

FRESNO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH - OUTCOMES

PROGRAM TITLE: Integrated Mental Health – Primary Care
PROVIDER: Department of Behavioral Health (DBH), Central California Faculty Medical Group (CCFMG), Community Regional Medical Center (CRMC), and University of California San Francisco Fresno (UCSFF)

PROGRAM DESCRIPTION: The Integrated Mental Health – Primary Care (IMH-PC) program is a collaborative between DBH, CCFMG, CRMC, and UCSFF focused on providing mental health services in the primary care setting. The program is designed to promote, foster, and strengthen relationships between the agencies to ensure coordination with the goal of delivering comprehensive services for positive client physical and mental health wellness. IMH-PC is staffed with 1.2 full-time equivalent (FTE) psychiatrists provided by CCFMG and funded by DBH thru an existing County contract. This includes 2 adult psychiatrists and one child and adolescent psychiatrist. Additionally the IMH-PC team includes the following DBH positions: 2.0 FTE Mental Health Clinicians, 0.2 FTE DBH Clinical Supervisor, and 0.2 FTE Office Assistant. Facility space and ancillary support at the Ambulatory Care Center (ACC) are provided by CRMC. The psychiatrist provides education, evaluation, and treatment as well as treatment recommendations. DBH clinical staff consult directly with medical staff and patients at ACC. The DBH clinical staff provides brief evidence-based outpatient therapy and linkage between IMH-PC and other DBH and regional programs. The staff provides treatment and linkage for clients with mild to moderate impairment while clients with severe impairment are referred to DBH and/or other appropriate resources.

Staffing has been variable over the 2 years of program development. From February to August of 2013, the IMH-PC program only had only 0.3 FTE psychiatrists and one FTE clinician. In August of 2013 the program increased to 1.1 FTE physicians. From January to December of 2014, the program had between 2.5 and 3.0 Mental Health Clinicians, as well as 1.2 FTE psychiatrists. Since December of 2014 the program is back down to 2.0 FTE Clinicians. Although the program has never achieved full staffing (4.0 FTEs and 1.5 FTE psychiatrists), IMH-PC has successfully implemented an abbreviated version of the IMPACT model of integrated mental health care (an evidence based practice for treatment in the primary care center).

The IMH-PC program has been extremely successful in outcomes (see attached) as well as increasing collaboration between its partner organizations. The program has been the focus of a favorable Fresno Bee article, featured in the UCSFF Special Lecture series, two Department of Psychiatry Grand Round presentations, and the Community Medical Center Winter Symposium facility spotlight presentation in Whistler, Canada. The treatment outcomes will be presented at the American Psychiatric Association yearly conference in May 2015 as a research poster, and the educational component of the service has won the Innovations in Education grant from UCSF for 2015-2016.

AGES SERVED: Children TAY Adult Older Adult

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DATES OF OPERATION:

Feb 2013 – Current

DATES OF DATA REPORTING PERIOD:

December 2013 – December 2014

OUTCOME GOAL

Goals for 2014 were to continue to build a positive working relationship between all of the partners; expand services to Women’s and Children’s Health Centers; fully implement IMH-PC program; expand the use of the PHQ-9 (Patient Health Questionnaire-9 for depression); and continue to link clients to the most appropriate services.

The goal for 2015 is to continue to implement the IMPACT model of treatment and for client improvement to be measured by the PHQ-9 and other screening tools like the GAD-7.

- A total of **19,806** PHQ-9s were given to clients in CY 2014 (up from 5,289 in 2013).
- A majority of the PHQ-9s were completed at Family Practice (39%) and Women’s Health (32%).

