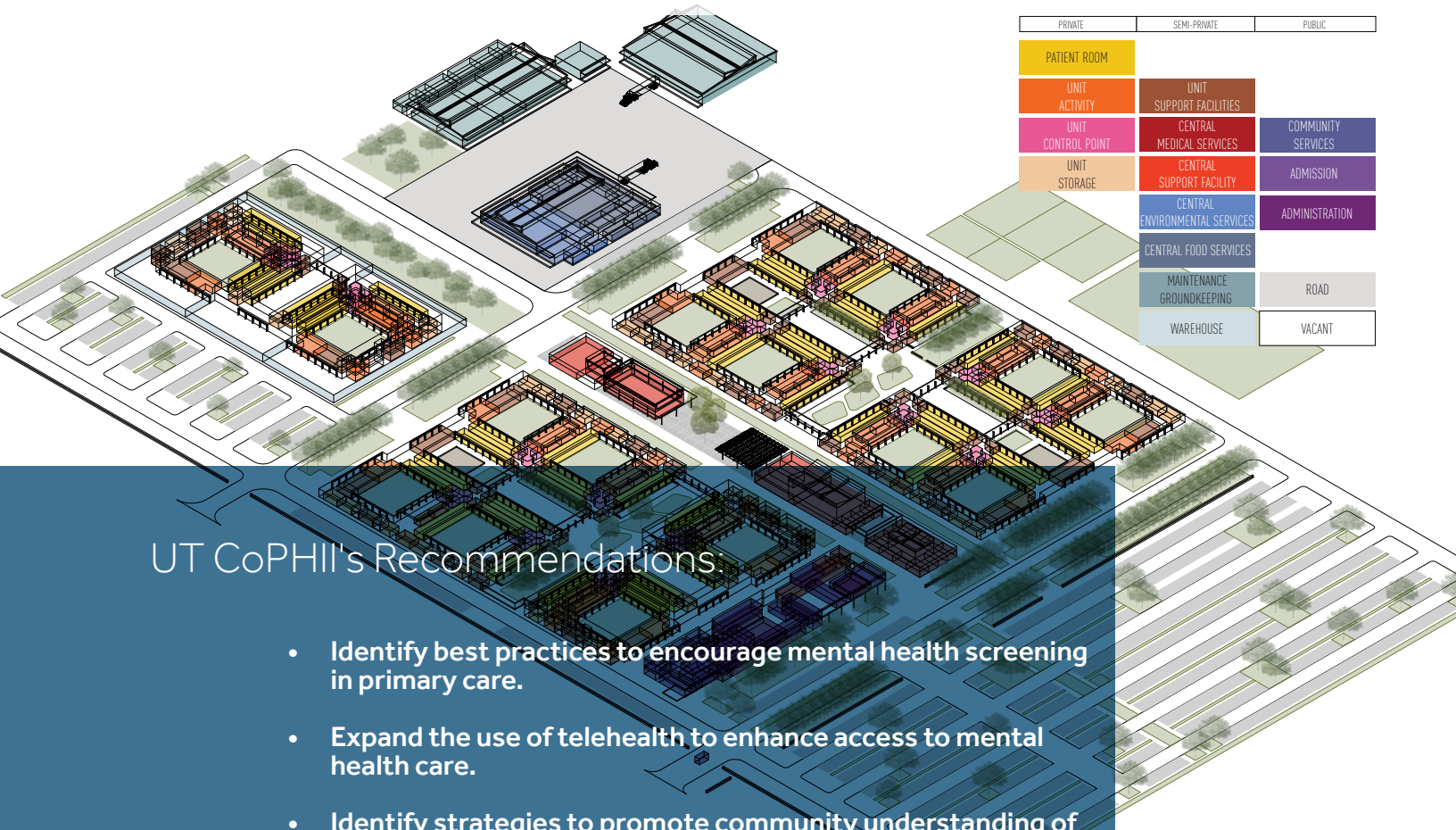


5

PRIORITIZE MENTAL HEALTH AND EXPANSION OF INTEGRATED MENTAL HEALTH SERVICES

LEGEND

OUTDOOR SPACE		
LANDSCAPE	HARDSCAPE	GREEN SPACE
PRIVATE	SEMI-PRIVATE	PUBLIC
PATIENT ROOM	UNIT SUPPORT FACILITIES	COMMUNITY SERVICES
UNIT ACTIVITY	CENTRAL MEDICAL SERVICES	ADMISSION
UNIT CONTROL POINT	CENTRAL SUPPORT FACILITY	ADMINISTRATION
UNIT STORAGE	CENTRAL ENVIRONMENTAL SERVICES	ROAD
	CENTRAL FOOD SERVICES	VACANT
	MAINTENANCE GROUNDKEEPING	
	WAREHOUSE	



UT CoPHII's Recommendations:

- Identify best practices to encourage mental health screening in primary care.
- Expand the use of telehealth to enhance access to mental health care.
- Identify strategies to promote community understanding of mental health as a means to increase use of needed services and reduce stigma related to mental health diagnosis.

