

Behavioral Health Subcommittee Analysis for the Harborview Leadership Group

MAY 22, 2019

Subcommittee Members

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- Craig Jaffe, Harborview/King County
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Overview: Behavioral Health Disorders

- **Behavioral health disorders:** mental health and substance use disorders, such as depression, schizophrenia, alcohol use disorder, and opiate use disorder
- **Behavioral health disorders do not discriminate:** People of all races, socioeconomic classes, ages, and sexes can develop behavioral health disorders
- **Recovery happens:** people with behavioral health conditions can and do improve their health and wellness, live self-directed lives, and strive to reach their full potential

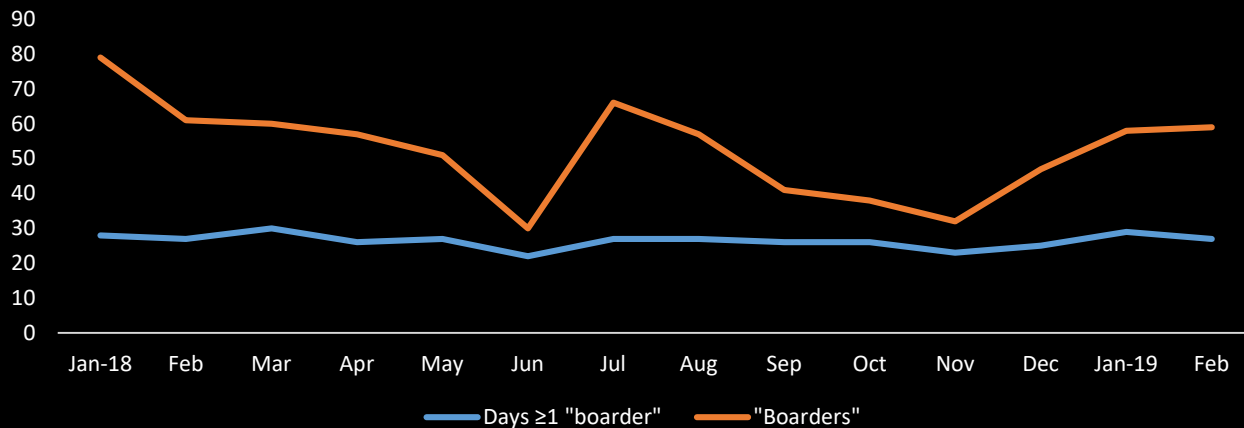
Needs Statement

- Harborview Medical Center (HMC) is renowned for caring for the most ill and vulnerable individuals in the region
- There is a need for more space on the medical center campus to meet the increasing demand for behavioral health services
 - Dozens of people wait in the Psychiatric Emergency Service (PES) and Emergency Department (ED) for crisis treatment
- Unmet behavioral health service needs impact individual and community health and well-being as well as health, human services, and justice continuums
 - Untreated behavioral health conditions can result in increased involvement in the justice system (repeated jail bookings, ITA Court) and homelessness

Overcrowded Psychiatric Emergency Services



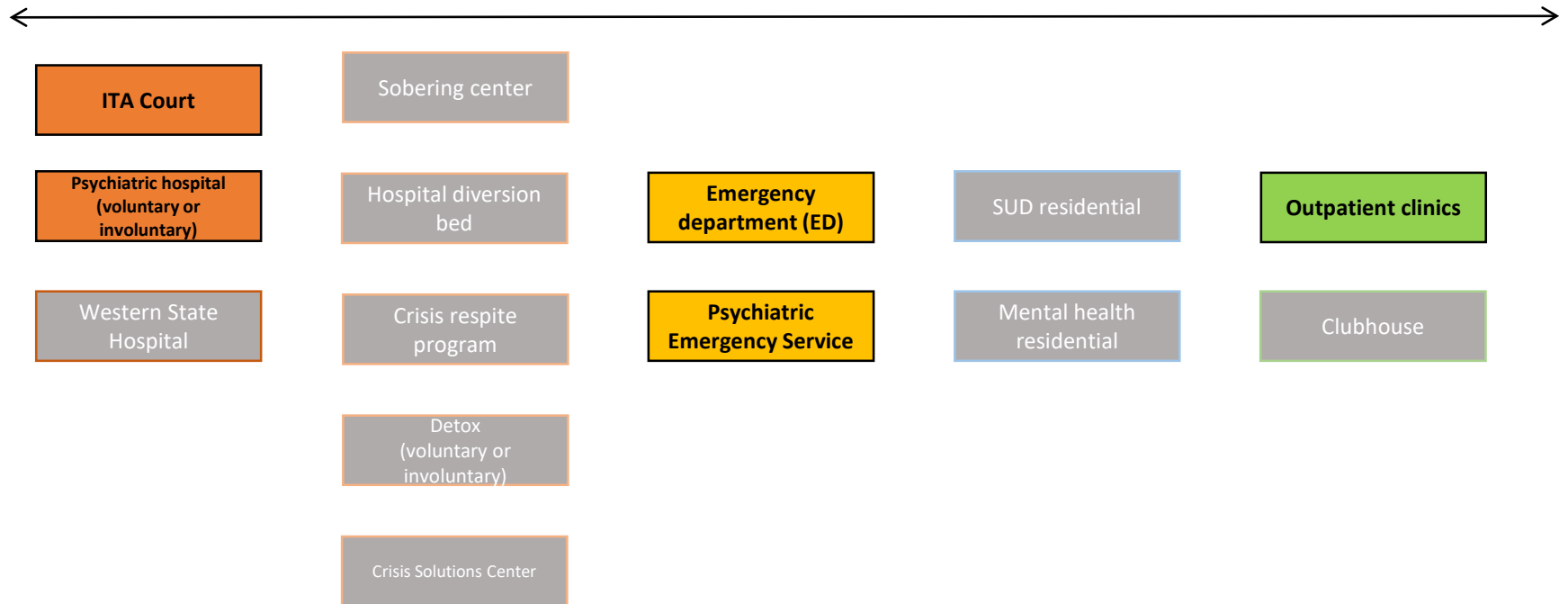
Number of People Waiting for Psychiatric Beds at HMC



