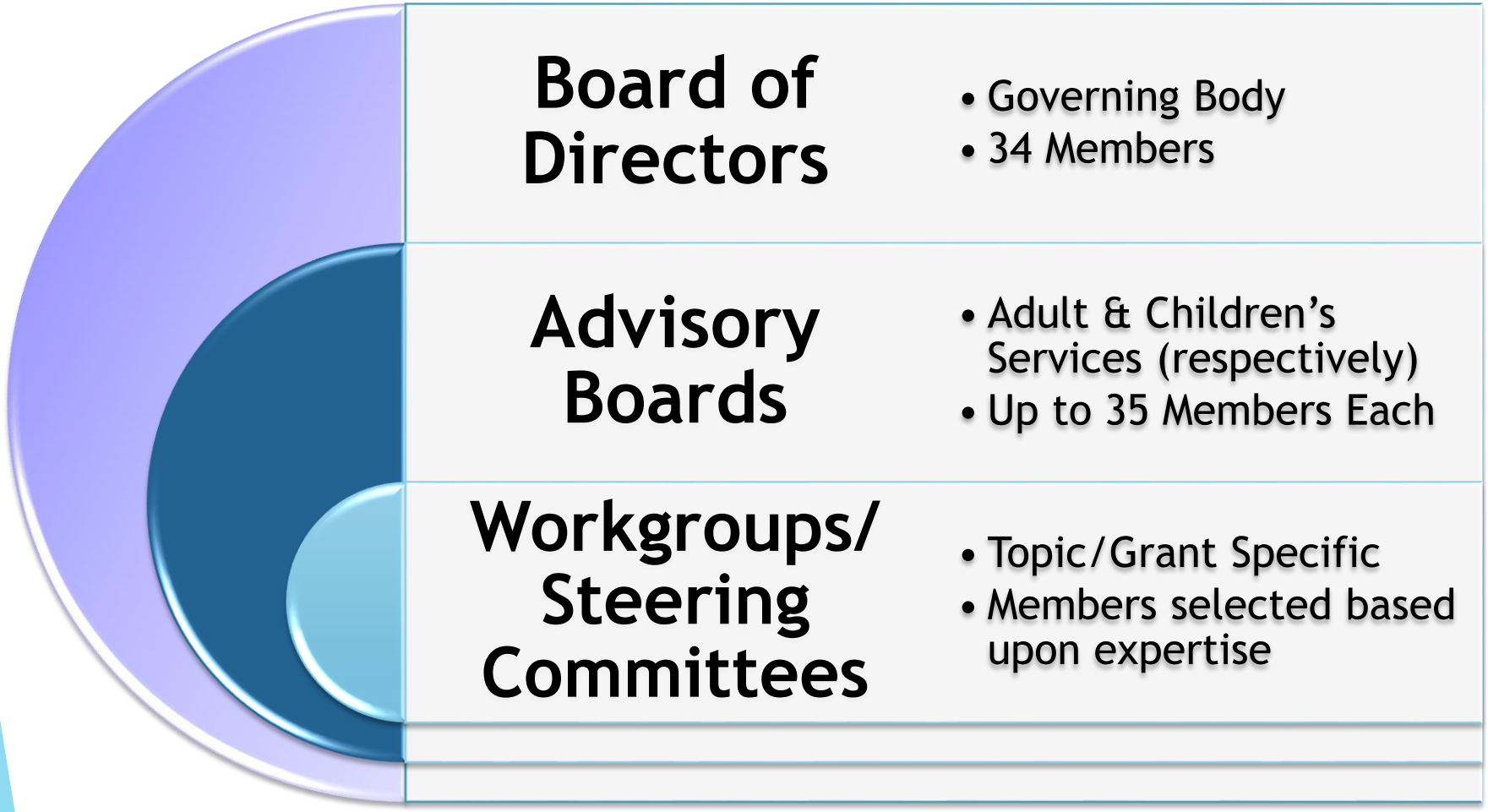
- **Improving** the system of care and support by helping people with behavioral health needs get the help they need when and where they need it.
  - This ensures people get treatment before their illnesses become more serious, more complex, and more difficult and costly to treat.
- **Identifying** critical gaps in the service delivery system and pursuing resources needed for the Eastern Region to fill these gaps and enhance care.
- **Connecting and coordinating** the healthcare system to increase efficiencies, which builds capacity to help more people with the same limited amount of public health resources.
- **Developing** relationships and initiatives with multiple sectors of the community to ensure comprehensive and sustainable solutions to regional issues that impact behavioral health.

