BEHAVIORAL HEALTH INTEGRATION IN THE UNIVERSITY SETTING

Michael Deichen, MD, MPH, Executive Director, UCF Student Health Services | **Amy B. Magnuson, Ph.D, RD, LD/N**, Director, FSU University Health Services
Joseph A. Puccio, MD, FAAP, Executive and Medical Director, USF Student Health Services | **Francys C. Martin, Esq., LHRM**, Florida Academic Healthcare Patient Safety Organization
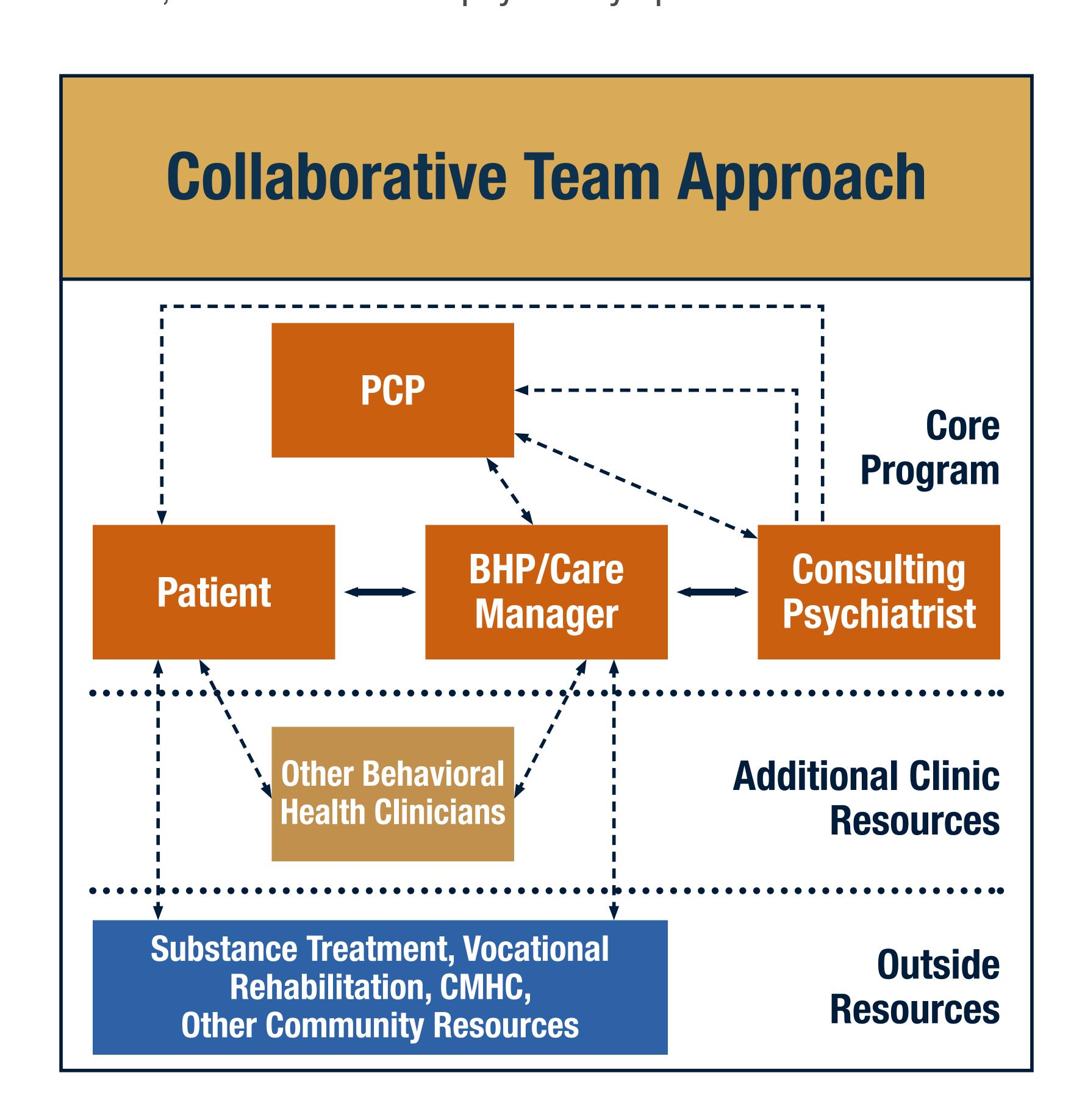
Background of the FAH PSO

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.

Collaborative Team Approach

Aim of the FAH PSO Behavioral Health 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

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COUNSELING CENTER UTILIZATION			
	# of Sessions 2014 - 2015	# of Sessions 2015 - 2016	% increase
FAU	11,631	11,205	-4%
FIU	19,208	23,537	23%
FSU	15,669	19,249	23%
UCF	23,945	28,455	19%
UF	39,527	41,886	6%
USF	15,898	17,565	10%
USF – St. Petersburg	1,674	1,737	4%

EMERGENCY VISITS AND HOSPITALIZATIONS				
	Number of Emergency Visits 2014 - 2015	2015 - 2016	Number of Hospitalizations 2014 - 2015	2015 - 2016
FAU	222	317	22	29
FIU	41	245	25	26
FSU	1,021	1,105	70	101
UCF	1,636	2,598	40	139
UF	220	3,135	57	62
USF	392	891	22	51
USF – St. Petersburg	23	41	*	*

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 associating 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;
- 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**.

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CONSENSUS RECOMMENDATIONS of the Florida Academic Healthcare Patient Safety Organization's Behavioral Health Integration Task Force