Taking Action: Leveraging Community Resources to Address Mental Health

In 2016, the Public Health Foundation (PHF) and the American Hospital Association (AHA) began working together to test a new approach for hospitals and health systems, public health departments, and other community stakeholders to address priority community health needs. This approach involved:

1. Determining a priority health need to address based on the hospital’s community health needs assessment
2. Identifying evidence-based interventions from The Community Guide (The Guide to Community Preventive Services) that could be used to address the identified need
3. Using PHF’s population health driver diagram framework to work with stakeholder coalitions to develop strategies and take action to improve the identified community health priority

PHF and AHA approached two hospitals to participate in this pilot initiative that had engaged community stakeholders in their community health assessments and were prepared to take action. PHF and AHA then worked with these hospitals to convene and facilitate action planning by stakeholder coalitions. Each coalition engaged a range of community stakeholders to devise plans and begin to take action by developing a customized population health driver diagram. These diagrams helped community stakeholders identify primary and secondary drivers that could help their community meet their identified health objective. The coalitions have taken a variety of specific actions to address mental and behavioral health needs in their communities.

York, Pennsylvania

Located in the south-central region of Pennsylvania, York is a mid-sized industrial city of 45,000 people. York’s population is about 50 percent white and 28 percent African American; another 25 percent of the population is of Hispanic or Latino heritage. Approximately 24 percent of the population lives below the poverty line. While the city of York is urban, surrounding areas in its county are predominantly rural.

WellSpan Health, a nonprofit integrated health system serving communities in central Pennsylvania and northern Maryland, is based in York. This health system is comprised of a multispecialty medical group of more than 1,200 physicians, a home care organization, six hospitals, and 130 patient care locations.

Focusing on Mental/Behavioral Health

WellSpan’s recent community health needs assessment showed that there is a high prevalence of anxiety and depression in the region, a low provider-to-patient ratio, and a fractured mental health system. In light of this assessment, WellSpan prioritized mental/behavioral health as the focus of its work with the Public Health Foundation and American Hospital Association to develop interventions aligned with the Healthy York County Coalition’s regional health plan.
Building a Collaborative

To address local mental/behavioral health needs, WellSpan recognized that a communitywide collaborative would be necessary to improve health at scale. This collaborative developed around a shared aim of improving functioning of York County residents who are experiencing mental and behavioral health issues. In addition to WellSpan, partners in the collaborative (i.e., the York coalition) included:

- City of York Bureau of Health
- Family First Health
- Hanover Hospital
- Healthy York County Coalition
- TrueNorth Wellness Services
- Catholic Charities
- Philhaven
- York County Community Foundation
- York County Libraries
- 2-1-1 Pennsylvania

Collaborative Strategies to Address Mental/Behavioral Health

Working through the population health driver diagram process, the York coalition developed five community health goals:

1. Increase entry points to behavioral health services.
2. Tally fewer poor mental health days per month.
3. Promote appropriate use of available resources and services.
4. Improve the mental health provider-to-patient ratio.
5. Increase the number of adults managing depressive symptoms.

The coalition also identified three primary drivers to reach these goals:

1. Increase knowledge and awareness of depressive symptoms.
2. Develop and implement a standardized community approach to screening and management.
3. Redesign community resources.

Given this large scope of work, the coalition split into teams to address each primary driver.
driver. As teams started working, they realized that having increased knowledge and awareness of depressive symptoms and community resource redesign were necessary to lay the groundwork for implementing communitywide screening and management. Because of this, the collaborative decided to start with a focus on primary drivers one and three: increasing knowledge and awareness and redesigning community resources.

**Increased Awareness**

Initially, the York coalition worked to develop an awareness campaign that specifically focused on how to reduce stigma around mental health and depression. With an intentional focus on vulnerable populations, the coalition took an inventory of its existing services and resources in order to leverage its collective assets and reach more people. The coalition created the Feeling Blue website, which provides education and support about depression to York area residents.

Feeling Blue’s information, available in English and Spanish, aims to guide users to resources and also normalize depression, with a key message that mental health is part of physical health. The marketing campaign has focused on how to scale this key message across the York area’s many communities; to do so, the diversity of the coalition’s members has been an asset. Describing and measuring the impact of Feeling Blue has been a challenge. Though the website has extensive reach, current analytics capabilities make it challenging to tell if the resources are reaching all underserved populations.

In addition, the coalition actively promotes Mental Health First Aid trainings for community members, including first responders and individuals from faith communities. These trainings prepare community members to support others who may be experiencing a mental health crisis and may not have ready access to a behavioral health provider.

**Community Resource Redesign**

The York coalition also identified opportunities to redesign existing community resources to better meet the needs of urban and rural residents without an overhaul of its behavioral health system. The coalition is working with 2-1-1 Pennsylvania, the state’s information and referral service for community and social services, to provide navigational assistance for residents across the system. In addition to functioning as a call center, 2-1-1 provides text messaging services to individuals in their network, which is particularly helpful for people who are hearing impaired or have limited phone plans. Currently, 2-1-1 Pennsylvania and the Healthy York County Coalition are collaborating to increase the 2-1-1 database so it encompasses all behavioral health resources in the region.

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**Impacting Mental/Behavioral Health**

- **Feeling Blue website**
  - Education and support around depression
  - Positive community feedback
- **Mental Health First Aid**
  - First responder and faith-based communities
- **Community resource redesign**
  - 2-1-1 Pennsylvania and the Healthy York County Coalition
  - Expanding and enhancing resource coordination
- **Bringing stakeholders together**
  - Major win – momentum
Next steps for the coalition are to:

1. Increase providers’ knowledge about 2-1-1 as a referral source for their patients.

2. Secure buy-in from mental health providers to keep their information in the system up-to-date.

The coalition also is looking beyond 2-1-1 to evaluate and determine the benefits of an online referral network that connects clinicians with community resources. Integration with existing electronic health records, accessibility and ease of use, client tracking capabilities, and affordability would be key aspects needed in a potential network system.

Lessons Learned

The York coalition recognizes it has a long way to go to achieve its goals—perhaps needing years to demonstrate outcomes—but is optimistic that pieces of its shared mission are coming together and that progress will be sustained.

Bringing all stakeholders together was considered a major win and has helped foster momentum and communitywide alignment around mental/behavioral health. All participants recognize that improving mental/behavioral health in York is not work that can be done in isolation. One participant noted that the York area is resource rich but needs its organizations to continue working together to improve how these resources are aligned. This mindset helps the coalition identify assets in a community and build on them, making sure that all stakeholders’ voices are heard.

The population health driver diagram process was particularly helpful to the coalition for synthesizing ideas into a framework that is easy to understand and use. Members of the coalition are considering applying the driver diagram process to other community health issues.

Coalition participants acknowledge that the work is challenging. They have become more open to different perspectives but also have had disagreements. One member reflected that it has been helpful to embrace difficult conversations and uncomfortable questions. York's process for collaborative efforts to redesign care and reduce mental health stigma will continue as the community makes progress toward improving behavioral health.

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