OUTCOME DATA

| PHQ-9 COMPLETED BY CLINIC | | | | | |
|----------------------------------|--------------------------|------------------------|-----------------------|--------------------------|--------------|
| Month | Internal Medicine | Family Practice | Women’s Health | Children’s Health | Total |
| December | 369 | 168 | 460 | 101 | 1098 |
| January | 341 | 454 | 528 | 130 | 1453 |
| February | 283 | 582 | 547 | 111 | 1523 |
| March | 284 | 525 | 568 | 171 | 1548 |
| April | 300 | 585 | 526 | 151 | 1562 |
| May | 126 | 542 | 563 | 175 | 1406 |
| June | 105 | 594 | 566 | 114 | 1379 |
| July | 208 | 732 | 598 | 149 | 1687 |
| August | 316 | 915 | 499 | 130 | 1860 |
| September | 537 | 908 | 474 | 172 | 2091 |
| October | 642 | 991 | 589 | 185 | 2407 |
| November | 343 | 827 | 476 | 146 | 1792 |
| Total | 3854 | 7823 | 6394 | 1735 | 19806 |
| Percent | 19% | 39% | 32% | 9% | 100% |

Please see Chart A and Chart B

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- A total of 4107 consumers were served in CY 2014 (up from 172 in 2013)
- A total of 1272 consumers were seen for full (30-45 minute) encounters in CY 2014
- A total of 2835 consumers were seen in brief (15-30 minute) consultation in CY 2014
- A majority of consumers were from Internal Medicine (46%), and Family Practice (33%).

| Number of Services Provided by IMH-PC Staff | | | | | |
|---|-------------------|-----------------|-----------------------|--------------------------|-------------|
| Month | Internal Medicine | Family Practice | Women's Health Center | Children's Health Center | Total |
| December | 22 | 8 | 1 | 0 | 31 |
| January | 49 | 18 | 1 | 5 | 73 |
| February | 39 | 21 | 2 | 6 | 68 |
| March | 40 | 19 | 8 | 9 | 76 |
| April | 48 | 25 | 6 | 20 | 99 |
| May | 54 | 30 | 14 | 14 | 112 |
| June | 42 | 33 | 7 | 6 | 88 |
| July | 55 | 53 | 33 | 16 | 157 |
| August | 58 | 68 | 19 | 9 | 154 |
| September | 62 | 48 | 14 | 10 | 134 |
| October | 65 | 47 | 25 | 14 | 151 |
| November | 49 | 49 | 13 | 18 | 129 |
| Total Full | 583 | 419 | 143 | 127 | 1272 |
| Percent | 46% | 33% | 11% | 10% | 100% |
| Total Brief | | | | | 2835 |
| All Visits | | | | | 4107 |

