





ACTION PLAN







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Behavioral Health Treatment

Mental health includes emotion, psychological, and social well-being. Positive mental health is important for navigating work and personal stressors, and mental disorders are associated with increased risk of substance use, risky behaviors, family violence, and chronic conditions. Mental Health is a priority area of the Illinois State Health Improvement Plan, and 2018 target measures include decreasing mortality due to suicide, increasing the percentage of Illinois youth receiving needed mental health treatment, and decreasing the percentage of adults with 8-30 mentally unhealthy days within a 30-day period.

Why is this issue important in DuPage County?

Data from the community assessment revealed that poor mental health and access to mental health treatment are issues of concern to DuPage residents.

Community Profile

- In 2013, an estimated 22.9 percent of DuPage County adults had mental health that was not good 1-7 days of the past 30 days. There were an estimated 11.7 percent whose mental health was not good 8-30 days in the past 30 days.²
- Between 2011 and 2014, the percent of total ED visits attributed to mental disorders increased.
 Compared to other age groups, adults aged 18 to 44 have the highest percentage of ED visits with a mental disorder chief complaint or discharge diagnosis. Visits for anxiety accounted for 21.8 percent of mental disorder visits during that time, and 7.2 percent of mental disorder visits included a drug-related child complaint.³
- The age-adjusted death rate due to suicide in DuPage County between 2010 and 2012 was 14.1 for males, compared to 4.5 for females.

Landscape Review: Community Survey

- When asked "What do you think are the three most important health concerns in DuPage County?" 37 percent of respondents selected Mental Health Problems.
- When asked "Where should the community focus its attention to make things better in DuPage County?" 23 percent of respondents selected Access to Mental Health Treatment.

Forces of Change – Trends, Factors, and Events that Affect Our Community

- Some laws have resulted in a stigma and criminalization of mental health and substance abuse.
- There are opportunities in working with mental health courts and reviewing laws for effective treatment.

³ Electronic Surveillance System for the Early Notification of Community-Based Epidemics (ESSENCE). DuPage County Emergency Department visits for mental health reasons. 1/1/2011 through 5/26/2014.





¹ National Prevention Council. 2010. Mental and Emotional Well-Being. http://www.surgeongeneral.gov/initiatives/prevention/strategy/mental-emotional-well-being.pdf

² Illinois Department of Public Health. Illinois Behavioral Risk Factor Surveillance System. 2013. Unpublished data.

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Local System Assessment: Strengths, Weaknesses, and Opportunities of the Local System

Strengths

- Work has been done to integrate physical and behavioral health care.
- The system is overall doing well in connecting people to public benefits.

Weaknesses

 Health care is fragmented in terms of coordination; some sectors of the local system do not understand their roles or responsibilities in responding to unmet needs.

Opportunities

- Provide active marketing and outreach to target populations in order to improve awareness of what is available.
- o Improve follow-up and guide individuals in managing benefits.
- o Improve communication between organizations working on the same issues.
- Involve other sectors, such as mental health providers and schools, in evaluation processes and improve interaction between each system partner conducting evaluations.

Taking Action: How do we strengthen the behavioral health treatment system to respond to the complexity of behavioral health issues?

Leveraging existing community collaboration, Impact DuPage partnered with the Behavioral Health Collaborative's Treatment Leadership Team in development of goals and strategies addressing mental health and substance abuse treatment, acknowledging the co-occurrence of these issues. The Treatment Leadership Team first convened in 2011 and addresses linkage and gaps related to behavioral health treatment. In the fall of 2015, the Team developed a three year action plan to address mental health and substance abuse treatment.

The Treatment Leadership Team Action Plan addresses access to behavioral health services and increasing the number of quality behavioral health providers in DuPage County. Strategies include:

- Establishing a system of navigation for accessing behavioral health services, including a coordinated system of managing real-time supply and demand of behavioral health care
- Identifying at least one strategy to address social and economic barriers to behavioral health treatment services
- Behavioral health treatment providers adopt and share common quality indicators
- Increase pipeline capacity of quality providers

Treatment Leadership Team Participants in Planning

Name	Organization
Angela Adkins	NAMI DuPage
Karen Ayala	DuPage County Health Department
Lori Carnahan	DuPage County Health Department
Dianna Feeney	Serenity House







Filiz Gunay	DuPage County Health Department
Kristin Hartsaw	DuPage Federation on Human Services Reform
Jaclyn Hovde	Lutheran Social Services
Allison Johnson	Northwestern Medicine
Candace King	DuPage Federation on Human Services Reform
Lon Kleisner	HAS
Teddi Krochman	Elmhurst Memorial Hospital
Alicia Mandolini	HAS
Rev. Scott Mitchell	Samaritan Interfaith Counseling
Paula Moore	Advocate Good Samaritan Hospital
Michael Moran	Breaking Free
Theresa Nihill	Metropolitan Family Services
Kara Murphy	DuPage Health Coalition
Caren Musembi	Ray Graham Association
Randy Randazzo	Hinsdale Hospital
Amit Thaker	Linden Oaks
Steve Wennmaker	Woodridge Interventions - Abraxas

The Treatment Leadership Team's Action Plan aligns well with Healthy People 2020 objectives, for example increasing the proportion of adults with mental health disorders who receive treatment. In addition, Community Memorial Foundation, a local foundation focused on the western suburbs of Chicago, released its Regional Health and Human Services Agenda for the Western Suburbs in November 2015, identifying Mental Health as a priority and an increase in number and capacity of practitioners and awareness and referral to services as indicators of success.

