# **Reducing Barriers to Access to Behavioral Health Using Telehealth**

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- Objectives
- What is MMHP?
- What is telehealth?
- Telehealth at MMHP
- Challenges and Successes
- Broader Discussion
- Questions



# **Objectives**

- Describe how MMHP provides behavioral health services to farmworkers through telehealth
- Discuss challenges and successes when using telehealth.
- Summarize how other migrant health programs can use this model to provide behavioral health services using telehealth.



# What is MMHP?

- Provides health services to migrant and seasonal farmworkers and seafood processors across the state of Maine
- 4 mobile units, including one BH van, instead of a permanent bricks-and-mortar location.
- Approximately 60% direct care / 40% voucher care
- Types of services:
  - Direct Services
  - Voucher Services
  - Enabling Services







## **Supplemental Funding for Behavioral Health**

In the last three years, MMHP has received the following grants to help with the expansion of Behavioral Health services.

- FY 2017, Access Increases in Mental Health Services and Substance Use Services (AIMS)
- FY 2018, Expanding Access to Quality Substance Use Disorder and Mental Health Services (SUD-MH)
- ✤ FY 2019, Integrated Behavioral Health Services (IBHS)



## Telehealth



## Telehealth

- $\succ$  It's a means of delivering services through technology.
- Uses videoconferencing technology to provide credible Behavioral Health (BH) encounters to patients remotely.
- Allows us to meet the needs of patients across the state and in various languages to provide timely and culturally appropriate behavioral health services.
  - Assessments and referral to treatment
  - Ongoing counseling
  - Substance use treatment
  - Monitor treatment
  - Consultations with other providers



## **Starting Telehealth at MMHP**

Prior to delivering behavioral health services through telehealth MMHP

- Signed a contract with Zoom, a HIPAA compliant software to protect patient confidentiality.
- ➤ Consulted with the Northeast Telehealth Resource Center.
- ➤ Created a policy for providing BH services through telehealth.
- ➤ Developed consent form for patients participating in telehealth.
- ► Established protocols and procedures.
- Purchased adequate equipment

MMHP started providing Behavioral Health (BH) services to Spanish and English speaking patients through telehealth in June of 2018.

MOBILE HEALTH



## National Consortium of Telehealth Resource Centers

- The consortium is funded by the U.S. Department of Health and Human Services (HHS) and the Health Resources and Services Administration (HRSA)
- The centers provide resources and technical assistance to organizations providing or interested in providing services through telehealth.
- There are 12 regional and 2 national centers working on the advancement and accessibility of telehealth with a focus in rural healthcare across the US.
- To find a center in your state go to: <u>ttps://www.telehealthresourcecenter.org</u>



## **Telehealth at MMHP**

- $\succ$  Telehealth services must be conducted through Zoom.
- ➤ Telehealth encounters are voluntary and patients are informed of the risks and benefits of the service.
- Patient must sign a Consent to Participate in Telehealth Services, prior to receiving services.
- The originating site (location of the patient) and the receiving site (location of the provider) can be anywhere as long it allows for privacy and confidentiality. *However, providers must is licensed in Maine and patients have to be physically present in the state of Maine while receiving the service.*



### **Telehealth at MMHP**

Originating sites can be one of the following:

- $\succ$  Patient's home.
- $\succ$  One of MMHP's office.
- ➤ An alternative community space the patient feels comfortable at.
- ➤ One of MMHP Mobile Units.



## **Telehealth at MMHP**

- An assessment is done with the patient to determine whether the patient is able to participate in telehealth services from home.
- Alternate spaces such as churches, libraries, and other community spaces are offered based on the needs of the patient.
- Patients are trained by a Community Health Worker (CHW) how to use Zoom and how to enter the appointment.
- ➤ A CHW typically helps facilitate the initial meeting to troubleshoot any issues and to do a warm hand-off with the BH provider.



## Equipment

To provide BH services through telehealth state wide MMHP purchased:

- ➤ 5 Chromebooks
- $\succ$  2 hot spots
- $\succ$  2 tablets







## **Telehealth from Home**

If the patient is accessing services from home without a CHW present these are some things to consider...

- Does the patient have access to a computer, smartphone, or tablet at home?
- ➤ Is the patient able to download Zoom on that device?
- ➤ Does the patient need to borrow MMHP's equipment?
- > Does the patient have strong internet connection?
- ➤ Has the patient been trained on how to use Zoom?



## Cont...

If the patient is accessing services from home without a CHW present these are some things to consider...

- ➤ Does the patient know what to do if the connection fails?
- $\succ$  What is the level of tech literacy?
- ➤ Does the patient feel safe/comfortable at home?
- ➤ What is the home environment like? Will there be distractions? How to mitigate those? How can we best support the patient?



## **Zoom App**



Zoom App



Click on "Join a Meeting"



Enter meeting ID and click on Join Meeting. (Provider will send ID before the meeting as a reminder for the meeting)

### **BH VAN**





In January of 2019 MMHP purchase a van with the purpose to expand access to BH services. The van is used for:

- BH in person visits
- BH via telehealth
- Care coordination

### Goals

- ➤ Increase access to all of MMHP patients.
- ➤ Breakdown language barriers
- Decrease barriers to access due to transportation and geographic locations.
- ➤ Improve patient satisfaction.
- ► Improve provider satisfaction.
- Expand BH program, including provider staffing that better represent our patient demographics.
- ➤ Decrease cost





# **Map of Maine**

MMHP has a total of two Spanish speaking voucher providers that provide BH services.

One in Cumberland county and one in Kennebec county.

#### **Successes**

- ➤ MMHP hired a Haitian Creole speaking BH provider to provide services via telehealth.
- Haitian Creole speaking patients can have access for BH services for the first time ever in their native language.
- ➤ Number of patients participating in telehealth continues to increase.
- ➤ Telehealth has allowed MMHP to reach more patients across state.
- ➤ Telehealth has been instrumental for tobacco treatment follow up.
- ➤ Has decreased the number of patient no shows due to poor weather conditions and lack of transportation.
- ➤ It requires less staffing to coordinate the appointment.





#### Numbers for 2018

- 13 individual patients (10 Spanish, 3 Creole)
- 27 visits

June through December

#### Numbers for 2019

- 43 individual patients (33 Haitian Creole, 9 Spanish, and 1 English)
- 60 visits

January through September



### **Successes**

- ➤ For individual patients, telehealth has
  - Provided more options for treatment.
  - Allowed to to get into treatment quicker.
  - Offered continuity of care.
  - More accessibility to BH providers
- ➤ For BH providers telehealth has:
  - Decreased the amount of travel time
  - Allowed providers to be present in multiple clinics at once.
  - Enabled consultation with other service providers across state.



## Challenges

- ➤ Can't replicate the same experience as an in person visit.
- > Poor connectivity in certain parts of the state.
- $\succ$  It requires a certain level of comfort with technology.
- ➤ Patient's comfort with telehealth and having to use video.
- $\succ$  It adds a layer of vulnerability for both the patient and the provider.
- > Privacy, especially in our Mobile Clinics.



## Challenges

- It's not for everyone!
- Getting buy in from providers and patients.
- Patients needing to use their own data when doing telehealth from home.
- Establishing expectations and boundaries around the visit
- Finding spaces in the community where patients feel safe and comfortable
- Patients having to be physically present in Maine.
- Providers having to be licensed in Maine.



## Discussion

- Takeaways from this presentation
- Would you use telehealth?
- Why or why not?
- What would be the barriers for you?
- How would telehealth improve your services?





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