



Closing the Gap in Community Mental Health Care

NC IOM MH SA subgroup

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Overview



- Overview of Healthy IDEAS for Depression-NC Initiative
- Implementation to date
- Policy recommendations for closing the gap in MH access for adults served by community aging services



National initiatives

- Improve access to home & community services & supports
- Improve access to evidence-based chronic care interventions
- Emphasis on self-management



Introduction

- Healthy IDEAS is an evidence based practice that improves outcomes of older adults and caregivers with depressive when used by non-expert professionals and non-professionals case/care managers



Depression Management Programs

- PEARLS-Community Care
- IMPACT-Primary Care
- Healthy IDEAS- Community of Aging Service Providers



HI-NC Initiative (2013-2016)

- Implement HI in 9-15 NC counties-
initial dissemination to increase
access to a minimal standard of care
- Focus on existing regional
state/regional funding resources for
continued dissemination and
sustainability



HI Implementation Process

- Recruitment/Readiness Assessment
- Pre-implementation TA (3-9 months)
- Live two-day didactic and skill at or near the agency site
- Post-training TA



HI Steps

1. Assess using valid, reliable *screen* consistent to primary and acute care settings
2. Educate about what symptoms might be and what they might do about them
3. Linkage and referral
4. Behavioral Activation (CBT) and/or local LME/MCO and/or Primary Care Practitioner and/ or Self-management
5. Follow-up & Re-assessment



Key steps for fidelity

- Screen (PHQ or GDS)
- Educate
- Intervene (Behavioral Activation with 3 phone calls and 3 visits)
- Linkage to Primary Care or LME/MCO
- Re-screen



Depressive symptoms

■ Mild Depressive Symptoms

- Functional status: Some difficulty in continuing with ordinary work & social activities, but will probably not cease to function completely

■ Moderate to Severe:

- Functional status: Unlikely to continue with social, work or household activities



Outcomes to date

- Agencies trained 18 agencies in 16 counties (DSS, Senior Citizens, AAAs, community based social services)
- Staff trained 89 (SW, PLN/RN, Care/Case managers, Family Caregiver Support Specialist)
- Depression screens administered 1,149
- Positive screens 85
- Incidence 7.4%

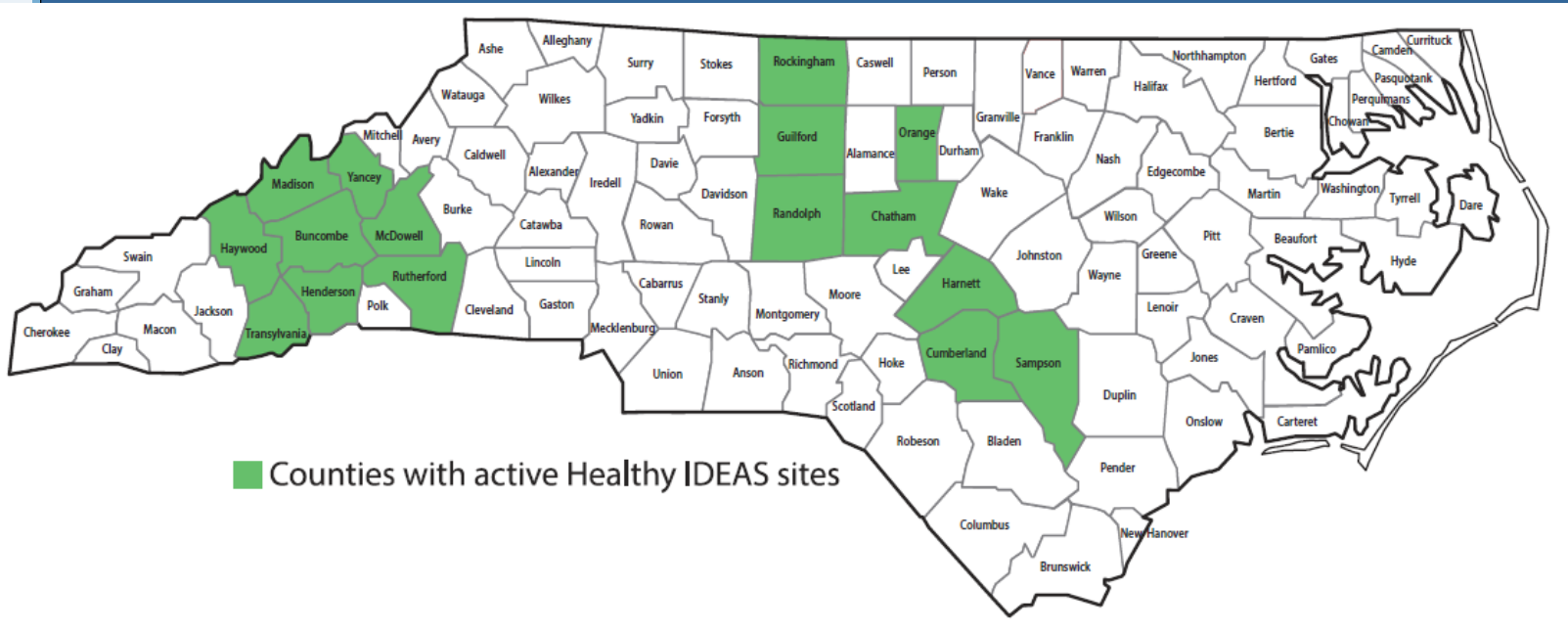


Healthy IDEAS is growing in NC

- ☑ Haywood
- ☑ Chatham
- ☑ Orange
- ☑ Buncombe
- ☑ Henderson
- ☑ Madison
- ☑ Transylvania
- ☑ Yancey
- ☑ Guilford
- ☑ Cumberland
- ☑ Harnett
- ☑ Sampson
- ☑ Rutherford
- ☑ Rockingham
- ☑ Randolph
- ☑ McDowell
- ☑ Craven



Healthy IDEAS is Growing in NC!





Address Workforce Training

-States are enhancing the ability of their systems to educate, identify, refer and provide appropriate services to older adults, DD and those at risk in non-expert, non-traditional workforce

- Living in Community

- Adult Care Homes

- Nursing Homes



Workforce training

- Assess existing state-wide training resources
- How do we meet the learning needs of a wide swath of consumers and providers?
- Learners with varying needs for information; knowledge and “hands on skills”



Policy Recommendations

- Integration of MH & Aging systems
- Record system that crosses care settings and service providers and follows individual from cradle to grave
- Adequate numbers of trained professionals and non-experts to assure a high quality of care to support a higher quality of life



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