

2021-2022 METROWEST COMMUNITY HEALTH IMPROVEMENT PLAN

In the fall of 2019, a collaborative comprised of healthcare providers, health departments and community-based organizations published the third Community Health Assessment for the MetroWest region. The assessment revealed that the four priority areas identified in the previous version were again selected as the top priorities. These were access to care, behavioral health, healthy aging, and healthy eating/active living. Upon its release a working group began meeting to prepare the follow-on Community Health Improvement Plan (CHIP). Given the intersectionality of behavioral health with other concerns and conditions, the group made the decision to focus on mental health and substance use as the overarching issue of the CHIP.

The COVID pandemic necessitated a pause on the work as providers focused on emergency health issues. The group reconvened remotely beginning in the summer of 2020 and quickly came to the consensus that behavioral health should remain the focal point of our combined efforts. It was clear that while the pandemic had magnified existing mental health and substance use issues, it had revealed the power of adaptability and resiliency. Seemingly overnight, behavioral health providers moved to telehealth, senior center staff reached out to isolated seniors using analog phone calls and new video technologies, and school nurses and counselors connected remotely with students to address trauma.

What follows is a very different CHIP than has been presented previously. This visual “roadmap” was designed to be unifying without being prescriptive. Behavioral health is the core focus but there are no defined objectives and strategies. Instead, we offer examples of successful efforts in the MetroWest region within each of the categories of prevention, intervention, treatment and recovery efforts. The goal is to inspire an array of effective program and policy efforts that are coordinated and comprehensive in the pursuit of optimal behavioral health in our region.

Prevention and Awareness

Evidence-based curricula: One of the most effective ways to reduce the human and financial costs of mental health and substance use conditions is to prevent their occurrence in the first place. While genetics and environment play a role in individual susceptibility, there is strong evidence that offering universal social-emotional learning programs like Open Circle and Steps to Respect for pre-school and school-age children can increase coping and resiliency skills, which can in turn support strong physical and mental health through adulthood.

Data dissemination: Effective use of data regarding mental health and substance use can also serve as an important awareness activity. For over 15 years, the MetroWest Adolescent Health Survey has been assisting schools and communities in identifying incidence and trends of adolescent mental health and substance use and has been used in social norms campaigns, parent education and resource allocation.

Intervention

Screening programs: Early intervention is an important step in addressing behavioral health conditions before they magnify. These programs are typically offered individually or in small group settings. Screening, Brief Intervention and Referral to Treatment (SBIRT) provides feedback about unhealthy substance use for individuals who have been identified through the screening

component. Offered in many MetroWest schools, SBIRT utilizes education and awareness to enhance motivation toward healthy behavior change.

Rapid access: Schools are seeing a rise in students with untreated anxiety and depression. While they are not mental health providers, schools are places where students spend a large part of their day with caring adults who can recognize when a student is in crisis. Some schools have developed collaborative relationships with community-based mental health providers who can do an on-site, rapid assessment of a student as well as an initial psychiatric consultation to address issues until the student can get into treatment.

Treatment

Workforce/career pipeline: Counseling and medication are the most common forms of mental health and substance use treatment. But despite Massachusetts having the highest rate of providers per population, there are still access challenges. One of those challenges is recruiting and retaining clinicians who speak primary languages other than English. To address that challenge, health providers in MetroWest are beginning to develop career progression plans and other activities designed to mentor and advance staff of color.

Medication-Assisted Treatment: Another barrier is the lack of providers certified to prescribe Medication Assisted Treatment (MAT) due to strict regulations and cost. In Massachusetts, many organizations have been working to advocate for policy reform, including the Massachusetts Medical Society and the Middlesex Sheriff's Office.

Recovery

Relapse prevention: Individuals often need supports to keep them on track with their mental health or substance use recovery. Typically not covered by insurance, these programs often utilize individuals with lived experience as mentors or peers to provide support. Several organizations in MetroWest utilize Peer Recovery Coaches to provide non-clinical assistance to support individuals in long-term recovery from substance use disorders.

Peer support: The Living Room in Framingham utilizes peer specialists to help people in emotional distress manage their symptoms through a welcoming 24-hour walk-in alternative to the emergency room.

The preceding examples are only a few of the many ways we can work towards our goal to have a coordinated and comprehensive effort in MetroWest to provide an array of effective program and policy efforts that lead to optimal behavioral health. We plan to convene a meeting at the end of this year for organizations to share efforts to reach our goal.

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ON THE ROAD TO HEALTHY WELLBEING

PROMOTING BEHAVIORAL HEALTH IN METROWEST, 2021-2022



Guiding Principles: 1) All people in MetroWest deserve the opportunity to achieve healthy wellbeing; 2) Having a healthy population depends on upstream factors such as employment status, quality housing, affordable education, nutritious food, safe neighborhoods and social engagement and well as healthcare access; and 3) timely data and meaningful collaboration are essential.

PREVENTION/ AWARENESS	INTERVENTION	TREATMENT	RECOVERY
STIGMA REDUCTION	EDUCATION ABOUT RESOURCES	WORKFORCE/ CAREER PIPELINE	RECOVERY FRIENDLY WORKPLACES
EDUCATION AND AWARENESS CAMPAIGNS/PROGRAMS	CRISIS INTERVENTION PROGRAMS	IN-SCHOOL MENTAL HEALTH TREATMENT	PEER SUPPORT
EVIDENCE-BASED CURRICULA	SERVICE AND CARE COORDINATION	MEDICATION ASSISTED TREATMENT	RELAPSE PREVENTION
DATA DISSEMINATION	POST OVERDOSE FOLLOW UP	PARITY IN COVERAGE	
SCREENING IN SCHOOLS	RAPID ACCESS	BEHAVIORAL HEALTH URGENT CARE	
HARM REDUCTION STRATEGIES			