“Islands” of Care – before BHN



“Islands” of Care – with BHN

Organizational Structure



How We are Funded

- **Initial funding**
  - Membership contribution from the Board Member Agencies; match from DMH
  - Funding to facilitate the Inpatient Hospital Community Linkages project (half of the funding the region received when the state operated center (MPC) closed); providers paid a portion to BHN to facilitate project and track outcomes.
  - Hospital foundation grants (from 3 local foundations for initial start up funds for Bridges to Care and Recovery)
- **Current Funding**
  - CMHC-supported projects for improving access to care
  - SAMHSA Technology Assisted Grant (working with the Disease Management Population and Substance Use Providers)
  - Missouri Foundation for Health Grant (to reduce infant mortality in high risk communities)
  - State Targeted Response Funds through Substance Use providers/DMH (to address the opioid crisis)
  - St. Louis Mental Health Board (for community needs assessments and youth system of care work)
  - Sub-contracts from other agencies (e.g. St. Louis Co. PD/CIT, Mizzou)

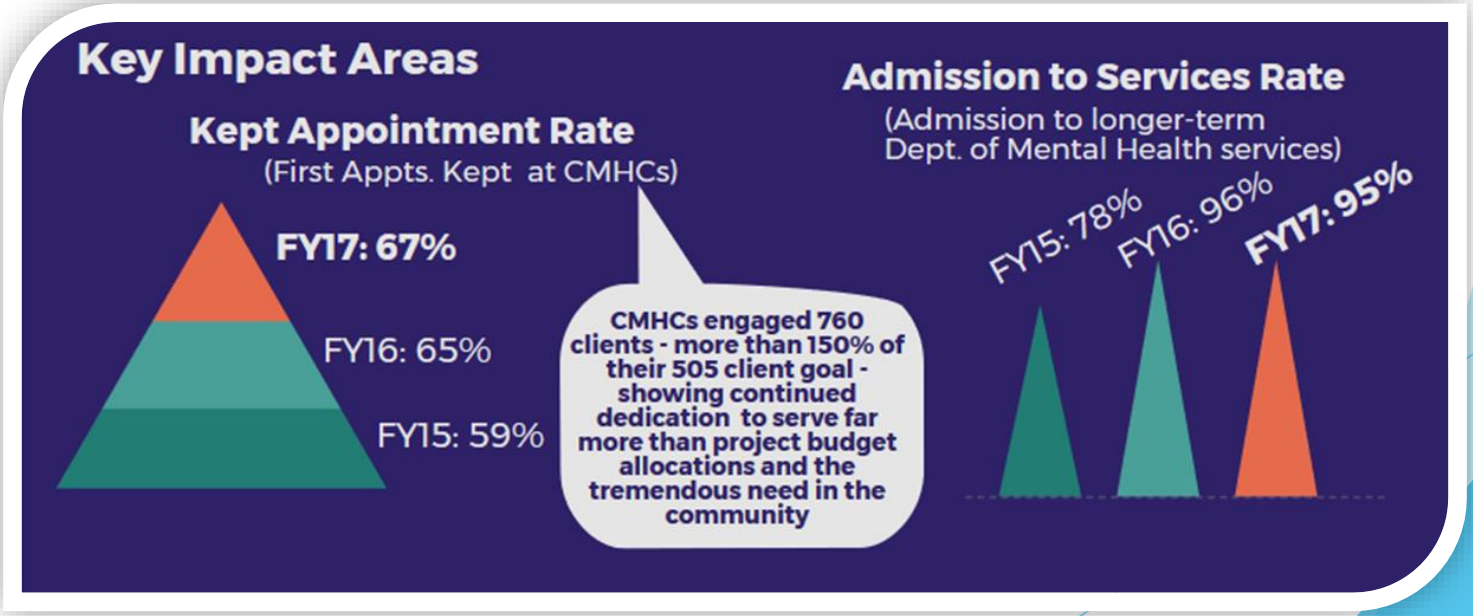
Key Regional TOC* Grant Initiatives Coordinated by BHN

Initiative	Funder	Client population	TOC* from	TOC* to
Hospital Community Linkages (HCL) Inpatient	DMH	Adults with serious mental illness (SMI)	Inpatient psychiatric hospital	Community Mental Health Centers (CMHC)
Emergency Room Enhancement (ERE)	DMH	Adults, high utilizers of acute care with substance use/mental health needs; Recent expansion to youth	Hospital Emergency Department	Community Care, primarily CMHC and substance use treatment
Bridges to Care & Recovery	DMH & Hospitals	Adults (some youth), stigma reduction & early intervention; Recent expansion to pregnant and postpartum women	Churches / Community	Community Care (Social services, FQHC, CMHC)
Technology Assisted Care Coordination (TACC)	SAMHSA	Text Messaging & telecoaching for Adults with substance use/ mental health needs	Community	Substance Use Treatment & Primary Care
Engaging Patients in Coordinated Care (EPICC) - Opioid Overdose Response	DMH	Adults with recent opioid overdose	Hospital	Substance Use Treatment