Please see Chart C and Chart D

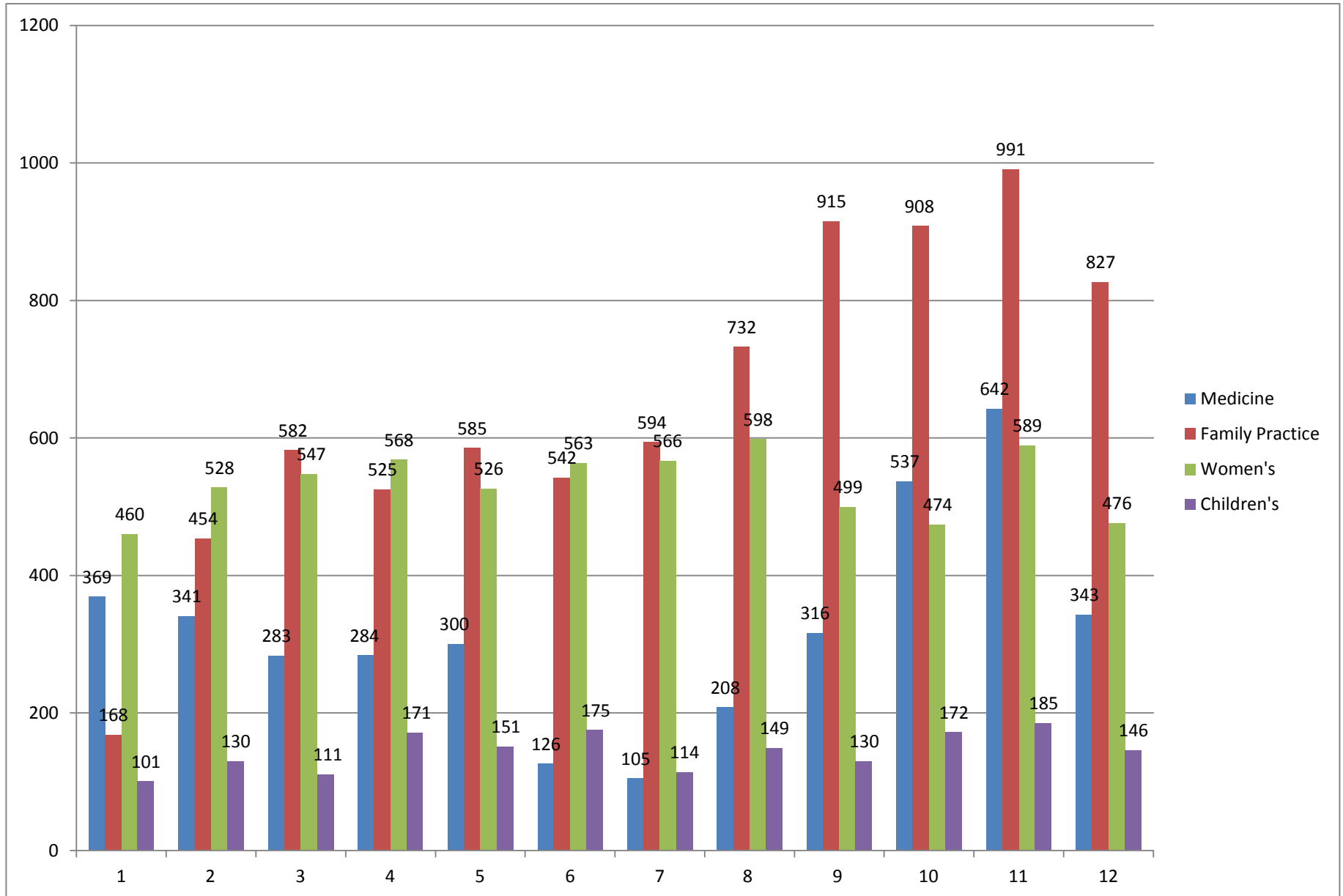
- PHQ-9 scores decreased in all clinics demonstrating improvement in depression scores over the time of the program's operation. These demonstrated both direct and indirect services including education and resources provided in addition to direct patient care by IMH-PC staff.

| PHQ-9 AVERAGE SCORES BY CLINIC | | | | |
|--------------------------------|-------------------|-----------------|----------------|-------------------|
| Month | Internal Medicine | Family Practice | Women's Health | Children's Health |
| December 2013 | 11.55 | 9.68 | 6.02 | 4.77 |
| November 2014 | 9.15 | 5.41 | 5.37 | 4.02 |
| Total decrease | 2.4 | 4.27 | 0.65 | 0.75 |
| Percent decreased | 21% | 44% | 11% | 16% |