Behavioral Health Continuum of Services

More Restrictive/Intensive

Less Restrictive/Intensive



Options Overview

The subcommittee considered seven program areas which would have significant improvements to the Behavioral Health system:

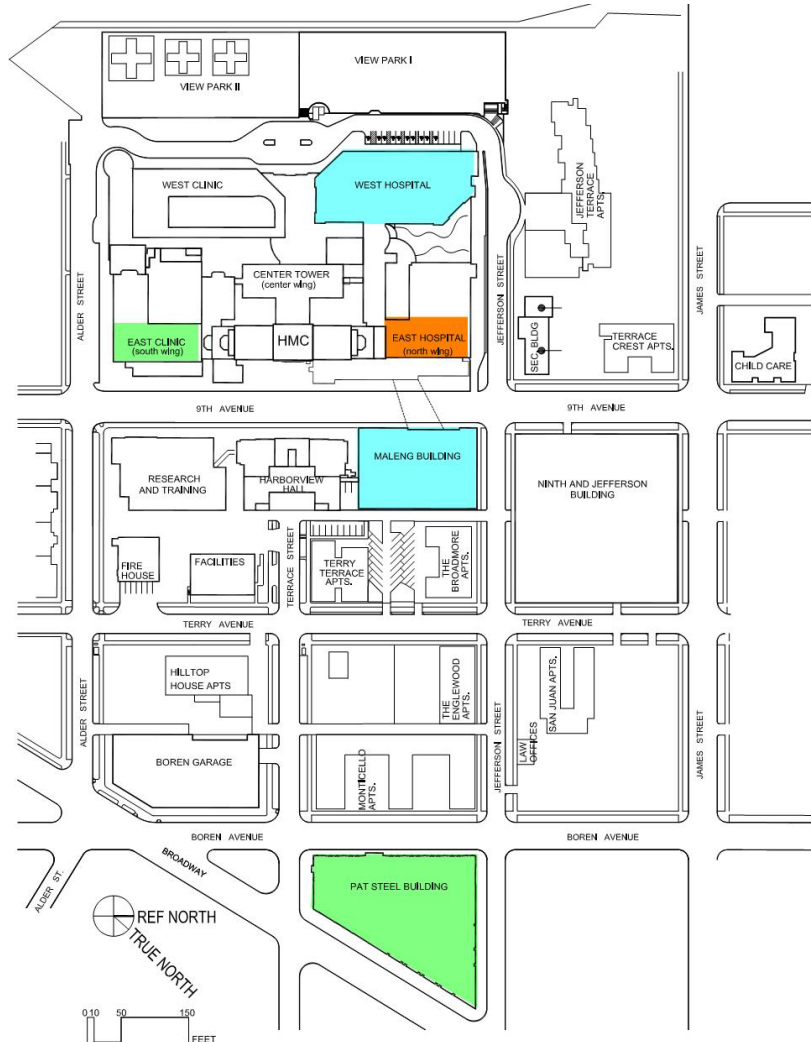
- **Option 1:** No Change/Existing Buildings
- **Option 2:** Expand Existing Facilities or Add New Space for three Prioritized Programs (*two new and one existing program*)
- **Option 3:** Expand Existing Facilities or Add New Space for four Additional Programs

.... Or any combination of the programs

Option 1: No Change to Existing Buildings or Services

- Harborview provides behavioral health services across the campus in several different buildings
- All of the existing buildings where services are provided are fully occupied
- In order for a new program to be installed an existing program must exit
- Maintaining the facility status quo does not address unmet need; service gaps continue

Existing Campus Locations of BH Services



Inpatient and Outpatient Psychiatric Services on the Harborview Medical Center Campus