*TOC=Transitions of Care

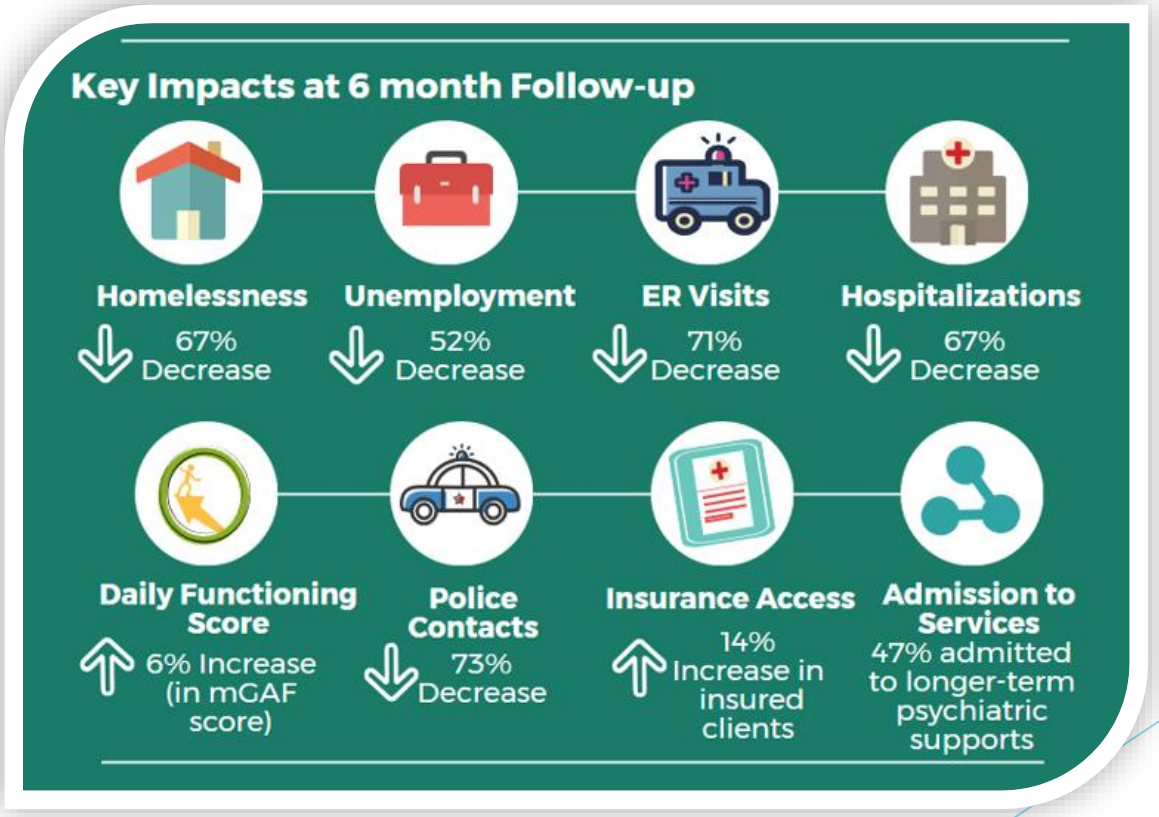
Hospital Community Linkages (Inpatient) Impact

- In FY17, 1468 individuals were referred, an increase of 15% from FY16
- 67% kept their first appointment
- 95% of those who kept their appointment were admitted for longer-term treatment at a DMH Community MH Center



Adult Emergency Room Enhancement (ERE) Impact

- In FY17, 452 individuals were referred with 290 eligible for services
- 90% Engagement Rate with the Outreach Team in FY17 (climbing from 60% in FY15)
- 85% Engagement Rate in Substance Use Treatment



Youth Emergency Room Enhancement (YERE)

- DMH approval for implementation - 9/1/17
- "Soft launch" to accept referrals - 10/1/17
- As of 2/1/18, early data shows :

  - 46 youth referred with 42 eligible
    - Of the 4 ineligible: 2 were active at a CMHC and 2 caregivers refused services
    - 64% of referrals are 11-15 years old

      (26% 16-20 years old; 10% 6-10 years old)

  - 80% successfully initially engage with outreach team
  - 88% of those initially engaged have sustained engagement at 30 day follow-up
  - 30% of youth have had parents in need of referral to behavioral health services within the first 30 days.

