

BEHAVIORAL HEALTH INTEGRATION IN THE UNIVERSITY SETTING

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Florida Academic Healthcare Patient Safety Organization

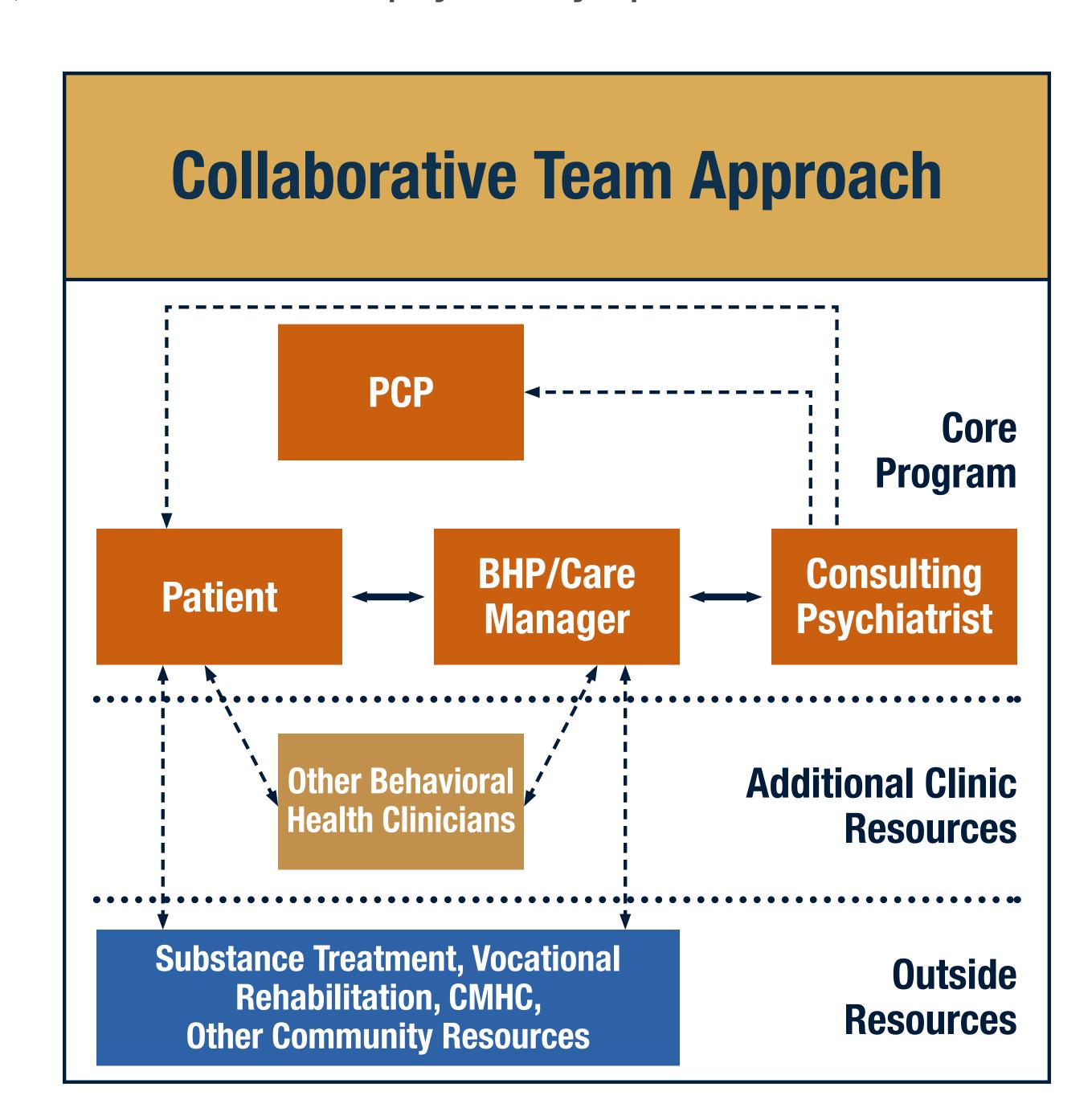


Background of the FAH PSO

The Florida Academic Healthcare Patient Safety Organization (FAH PSO) is an AHRQ federally listed PSO under the Patient Safety and Quality Improvement Act. The FAH PSO represents six of Florida's medical universities including FAU, FIU, FSU, UCF, UF and USF. These institutions and their healthcare providers convened to improve patient safety and behavioral healthcare for all its patients.

What is Behavioral Health Integration?

It is a broad term for the care that results from a practice team of primary care and behavioral health clinicians using a systematic and cost-effective approach to patient-centered care that may include mental health and substance abuse conditions, life stressors and crises, and stress-related physical symptoms.



Aim of the FAH PSO Behavioral Health Integration Task Force

Florida's state universities gathered subject matter experts in the fields of Medicine, Psychiatry, Psychology, Neuropsychology, Student Health, and Counseling to develop an integrated model of care to meet students' increasing behavioral health needs with the resources available.

Patient Demand

Since 2008 there has been a 48% increase in the number of students seeking counseling at these universities. From 2015-2016 there were 185,900 individual/group counseling sessions at all state universities. Emergency counseling visits totaled over 9,000. Suicide is the second leading cause of death for Americans ages 15 to 24. The rate of suicide in Florida has increased 24% over the last ten years. 45% of patients have had contact with a primary care provider within a month prior to suicide.

Addressing Demand for Counselors	
Florida Agricultural & Mechanical University	1:1,923
Florida Atlantic University	1:2,014
Florida Gulf Coast University	1:1,324
Florida International University	1:2,449
Florida Polytechnic University	1:618
Florida State University	1:1,908
New College of Florida	1:1,182
University of Central Florida	1:1,828
University of Florida	1:1,660
University of North Florida	1:1,508
University of South Florida	1:2,044
University of South Florida – St. Petersburg	1:1,900
University of West Florida	1:1,625
Source: Data as submitted by SUS institutions (February 2017)	

Description

The Behavioral Health Integration Task Force of the FAH PSO generated recommendations for the identification and management of behavioral healthcare, with a focus on the integration of multiple services and providers within the university setting and surrounding area providers. The goal being to develop a plan and tools to foster a supportive environment for successful treatment, including tools for:

- Identification and screening of prospective behavioral health patients through use of PHQ-2, PHQ-9, and Columbia-Suicide Severity Rating scale;
- Education and training for providers and staff likely to encounter behavioral health patients;
- Coordination of resources across campus and local community;
- Case management of behavioral health patients across multiple resource settings;
- Assessment and screening of behavioral health concerns in all clinical settings;
- Sharing of patient health information among treating services, and the documentation of this information in the medical record; and
- Sexual and gender identity sensitivities and the needs of that population, including a recognition of the stigmas associated with that underserved patient population.

Actions Taken by the FAH PSO Participants

- Creation of a behavioral health task force including stakeholders in all areas of patient care;
- Measured the growing demand for and severity of behavioral healthcare;
- Assessed resources already available to providers;
- Provided support for implementation of integrated collaborative care model; and
- Developed and published recommendations and tools for behavioral health integration.

Outcome and Lessons Learned

Each institution is moving toward integrated behavioral healthcare with the individual resources available to increase access to care for our university patient population. Each university has participated in publishing consensus recommendations to be utilized across each of their universities and that has been made publicly available to any institutions that would like to adapt and implement the recommendations. This publication includes tools for increased likelihood of screening and quicker access to necessary care. It can be found at www.flbog.sip.ufl.edu.

