

CASE STUDY

Overview

Many rural counties are experiencing high rates of suicide, substance abuse, and other behavioral health issues, compounded by the fact that there is often a shortage of mental health practitioners in those areas. That is why, via a grant from the Montana Healthcare Foundation, Livingston (Mont.) HealthCare has developed an initiative to integrate their behavioral health and physical health services. Under this program, patients can address physical and mental health concerns at the same location.

"We started by hiring a licensed clinical social worker for our clinic," says Deb Anczak, clinic services/performance improvement director. "The social worker is embedded in our primary care practice so our practitioners can collaborate and refer patients back and forth. Not having to go to a separate facility helps diminish the stigma sometimes associated with seeking mental health services."

This approach allows patients to be easily referred to the social worker if necessary, with consults scheduled (or sometimes taking place) the same day. Patients that require a higher level of behavioral health care can be referred to the psychiatrists, who are also located within the primary care clinic. The social worker also serves as a liaison between primary care and psychiatry.

Livingston HealthCare's initiative also includes universal behavioral health screenings for primary care patients, the development of treatment protocols to provide medically assisted treatment for people with chemical dependency, crisis response

training for emergency department staff so they can treat behavioral health patients effectively, and monthly conferences about complex patients.

Impact

The initiative has been in place for about six months, so it is still a work in progress. However, staff has already seen some promising results.

"I collect data on a monthly basis, and we're already seeing positive impact on patients," says Sonya Schwartzer, LCSW. "There has been a reduction in ER visits from our behavioral health patients, and they're reporting lower levels of depression and anxiety. There's also been growth in the number of patients coming to us for

mental health services, and the primary care physicians' commitment to screening patients. Before this model, primary care physicians weren't always screening because we didn't have a formal methodology in place."

Before the model was in place, Livingston's screening rate was just 3 percent—only one practitioner was screening regularly. After only three months, the rate was measured at 20 percent. Livingston HealthCare is aiming for a 75 percent behavioral health screening rate of all primary care visits.

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Lessons Learned

"Launching this model really opened our eyes to the gaps in patient care," Anczak says. "We learned lessons about treating the whole patient, looking at

all pieces, how they impact each other, how that all comes together and how to manage it all.”

The organization also realized that to increase behavioral health screenings and the care and treatment of behavioral health concerns, they needed to offer focused education sessions with primary care physicians as well as office staff, to ensure that they were comfortable and confident with the process. Sessions were held via seminars, grand rounds, and personal conversations, and were facilitated by psychiatrists and the social worker.


Future Goals

The next steps will be to improve behavioral health services through additional collaboration with Livingston HealthCare’s community partners around a variety of behavioral needs. For example, the

organization has started working with its partners to coordinate care and social services at local schools and within the community. In addition, they plan to partner with a federally qualified clinic in their community to collaborate on family practice services and social services case management. Because of the early successes of Behavioral Health Integration under the Montana Healthcare Foundation grant, Livingston’s model is being implemented at two other sites in the state of Montana.

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