

Getting Started in Population Health in Behavioral Health Settings

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Objectives

- ▶ Define a horizontal and vertical population health approach
- ▶ Review population health examples
- ▶ Discuss opportunities for implementation

Introduce yourself

- ▶ Name
- ▶ Organization
- ▶ Role

Question

Now that Population Health has been defined, how do you see it functioning in behavioral health settings?

Population Based Care-The Basis for Integration (Horizontal)

Horizontal-Deliver large volume of psychosocial services that improve health of the entire population

- Emphasis on early identification & prevention
- Available to a high percentage of population
- Provide triage and clinical services in stepped care approach
- Shift approaches from providing visit-based care for individuals to managing the physical, social, emotional, and mental needs of all the clients in case loads
- Balanced emphasis on who is and is not accessing service

Clinical Modality

- Basic Problem Solving
- Motivational Interviewing
- Skill development
- Use of coping skills for psychological stressors

Horizontal Population Health Integration Examples

Prevention and Identification

- Depression screening, substance use screening
- Adult wellness, adolescent and child visits
- Provides care and intervention to couples and families
- Teaches classes on stress management, healthy lifestyle, communication, parenting classes, sleep hygiene
- Provides Trauma Informed Care

Acute care

- Domestic Violence
- Suicidal or homicidal ideation
- Psychosis
- Child abuse, sexual assault, elder abuse

Question

1. What are you currently doing that might fall into “horizontal” population health approaches?
2. What can you implement to improve the health of the entire population?

Population Based Care- The Basis for Integration (Vertical)

Vertical-Deliver targeted services for high frequency behavioral health conditions or complex behavioral sub populations.

- Provide targeted assessments
- Employ EB intervention and treatment for acute, chronic and preventative support
- Coordinated strategies with medical teams (example: a client with schizophrenia that has diabetes and rheumatoid arthritis)
- Goal is to attend to varying levels of care to amplify initial response, reduce acuity, and improve overall functionality

*Most integrated systems have a combination of horizontal and vertical approaches

Vertical Integration Examples

Targeted Approaches

- Dementia-Cognitive screening and assessment, competency evaluations, and comprehensive care giver planning and support
- Opioid Use Disorder-Medication Assisted Treatment with support groups and skill building
- Schizophrenia- Wrap around case management, comprehensive care plan and coordination of care
- Chronic Pain-Comprehensive biopsychosocial assessment, self-management support group, Evidence Based treatment of comorbid mental health and SUD conditions
- Depression/Anxiety-Comprehensive Assessment and Evidence Based Treatment protocol, peer support group and care management

Options for delivery:

- 1:1 in clinic, telephone, virtual, classes, group visits, peer led groups and workshops

Question

What sub populations or high frequency conditions could you have a defined, comprehensive and evidence-based approach for?

Leaving in Action

Thinking of your population of focus...



Does it make more sense to use a horizontal or vertical population approach to start?



How could you track the progress of your population in a systematic way?



What evidence based approaches need to be included?