OMH Physical Health-Mental Health Integration Grant

The Long Island Home
d/b/a South Oaks Hospital

Project Partners:
Eastern Long Island Hospital (ELIH)
Town of Southold
The Mental Health Association in Suffolk County (MHA)
The Long Island Home (LIH), a non profit organization located in Amityville, NY, operates South Oaks Hospital and Broadlawn Manor Nursing Care and Rehabilitation Center.

LIH was formed in 1882 to provide mental health services to the region.

LIH is the lead agency for this grant.

LIH sought well-established partners to carry out the activities and objectives of the grant.
Demographics

- New York State’s 2015 Study (New York State Department for the Aging) forecasts a significant growth in the older adult population.

- In Suffolk County, the 60+ population is expected to increase by 37% with the 85+ cohort rising by 74%.

- A Suffolk County Senior Citizens Legislative Task Force was formed to assess the needs of older adults in the County because of the growing population.

- The Geriatric Mental Health Committee in Suffolk County was formed to examine and work to address gaps in the service delivery system.
Demographics

- U.S. Census data from 2000
- Southold Town is the Eastern most Township on the North Fork of Long Island.
  Total year round population: 20,599
  65 years and older: 4,756 or 23.1%
- Shelter Island Town is located between the north and South Forks of Long Island in Peconic Bay
  Total year round population: 2,228
  65 years and older: 638 or 28.6%
Mental Health Needs

- Dr. Peter Chernack, Adelphi University School of Social Work, was contracted to conduct a study to identify and understand specific barriers to geriatric mental health care in Suffolk County.

- **Barriers most universally identified included:**
  - Limited mental health programs for older adults
  - Limited transportation to mental health programs
  - Physical and Social isolation of older adults

- **Additional themes that emerged during the focus groups included:**
  - Poor medical management of mental health problems
  - Stigma

- **Identification of needed services included:**
  - Psychiatrists/practitioners to do home visits
  - Integration of health and mental health services
Meeting Needs

- Most older adults regularly see their Primary Care Physician (PCP) for physical ailments, but not mental health concerns
- Routine screening for mental health issues in PCP settings is nearly non-existent
- By integrating a Mental Health Practitioner in a PCP’s office, both objectives can be accomplished.
- Individuals requiring other medical, mental health, and community services can be more readily identified through integration and education in various settings
Challenges/Lessons Learned

- PCP Resistance to screening process
- Lack of outpatient psychiatry on the North Fork
- Limited outpatient mental health practitioners (office accessibility, insurance)
- Stigma
Moving Forward

- Education and outreach
- Training healthcare staff to recognize symptoms of mental health disorders
- Improving access to mental health services on the North Fork of Long Island by integrating mental health staff
- Building capacity for mobile mental health services
- Creating a healthcare consortium—H.I.S.S.—Health Issues and Services for Seniors
Screening Data

- Screenings began on 3/21/08 at East End Geriatric and Adult Medicine – Geriatrician PCP Office

- As of 8/31/08:
  - 411 Screenings (399 in the Physician office, 9 in home, 3 other site)
  - 41 Patient assessments (33 in home, 6 in Mental Health Practitioners office, 2 other site)
  - 19 Patients refused further assessment.
Steps taken

- Mental Health Integration and PHQ-9 screening of patients at the East End Geriatric and Adult Medicine practice
- Mental Health Integration at Town of Southold Senior Center to provide support/education
- Integration of the Mental Health Professional at ELIH as resource for information, referral, screening, assessment, linkage and follow-up
- Established protocol to provide PCPs with telephone consultation by Board Certified Geriatric Psychiatrists
More steps taken

- Community education through the Senior Wellness Series/Support Group
- Professional education through monthly HISS meetings
- Seminar series on practice-building for mental health professionals
- Creation of a Geriatric Center of Excellence at ELIH to serve seniors healthcare needs.
Steps to be taken...

- Develop integration relationship with local nursing home
- Present screening protocol and integration services to other PCP practices to encourage adoption.
- Through practice-building workshop, build increased capacity for mental health treatment
- Connect private practicing mental health professionals with PCPs to encourage co-location and referral initiatives
- Offer telemedicine for psychiatric consultations to PCPs, both through telephone and video conferencing
Mutual Benefits

- Physicians—better able to identify and provide mental health care for patients
- Patients—receive needed care and increase self-awareness
- Local partners—increased cooperation and collaboration to address the growing need for identification and treatment of unmet mental health needs in the senior adult population
Sustainability

- PCP Office routine use of PHQ9 and appropriate early treatment of needs
- Established Geriatric Center of Excellence at ELIH to support future screening, assessment, information and referral services
- “How To” manual and business plan for private practitioners interested in serving older adults’ mental health needs in the community
- Integration of private practitioners (mental health) in PCP offices
- Routine telemedicine services to increase access to geriatric psychiatry expertise