Engaging Patients in Coordinated Care (EPICC)

- Innovative program that combines emphasis on treatment of addiction in the emergency room with transitions of care to substance use treatment services utilizing Recovery Coaches.
- From 12/1/16-12/31/17, 650 Referrals with 85% eligible for the program (currently averaging over 100 referrals per month)
- Overall 87% initial engagement with recovery coaches (FY18 rate – 92%)
  - Of note, national studies have found only 17% of similar client populations (those experiencing hospitalizations for opioid use disorders or overdose) engage in treatment within 30 days post-discharge*
- Overall 28% sustained engagement at 30 day follow-up (FY18 rate - 33%)
- Significant media coverage of project and client success stories

*Source: Naeger et al.(2016). Post-Discharge Treatment Engagement Among Patients with an Opioid-Use Disorder. *Journal of Substance Abuse Treatment*, 69, 64-71. doi:10.1016/j.jsat.2016.07.004

Bridges to Care & Recovery

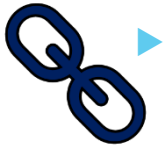
BRIDGES
to care & recovery

https://youtu.be/5Rxl9V0jvsM

Bridges to Care & Recovery Impact

- **Mobilization of Churches**
  - 52 Churches designated as “behavioral health friendly” through extensive training of pastors and congregations

- **Development of Skilled Natural Supports & Reduction of Stigma**
  - Nurturing of over 100 Wellness Champions, who have 19+ hours of training including evidence based practices like Mental Health First Aid
  - Enhanced support-seeking and need identification, with over 900 referrals placed by these Wellness Champions to support their community—largely for basic social service needs and mental health supports



- **Enhanced Connection to Services**
  - Over 125 individuals served through Community Connector navigations services, for early intervention
  - Access developed to free counseling services and novel partnerships to meet community needs

Impact in the words of the Pastors…

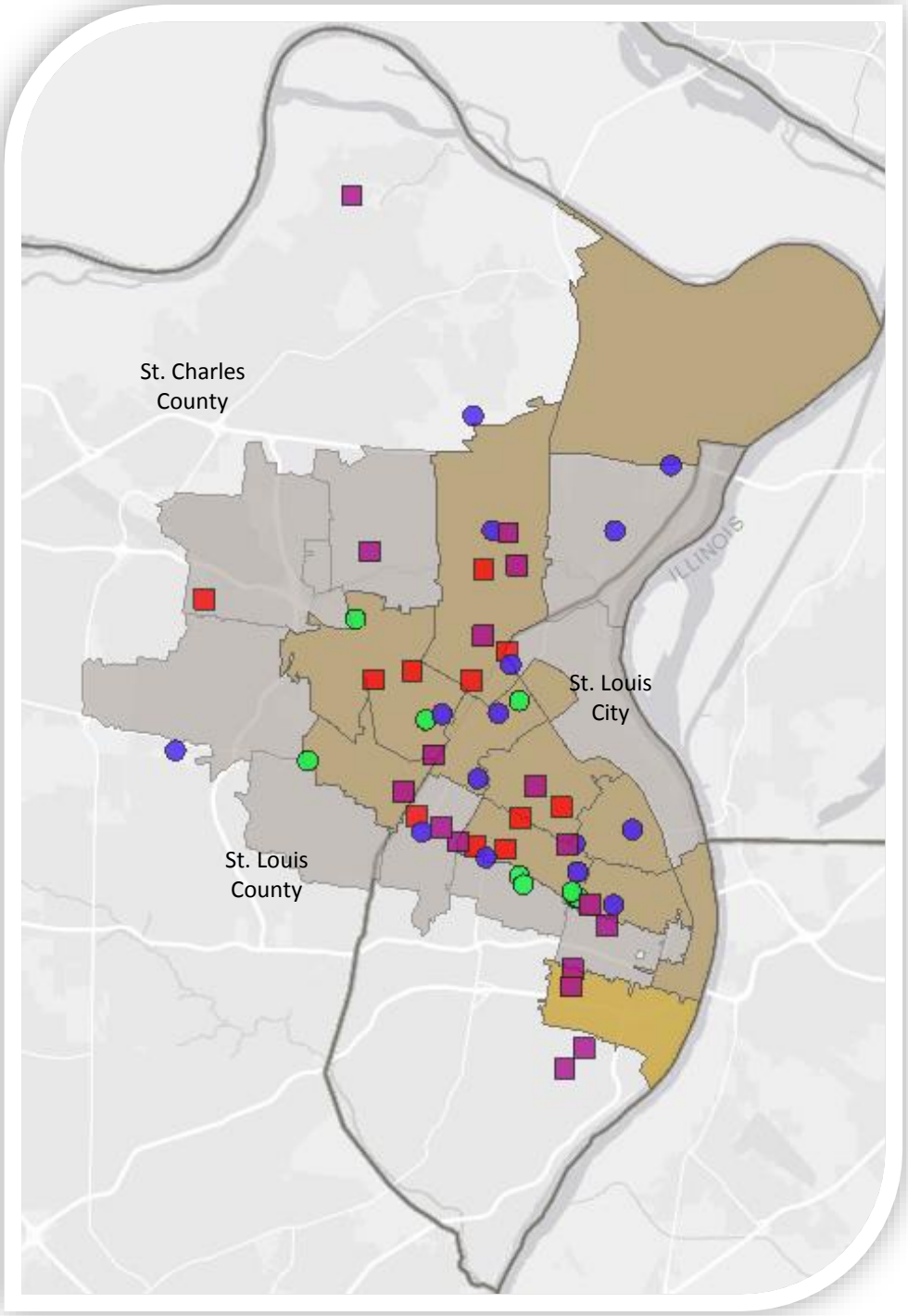
It has opened up our eyes and our hearts. -Pastor John Smith