Outpatient Psychiatry

51,611 visits per year
\$15M / year

Inpatient Psychiatry

68 beds
1,200 Admits per year
\$23M / year

Psychiatric Emergency Services

Emergency Department - 10 beds
4,100 visits per year

Option 2: Expand Existing Facilities or Add New Space for Priority Programs

- The Subcommittee identified seven program areas which would help address unmet needs and offer major improvements to the BH system
- Of those seven, three areas were prioritized by the subcommittee
 - **Crisis Stabilization Unit**
 - **Partial Hospital**
 - **Outpatient Clinics**

Crisis Stabilization Unit: New Service

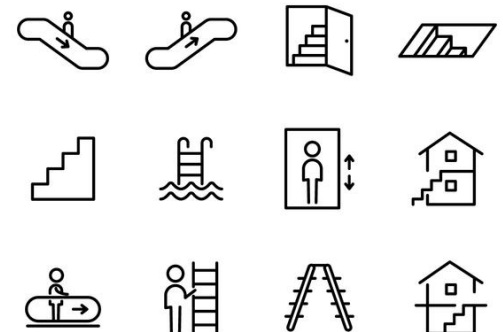
- Example: EmPATH Unit
- Provides a safe, calm, supportive space
- promotes rapid stabilization
- Wait times ↓ by hours, ↓ in hospital admissions and readmissions
- ↓ pressure on the ED, ↑ “surge” capacity for the trauma center



Partial Hospital Program (PHP): New Service

- More frequent and intense services than an outpatient clinic, but not as intense as a psychiatric hospital.
- Office visits with a multidisciplinary team with no overnight stay
- The course of treatment is usually no more than eight weeks.

1. Inpatient Hospital > PHP > Outpatient Clinic
2. Option to “step up” and “step down”



Expand Outpatient Clinics: Existing Service

- HMC offers a broad array of outpatient services, most of which are operating at their maximum capacity
- Expanding outpatient clinics would:
 - Increase access to services within existing programs
 - Focus on prevention and early intervention services
 - Promote a diversity of programs for different populations



Option 3: Expand Existing Facilities or Add New Space for Additional Programs

In addition to the three priority services, four additional programs were identified by the Subcommittee that could be included in facility planning to improve the continuum of BH services:

- **Forensic Inpatient Unit**
- **Evidence Based Practice Training Center**
- **Sobering Center**
- **Telepsychiatry**

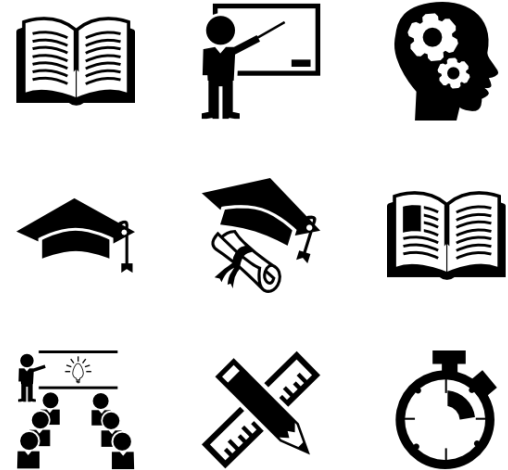
Forensic Inpatient Facility: New Service

- People in jail are often just as ill as people in hospitals
- Psychiatric services are available in jail, and a jail is not a hospital
- A highly structured, secure hospital unit that offers stable and appropriate treatment in a hospital environment fosters better health and lifecourse outcomes



Evidence Based Practice Training Center: New Service

- Multidisciplinary UW educational services
- Implementation and dissemination of evidence-based practices to more stakeholder groups
- Support evidence-based policy decisions



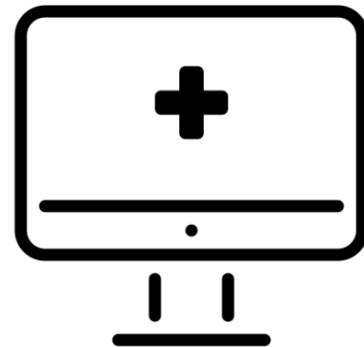
Sobering Center: New Service

- Provides a safe place to stay during resolution of the acute effects of intoxication
- Connects individuals to treatment services, housing assistance, and other supports
- Provides an opportunity to tailor a second site to serve specific populations or more individuals



Telepsychiatry/Telepsychiatric Consult: Expand Existing Service

- Gives people in underserved areas direct access to psychiatrists and other clinicians
- Behavioral health education and consultation to primary care providers and EDs
- Use of technology increases access to prevention and early intervention services sooner



Criteria

	No Change/Existing Buildings	Prioritized Programs	Additional Programs
Area 1: People Impact			
Mission Population			
Patients and clients			
Labor and employees			
Neighbors and community			
Area 2: Service/Operational Impact			
Delivery of emergency services			
Addresses facility deficiencies and needs			
Supports innovation, best practices, and/or new models of care			
Area 3: Equity and Social Justice			
Service models that promote equity			
Influenced by community priorities			
Addresses Determinants of Equity			
Access to healthcare and improved health outcomes			
Area 4: Fiscal/Financial Impact			
The long-term financial position of Harborview and King County			
Existing facilities			
Opportunities for other funding			

Questions?