Please see Chart E and Chart D

FRESNO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH - OUTCOMES

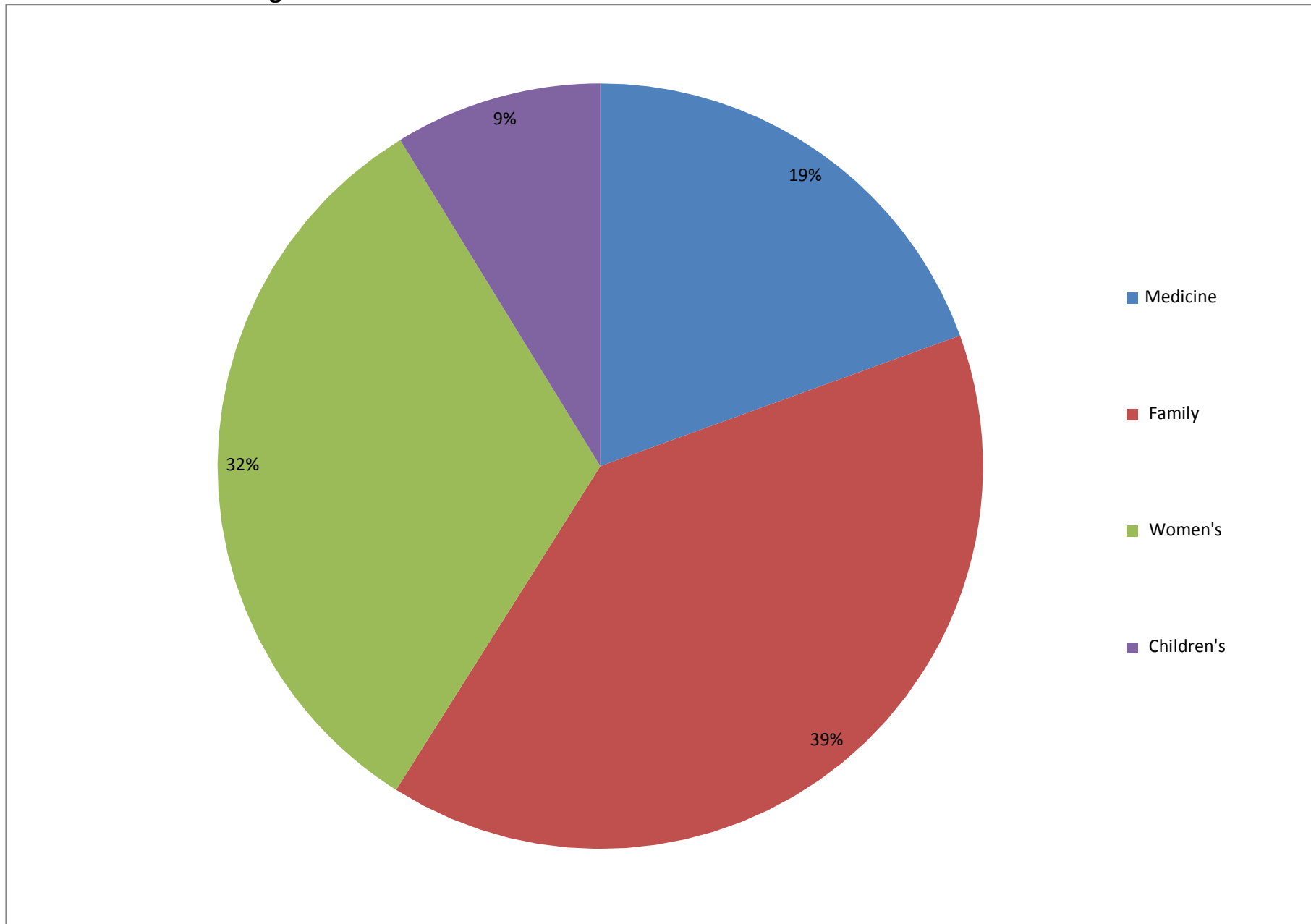
CHART A PHQ-9s COMPLETED BY CLINIC