There is no greater billboard than the African American Church. -Pastor BT Rice

We need to do this so when people come to our church they can leave saying I am so much better since I lay my burden down. - Pastor Carl Smith

This will change our community if we get involved. -Pastor Rice

Bridges to Care & Recovery Target Geography



Legend

Bridges Churches Clusters 1-4

- Cluster 1
- Cluster 2
- Cluster 3
- Cluster 4

High Infant Mortality Zip Codes (FLOURISH STL)

Promise Zone Zip Codes

Bridges “Project PREP” Expansion

(Perinatal Resources for Engaging Pregnant Women)

- Screening for depression for currently pregnant or new mothers
- Care coordination to connect to primary care for prenatal care, behavioral health services, or other social supports
- Utilizing the Pastor’s Wives (First Ladies) to provide Peer Support/Mentoring and Peer Support Groups for women in need of additional support

Emerging Initiative – Missouri Child Psychiatry Access Project (MoCPAP)

- Project began January 1, 2018
- Based on successful models in Massachusetts and Colorado
- Seeks to address the region's challenges to access child psychiatric services by supporting pediatricians to treat children with mild to moderate BH issues, to enhance available time of psychiatrists to serve children with more serious diagnosis
- Support offered to physicians through telephonic consultation and referral and coordination
- BHN partnering with Behavioral Health Response, NAMI St. Louis, University of MO –Columbia
- Three year grant received from Missouri Foundation for Health; BHN will serve as the project manager in the Eastern Region through subcontract with Mizzou, with a goal of expanding to central Missouri in year 2

Additional Regional Planning Initiatives Coordinated by BHN

Initiative	Funder	Client population
Bridging the Gap Between Youth and Adult Behavioral Health (BH) Care	2014 Project funded by the MFH	Transition Age Youth
Access to Care BH Data; Community BH Needs Assessments and Service Inventories	Largely Unfunded (some support from St. Louis Mental Health Board and St. Louis Region System of Care) – with Regional Health Commission, Health Departments and other community partners	Regional data collection and analysis across the life course for the safety-net population
Eastern Region Co-occurring Developmental Disability/Behavioral Health (DD/BH) Committee	Unfunded – with DMH regional offices	Clients throughout life course with DD/BH
Accountable Health Communities	Unfunded - with Missouri Primary Care Association (MPCA), Integrated Health Network (IHN), BHN, United Way	High Risk children and adults presenting to hospital or community providers with health and social determinants of health needs
Regional Housing Collaborative	DMH – with Gateway Housing First	Adults with BH challenges in need of housing and supports to maintain housing
Crisis Intervention Team (CIT) Reporting	St. Louis County Police Department (grantee) via Bureau of Justice Assistance	Infrastructure development for data sharing re: persons engaged with police officers (CIT)

Future Challenges for BHN

- Continue to maximize funding opportunities. We can't solely depend on the generosity of grants—they don't last.
- Systematize what is working so these don't remain projects that help a small group of people or a special population, but rather help all in need of services.
  - We have to use what we learn to impact long-term system change (e.g. through billing service codes)
- Identify a way to maintain the funds that are currently available and those that were guaranteed, to support the Eastern Region in the face of a potential state budget shortfall.

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