Integrating Primary and Behavioral Healthcare Through the Lens of Prevention
New Orleans, Louisiana
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Department of Human Services
DISCLOSURES

Under the Accreditation Council for Continuing Medical Education guidelines, I, Doug Thomas, have no relevant relationships or affiliations with commercial interests to disclose.

I will mention some providers and subcontractors that work with us in Utah but I have no relevant relationships or affiliations with those commercial interests.
“At first people refuse to believe that a strange new thing can be done, then they begin to hope it can be done, then they see it can be done—then it is done and all the world wonders why it was not done centuries before.”

(Children’s author Frances Hodgson Burnett (1849–1924), quoted in McGorry & Jackson, 1999, p. 466)
Congratulations on Practicing Preventive Vehicle Medicine!

Hello Doug,

Thank you for setting aside the time to bring your baby—whoops, meant to say vehicle—to Tim Dahle Nissan Southtowne for a checkup. Utilizing preventive medicine now can save you money down the road. We are very pleased you are taking the steps necessary to ensure that your vehicle lives a long and happy life.

Keep up the great work!

Thank you,

Tim Dahle Nissan Southtowne

Parents, are your children receiving the Dental Care they need?

Increased use of preventive dental services can improve the health of infants, children, and adolescents.

For more information about this report, visit: www.cdc.gov/childpreventiveservices
Initial Exposure to Prevention
Tooele Interagency Prevention Professionals (TIPP)

- Communities that Care Model
- Integrated Prevention Effort for the Entire County
Integration: Response to Local Issues

Prevent Child Abuse Utah

REQUEST our services

REGISTER for an event

Prevent Child Abuse Utah is making a real difference.

WATCH OUR VIDEO ➤

Because prevention matters...

SCHOOL DISTRICT’S “MOST DON’T” PREVENTION CAMPAIGN
Transition from a Local Provider to a State Government Perspective

- State Treatment Funds
- State Prevention Funds
- Federal Mental Health Block Grant Funds
- Federal Substance Abuse Prevention and Treatment (SAPT) Block Grant Funds
- Discretionary Federal Grant Funds
- Other Initiatives/Grants

...but don’t cross the streams!
Enlarging Our Funding Perspective

- Local Businesses
- Banks- “Community Development” under the Community Reinvestment Act (CRA)
- Hospitals- Community Health Needs Assessment (CRA like)
- Foundations

- Federal/State/County/City Government
- Community Development Block Grant
- Social Services Block Grant
- Discretionary Grants

* Braid not Blend
Don’t Cross the Streams
Braiding vs Blending

Braiding

Blending

THE PRETTIEST NEW BRAIDS FOR 2016

Energy Boosting Morning Green Smoothie
Promoting Mental Health and Preventing Mental Illness
Promote Early Identification of Mental Health Needs and Access to Quality Services

- As mental illness prevention efforts begin, the focus is on young people because...

- **50% of all mental, emotional, and behavioral disorders start by age 14**

- **75% start by age 24.**

“Preventing Mental, Emotional, and Behavioral Disorders Among Young People”, APA (March 2011)
Target Children And Youth!(But have strategies that address the whole population)

Evidence from surveys

First Drug Use (number of initiates)

Infant  Child  Teen  Adult  Older Adult
### Similar Risk Factors between SUD and MI/Suicide

#### Substance Use
- Availability of alcohol/other drugs
- Economic deprivation
- Family history
- Favorable parental attitudes and involvement in problem behaviors
- Lack of commitment to school
- Friends who engage in the problem behavior
- Early and persistent antisocial behavior
- Constitutional factors

#### Mental Illness/Suicide
- Alcohol and other substance use
- No job or financial problems
- Family history of suicide
- History of trauma or abuse
- Relational or social loss
- Exposure to and influence of others who have died by suicide
- Impulsive and/or aggressive tendencies
- History of trauma or abuse

Acknowledge the Continuum

Institute of Medicine
Continuum of Care

Source: Preventing Mental, Emotional, and Behavioral Disorders Among Young People, 2009
Thoughts...