FRESNO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH - OUTCOMES

CHART B

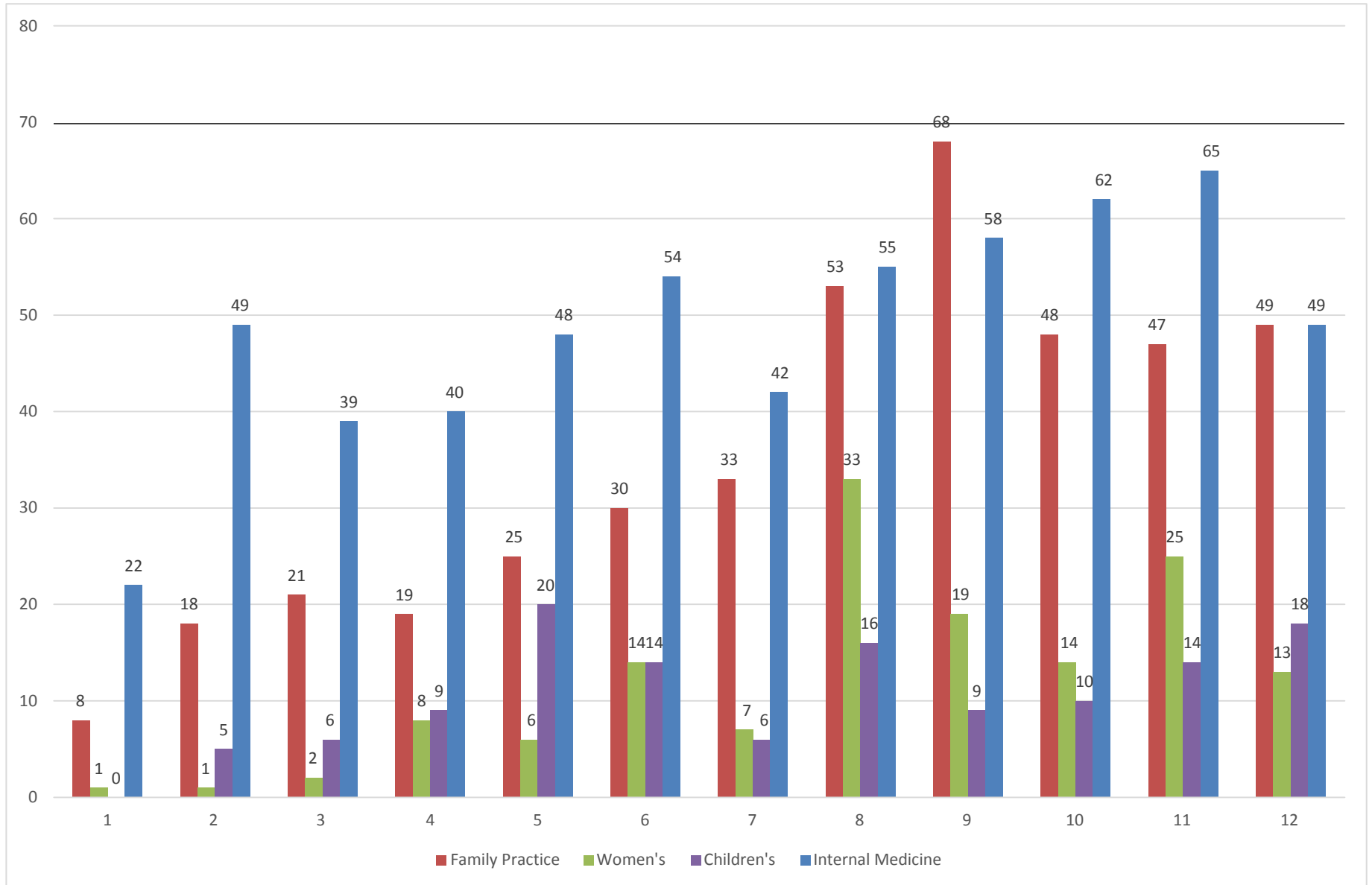
Distribution of Screenings



