Beyond Clinical Walls: Partnering 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.

Oklahoma City and County, Oklahoma

Oklahoma City is the capital and largest city in Oklahoma, with approximately 1.3 million people residing in the metropolitan area, a number that continues to increase. Oklahoma City is 63 percent white and 15 percent black, with 17 percent identifying as Hispanic or Latino. Approximately 17 percent of the population lives below the poverty line.

INTEGRIS is the largest not-for-profit and Oklahoma-owned health care organization, with 12 hospitals statewide. It is also one of the state’s largest private employers, with 9,500 employees.

A Foundation of Collaboration

To address the many health challenges facing its shared community, INTEGRIS has a long history of partnering with the Oklahoma City-County Health Department (OCCHD) through the Wellness Now Coalition. Based out of OCCHD, the coalition meets quarterly and has seven standing work groups to address priority health issues in the region:

- Adolescent Health – teen mothers birth rate reduction
- Care Coordination – coordination and collaboration between hospitals and community partners
- Faith Based – collaboration across faiths to leverage resources and partnerships
- Health at Work – worksite wellness promotion
- Mental Health – facilitation of a community that equates mental health with physical health
Nutrition and Physical Activity – partnerships with schools, businesses, and government to increase access and opportunity for physical activity and healthy food options

Tobacco Use Prevention – advocacy for policies that prevent or decrease tobacco use

The coalition started in 2010 with a local community health needs assessment; since then, it has evolved to create sustainable solutions through policies, environmental changes, programs, and education in alignment with the assessment’s priorities.

Collaborative Strategies to Address Community Mental Health

For this project, Wellness Now chose to focus on mental health, which was identified by both INTEGRIS and OCCHD as a top priority. The Wellness Now Mental Health work group, initially formed in 2010 via a suicide prevention grant, became key in moving the project forward.

Working together through the population health driver diagram process, Wellness Now agreed on an aim for the project: to promote optimal mental health for Oklahoma City and County by increasing residents’ abilities to cope with life’s challenges, facilitating recovery and building resilience. The project’s six goals are:

1. Reduce the stigma of seeking care for mental health and substance use disorders.
2. Address mental health with the same urgency as physical health.
3. Improve access to mental health and substance use screenings.
4. Improve access to mental health and substance use treatment.
5. Decrease the number of poor mental health days.
6. Decrease the suicide rate.

Three primary drivers were identified to help reach these goals:

1. Improve knowledge and awareness of mental health and substance use disorders for providers and residents.
2. Increase availability and access to evidence-based mental health and addiction substance use services.
3. Promote data sharing, monitoring, and transparency.

The structure and process of developing a population health driver diagram has helped make the Wellness Now Coalition more cohesive and focused around both short- and long-term goals.
Recognizing that it would not be possible to simultaneously address all of the area’s mental health needs, Wellness Now initially focused on improving the public’s knowledge and awareness of mental health and substance disorders to reduce stigma. The primary strategic components included:

**Suicide prevention training.** Linking community members with QPR (Question, Persuade, and Refer) training. These trainings have grown to include library staff members and INTEGRIS physicians. Wellness Now is expanding its reach by working with four communities outside the Oklahoma City metro area to train library employees in basic mental health education.

**Mental Health First Aid training.** Expanding training for those who may interact with someone who requires mental health first aid. In fiscal year 2017, 309 people completed this training, 97 percent of whom reported that they are now able to assist a person who may be dealing with a mental health problem.

**Screening.** Using an online screening tool through INTEGRIS that connects people with resources.

**Normalization and education.** Conducting community screenings of and conversations about The Anonymous People, a documentary about people living in recovery from alcohol use and other substance uses. To accompany the screenings, Wellness Now hosted a “Trauma in Oklahoma” roundtable that was attended by more than 200 people focused on learning the effects of adverse childhood events and developing a strategy for community resiliency.

Areas that the coalition intends to address next include addiction recovery, opioid prevention, and advocacy.

**Lessons Learned**

Members of the Wellness Now Coalition’s Mental Health work group recognize that the objectives and strategies in the population health driver diagram point to a wide body of work that would be impossible to address concurrently. By starting with several approachable strategies, Wellness Now has begun to build momentum that can be leveraged to develop additional strategies in the future. The coalition’s work is constantly growing and evolving, adding more initiatives each year to address the community’s needs. The coalition serves as the backbone organization to help keep the group sustainable over time.

As a long-standing community coalition, Wellness Now has successfully overcome the growing pains that some new coalitions face. Based on their own experiences, Wellness Now leaders recommend focusing on a common goal, noting that it is beneficial to not be possessive...
of work and instead cross-promote what other organizations are doing. One member described Wellness Now’s culture as having a “potluck mentality” in which everyone brings something unique to the table, leaving behind their own agendas and egos. The mutual respect that members have for each individual organization’s mission and place in the field allows the coalition to work together better and strengthen internal relationships.

The structure and process of developing a population health driver diagram also has helped make Wellness Now more cohesive and focused around both short- and long-term goals. To help disseminate and build on the work being done through this project, the coalition is considering rolling out the driver diagram process to its other six work groups as well.

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Acknowledgment

PHF and AHA thank the Centers for Disease Control and Prevention for providing funding support for this pilot initiative. The contents of this case story are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention or the U.S. Department of Health and Human Services.