Healthy People 2020 Objectives

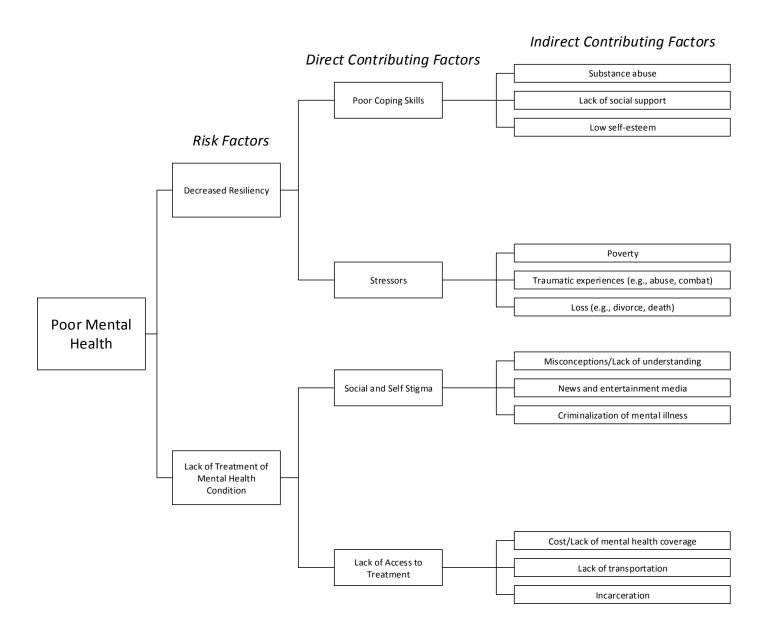
- MHMD-6 Increase the proportion of children with mental health problems who receive treatment
- MHMD-7 Increase the proportion of juvenile residential facilities that screen admissions for mental health problems
- MHMD-9 Increase the proportion of adults with mental health disorders who receive treatment
- MHMD-10 Increase the proportion of persons with co-occurring substance abuse and mental disorders who receive treatment for both disorders
- MHMD-11 Increase depression screening by primary care providers
- MHMD-12 Increase the proportion of homeless adults with mental health problems who receive mental health service







Priority Issue Analysis









Improve Access to Behavioral Health Services

Outcome Objective 1

By December 31, 2018, establish a system of navigation that improves the ability of the provider network to ensure consumers understand, access, and receive treatment services.

Impact Objective 1.1

By December 31, 2016, develop an integrated model for navigator and resource and referral system.

Strategies

- Establish a workgroup to develop the model
- Research/survey of existing efforts serving county patients
- Research navigation models in use in other communities
- Create model for DuPage
- Identify population groups/create a tiered plan to serve each group
- Develop a plan which will include the cost, technology, and necessary partners

Impact Objective 1.2

By December 31, 2016, identify at least one strategy to address social and economic barriers to behavioral health treatment services.

Strategies

- Review assessments to date
- Identify gaps in data
- Create recommendations for strategies

Impact Objective 1.3

By December 31, 2017, develop a coordinated system of managing real-time supply and demand of behavioral health care.

Strategies

- Identify and collect the provider capacity and service demand data to be shared
- Identify funding sources
- Conduct outreach to critical partners

Impact Objective 1.4

By December 31, 2018, implement pilot phase of navigator and resource and referral system.

Strategies

- Establish partner agreements/commitments
- Secure funding
- Develop and implement outreach and communications plan
- Establish evaluation metrics







Impact Objective 1.5

By December 31, 2018, educate 10% of primary care partners, 10% of school educators, 10% of justice system providers about behavioral health resources in the community.

Strategies

- Develop tool to increase primary care provider referrals to community resources
- Create tool and/or curriculum to educate schools, justice system, and other natural community supports (e.g. faith communities) about mental health and substance abuse issues
- Provide referral information to schools, justice system partners, and other community supports (e.g., faith communities)

Increase Quality Providers

Outcome Objective 2

By December 31, 2018, create a system of measurement of quality where at least 5 safety net behavioral health provider partners adopt and share common quality indicators.

Impact Objective 2.1

By December 31, 2017, identify common subjective and objective quality indicators for DuPage County behavioral health treatment providers.

Strategies

- Research established indicators
- Research best practice methods to obtain consumer satisfaction data
- Conduct outreach to providers to determine current measures and discuss alignment of indicators

Outcome Objective 3

By December 31, 2018, explore and implement one or more innovations to increase pipeline capacity of quality providers.

Impact Objective 3.1

By December 31, 2017, establish at least two partnerships with psychiatric and mid-level provider training institutions to increase pipeline capacity of quality providers working within DuPage County.

Strategies

- Research training institutions in metropolitan Chicago area
- Propose strategies targeting training institutions which will increase number of quality behavioral health providers
- Establish contacts at local training institutions

Assets and Resources

- Advocate Good Samaritan Hospital
- AMITA Health Hinsdale and Glen Oaks Hospitals







- Behavioral Services Center
- Breaking Free
- DuPage County Health Department Community Center and Crisis Services
- DuPage Health Coalition
- DuPage Federation on Human Services Reform
- Edward-Elmhurst Health Edward, Elmhurst Memorial, and Linden Oaks Hospitals
- H.A.S. Healthcare Alternative Systems
- Lutheran Social Services
- Metropolitan Family Services
- NAMI DuPage
- Northwestern Medicine Central DuPage Hospital
- Ray Graham Association
- Samaritan Interfaith Counseling
- Serenity House Counseling Services
- Woodridge Interventions

Funding

The Treatment Leadership Team members will provide in-kind support to conduct the planning and research required in the above objectives. During the research process (e.g. for the navigation model), cost of implementation will be estimated and funding sources will be identified.

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