FRESNO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH - OUTCOMES

CHART C

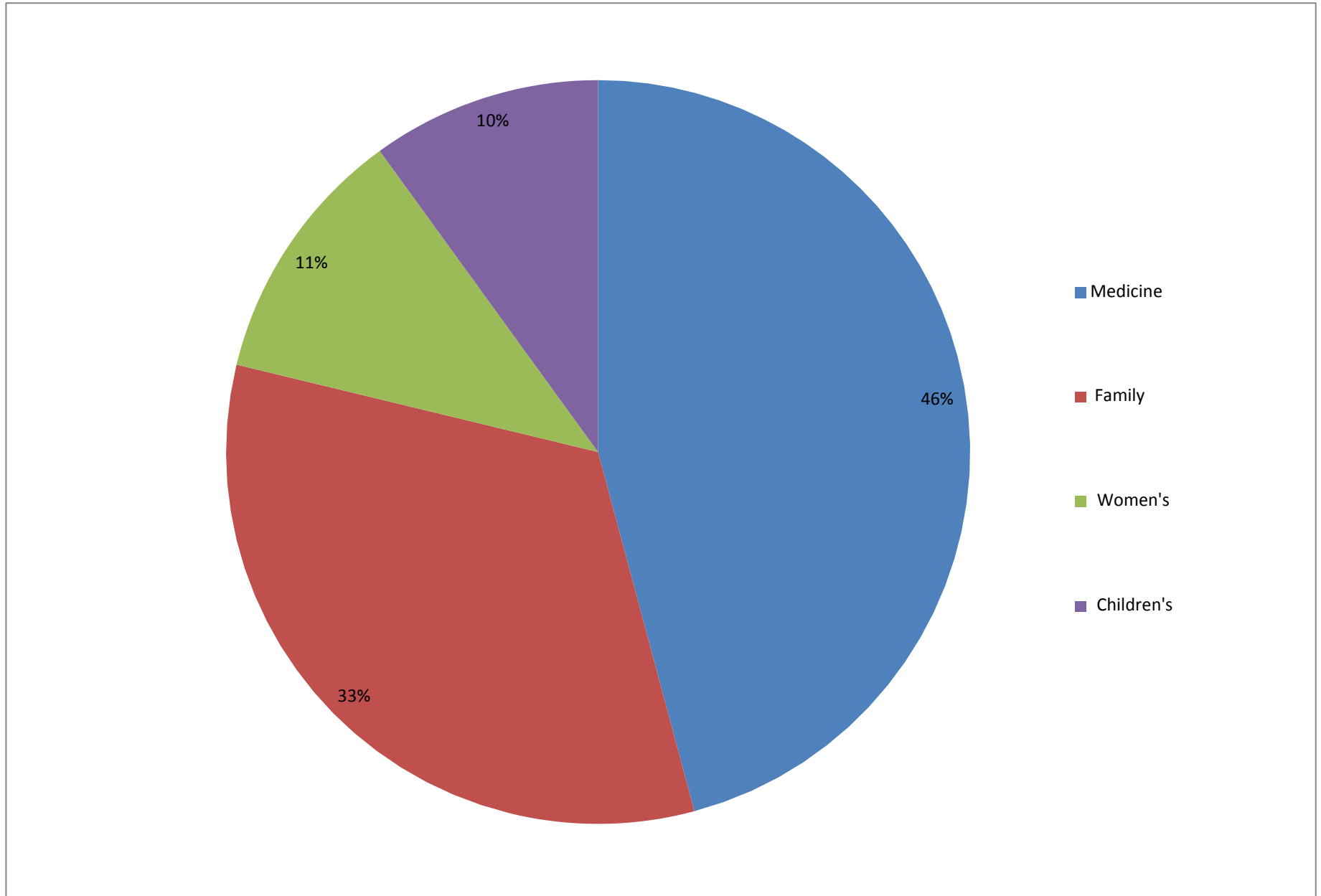
Total Number of Services Provided by IMH-PC Staff