- Transform Existing Contracts/Services to take a Public Health Approach to Mental Health Promotion & Mental Illness Prevention
- Build on Existing Infrastructure created by SUD Prevention System
- Avoid Duplication
- Leverage Strategic Partnerships
- Use Evidence Based Practices
The Strategic Prevention Framework

Assessment

Evaluation

Implementation

Planning

Capacity

Sustainability and Cultural Competence
Prevention By Design

- Promoting mental health and preventing mental illness;
- Supporting community-based living for individuals and family members affected by mental illness;
- Advocate for individuals and families to ensure the consumers’ voice is heard when developing services, policies and laws;
- Educate the professional community and the public with regard to evidence-based prevention practices and the positive outcomes they produce for individuals and families impacted by mental illness.
POPULATION TO BE SERVED

- **Universal:** General public with priority to children and youth, ages 0 to 21

- **Selective:** Groups with higher risk of experiencing mental illness, with priority to those with exposure to trauma; chronic medical conditions, hereditary and environmental factors

- **Indicated:** Individuals who are experiencing early symptoms of mental illness (but do not have a DSM IV diagnosis) with problems with their primary support group, whose developmental, social, emotional, physical, educational/occupational functioning is disrupted. With priority to those who have experienced physical or sexual abuse, previous suicide attempt(s) or traumatic events, including veterans and their families.

- **Treatment:** Individuals receiving behavioral health care services.

- **Wellness/Recovery:** Individuals and families experiencing healthy living are effectively dealing with life’s challenges and are meaningfully engaged in their community.
Assessment and Capacity

- Needs and Resources Assessment: Develop a working relationship with the existing Epidemiology/Outcomes (EPI) workgroup, and all other coalitions and prevention providers.

- Use Existing Data

- Utilize the Communities that Care (CTC) operating system as found at: http://www.communitiesthatcare.net to assess the needs of the state.

- Within 2 weeks of execution of this contract the Contractor shall complete the training on the CTC Phase 3 module from DSAMH Substance Abuse Prevention staff.
Alcohol Use in Relation to Need for Mental Health Treatment (2011):

Needs Mental Health Treatment was estimated using the K6 Scale that was developed with support from the National Center for Health Statistics for use in the National Health Interview Survey.

- 0-6 Range on K6 Scale
- 7-12 Range on K6 Scale
- 13+ (Students Needing Mental Health Treatment) on K6 Scale
I have received the TRAINING I need to engage and assist those with suicidal desire and/or intent.

State of Utah Workforce Survey

- Completely Agree: 0.00%
- Agree: 5.00%
- Don't Know: 10.00%
- Disagree: 20.00%
- Completely...: 25.00%
I have received the following Suicide Prevention Training (mark all that apply):

State of Utah Workforce Survey

- ASIST
- CSSRS
- MHFA
- Mass Youth...
- None
- Postvention
- QPR
- Safe Talk
- Other
Assessment and Capacity

- Submit a written report to the DHS/DSAMH Program Administrator approved by the EPI workgroup detailing the needs assessment within 6 months of the execution of the contract.

- The Contractor shall complete the training on the CTC Phase 4...“Create a Community Action Plan”... prior to commencing Step B-Plan Development.
Plan Development

- Utilize CTC Phase 4 to develop the State of Utah Mental Health Promotion and Mental Illness Prevention Plan (PLAN), including suicide prevention.

- This PLAN will be for the implementation of the services to be provided by the Contractor and its subcontractors in Year 2 and 3 of the Contract. This PLAN shall follow the CTC model. The Contractor shall subcontract with existing community service providers such as Local Health Departments, Local Mental Health and Substance Abuse Authorities, Federally Qualified Health Centers and other qualified providers as approved by the DHS/DSAMH Program Administrator.
Plan Implementation

- Upon approval of the PLAN by DHS/DSAMH Program Administrator, implement the PLAN by subcontracting no less than with existing community service providers such as Local Health Departments, Local Mental Health and Substance Abuse Authorities, Federally Qualified Health Centers and other qualified providers as approved by the DHS/DSAMH Program Administrator.
Healthcare Partnerships: The Fruit of our Labors

- Intermountain Healthcare Care Process Model

PREVENTION AT INTERMOUNTAIN AND IN UTAH

With the right tools and resources in place, we believe we can help prevent suicide among our patients and in our population. This section explains Intermountain’s recommendations to help clinics focus on prevention — and summarizes broader public efforts to improve services and raise awareness.

At Intermountain clinics

Establish and communicate a clinic focus on mental health and suicide prevention:
- Discuss suicide screening and treatment at regular staff trainings
- Review patient suicide cases with the team to determine what could be improved
- Establish open communication with patients about suicide risk
- Seek to reduce the factors that increase suicide risk
- Identify and implement protective factors that help strengthen, support, and protect individuals from suicide

https://intermountainhealthcare.org/ext/Dcmnt?ncid=526742474
Within the Utah community

Intermountain is working with the Utah Suicide Prevention Coalition to do the following:

- Promote public awareness that suicide is a preventable public health problem
- Develop broad-based support through public/private partnerships dedicated to implementing and sustaining suicide prevention efforts
- Improve the ability of health providers (including mental health) and first responders to better support individuals who are at risk of suicide
- Develop and promote the adoption of core education and training guidelines on the prevention of suicide and related behaviors by all helping professionals, including graduate and continuing education programs
- Increase access to health and mental health services, prevention programs, and other community resources to better support individuals and families of individuals at risk of suicide
- Develop policy through State Agencies, legislature, and other avenues as possible to promote mental health and prevent mental illness and eliminate suicide
- Promote efforts to decrease the risk of suicides by reducing access to lethal means
- Improve surveillance, data, research and evaluation relevant to suicide prevention
Intermountain Medical Center joins Parents Empowered and Other Community Organizations to Fight the Dangers of Underage Drinking

📅 Apr 26, 2016   ✉️ Media Contact

Parents Empowered — Utah’s statewide campaign that aims to prevent and reduce underage drinking — has taken full advantage of Alcohol Awareness Month in April to spread its message of increasing parental involvement to keep kids safe.

The organization’s campaign includes statewide radio and TV ads and partnerships with the Murray School District and Police Department, as well as Intermountain Medical Center.

The campaign kicked off at the beginning of the month with a press conference at Intermountain Medical Center where Utah’s lieutenant governor and Alcoholic Beverage Control Commission chairman, Murray’s mayor, police chief, and school district superintendent, and Intermountain Medical Center’s administrator spoke about each organization’s initiatives to combat teen drinking.
UNDERAGE DRINKING

RISK OF ALCOHOL ADDICTION BY AGE KIDS BEGIN DRINKING:

13 = 45%
17 = 26%
21 = 7%
Behavioral Health Networks

1. Patient advocate in the hospital
2. Access to care within seven days
3. Pre-paid services in a coordinated network
### Behavioral Health Networks

#### Existing Service Areas
- Bear River Valley
- Cache Valley
- Central Region
- Dixie Regional
- McKay Dee Hospital
- Sanpete Valley
- Sevier Valley
- Utah Valley

#### Proposed Expansions
- Cassia Regional
- Central Region
- Davis County
- Heber Valley
- Park City
- Pediatrics
- Valley View

85% of self-pay patients received follow-up care in seven days compared to 75% of commercially insured patients.
A pediatric expansion would be built as a collaboration between Intermountain, the Utah Division of Substance Abuse and Mental Health, the Local Mental Health Authorities, and the State Board of Education.
Workforce Development

• In a survey conducted by the Utah Division of Substance Abuse and Mental Health, the majority of general practitioners self-rated their competency with childhood mood disorders and suicidality as very low.

• Workforce development efforts would be a collaboration between the Utah Division of Substance Abuse and Mental Health, and the State Board of Education.

• Workforce development would include:
  • Intermountain providers
  • Private providers
  • Educational personnel
  • Other youth service personnel

• Efforts may include the use of telehealth.
Public Awareness

• DSAMH/DOH/USOE/Intermountain Healthcare and other Healthcare Organizations
• Public health messaging efforts are focused on gun safety
• There is a collective goal and an infrastructure to improve messaging that promotes understanding signs and symptoms
Public Awareness
Safe use, storage, and disposal of prescription medications

• Increase the percentage of people who believe that prescription opioids have “definite” potential for abuse or addiction

• Increase the percentage of people exposed to ads on the safe use, storage and disposal of prescription medications

• Increase the volume of medications disposed of in drop boxes
Prescription Drop Boxes

- 21 Intermountain community pharmacies have installed prescription drop box receptacles
- 6,404 pounds of medication have been disposed of

35% of individuals surveyed in 2016 used drop boxes as compared to 16% in 2011
Naloxone Rescue Kits

Funding was provided to Utah Naloxone from various sources to distribute Naloxone rescue kits to underserved community providers and members.

Additional funds will be available in 2017.
This critical mass of prevention science is converging with growing interest in prevention across health care, education, child psychiatry, child welfare, and juvenile justice.

Together, we stand at the threshold of a new age of prevention. The challenge now is to mobilize across disciplines and communities to unleash the power of prevention on a nationwide scale.
We propose a grand challenge that will advance the policies, programs, funding, and workforce preparation needed to promote behavioral health and prevent behavioral health problems among all young people—including those at greatest disadvantage or risk, from birth through age 24.

Within a decade, we can reduce the incidence and prevalence of behavioral health problems in this population by 20 percent from current levels through widespread policies and programs that will serve millions and save billions. Prevention is the best investment we can make, and the time to make it is now.

AUDENTES FORTUNA IUVAT
For more information about data, programs and services please visit: dsamh.utah.gov

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Department of Human Services