FRESNO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH - OUTCOMES

CHART D

Distribution of Services

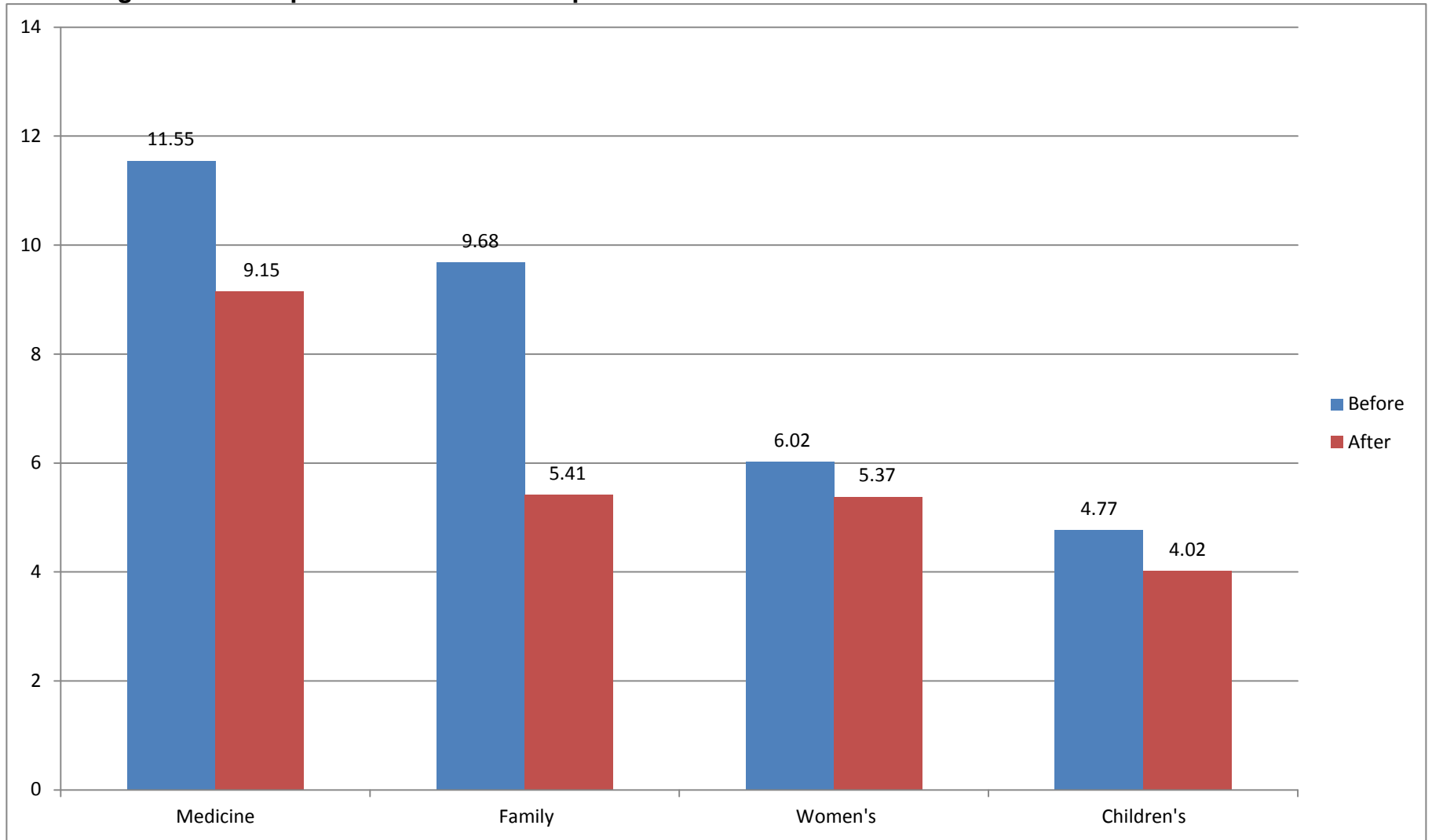


FRESNO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH - OUTCOMES

CHART E

PHQ-9 AVERAGE SCORES BY CLINIC

NOTE: Higher scores represent more severe depression



DEPARTMENT RECOMMENDATION(S): The Department recommends continuing IMH-PC program in FY 2015-2016.