METRIC OF THE IDEALIZED MODEL

PLANNING MODERN PSYCHIATRIC CARE FACILITIES A TEXAS HOSPITAL

- Increase the mental health workforce through training and recruitment.
- Continue to develop partnerships between academic institutions and the state mental health inpatient and outpatient systems.
- Advance partnerships between UT departments of psychiatry and state mental health hospitals.

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Axiometric of the Idealized Model," from A Texas Hospital: Planning Modern Psychiatric Care Facilities, Rusk State Hospital and Beyond.

Courtesy of the Center for Sustainable Development, UT Austin School of Architecture.

PRIORITIZE MENTAL HEALTH AND EXPANSION OF INTEGRATED MENTAL HEALTH SERVICES

Transforming Mental Health Care

In Texas, 6.5 million people have been diagnosed with mental illnesses and 1.5 million children live with mental health issues. Individuals with mental illness live approximately 28 years less, on average, than the general population. This decrease in life expectancy is not due to suicide, but rather to the increased burden of chronic diseases like diabetes and tobacco-related illnesses. Contributing to the mental health crisis in Texas is the shortage of psychiatrists; in 2015, 185 of the 254

counties in Texas had no psychiatrist. This adds up to 3.2 million people in Texas who are living in counties without a single psychiatrist.

Transforming mental health care through both acceleration and scaling up of evidence-based strategies across the state of Texas is essential. Approaches that integrate mental health into population health efforts are needed, as are strategies focused on early detection and treatment of mental illness in the community in which the person resides. These strategies will facilitate better health outcomes, more utilization

of community resources, and more inclusion of family in the care of people with mental illness. Such approaches will also enable more people to remain integrated in their community.

To ensure uptake of this approach, UT System needs to work collaboratively with community-academic partners to:

- 1) Provide primary care settings with the tools for a standardized screening of mental illness, such as the Patient Health Questionnaire (PHQ9).



6.5 Million
people diagnosed with mental illness in Texas



1.5 Million
children live with mental health issues



185 Counties
with no psychiatrist



205 Counties
designated as mental health Health Professional Shortage Areas



28



51

People with severe mental illness live on average 28 years less than the general population

2) Link primary care providers and rural hospitals to mental health specialist teams through telehealth.

3) Utilize a wide-variety of genotypic, phenotypic, and patient-reported data to customize treatment plans for people with mental illness.

These approaches should promote integrated behavioral health and allow primary care providers to screen and treat patients in collaboration with a mental health specialist. They should also help link disparate systems and bring customized mental health treatment to patients in the communities in which they reside.

Beyond the workforce shortage, Texas faces a critical gap in infrastructure in behavioral health. The state mental health hospital system, for example, is in very bad condition, and five of the facilities must be totally replaced. UT System worked closely with the Texas Legislature prior to and during the 85th legislative session to demonstrate this need and to outline ways in which academic institutions and state mental health hospitals could collaborate moving forward. Fortunately, the 85th Texas Legislature invested \$300 million to begin this process, and have committed to additional funding over the next two sessions to complete replacement of the facilities and improve the system.

A key component of the state's plan for replacing these facilities is that academic partnerships be developed and used to enhance the quality of mental health services provided by these facilities. Additionally, replacing these hospitals provides the opportunity for the UT health-related institutions to improve their mental health training, clinical care, and research capacity.

Members of the steering committee of the Austin State Hospital redesign effort, including (second from left) Dr. Stephen Strakowski, chair of psychiatry at UT Austin Dell Medical School. Photo courtesy of the Design Institute for Health.



As next steps in prioritizing mental health and expansion of integrated mental health services, the members of UT CoPHII recommend the following:

- Identify best practices to encourage mental health screening in primary care.
- Expand the use of telehealth to enhance access to mental health care.
- Identify strategies to promote community understanding of mental health as a means to increase use of needed services and reduce stigma related to mental health diagnosis.
- Increase the mental health workforce through training and recruitment.
- Continue to develop partnerships between academic institutions and the state mental health inpatient and outpatient systems.

Methods to achieve these goals:

- Develop collaborative agreements between psychiatric departments across Texas to design and implement strategies to best address mental health in Texas.
- Develop, test, and integrate evidence-based mental health screening methods into primary care to better diagnose and serve Texans through the life course.
- Use available data to diagnose, customize and treat depression and other mental illness in primary care settings.
- Integrate telemedicine into Federally Qualified Health Centers (FQHCs), local mental health authorities, state hospitals, rural hospitals and health centers, and other facilities serving underserved rural and urban areas.
- Deliver mental health workforce training and continuing education services throughout the UT System and to partners in practice (mental health authorities and others).
- Work with key members of the Texas legislature to develop options to address state hospitals' infrastructure problems.
- Identify opportunities to improve mental health training, clinical care, and research capacity using UT health institutions' clinicians, faculty, residents and students.
- Collaborate with UT and non-UT chairs of psychiatry, as well as other key stakeholders, to develop an actionable mental health research agenda for Texas based on state priorities.

Examples

- Since July 2015, UT System Population Health has convened a working group to collaborate on addressing mental health in Texas. This working group includes all the UT System institutions' chairs of psychiatry as well as mental health leaders from Baylor College of Medicine, Texas Tech Health Science, Texas A&M, the University of North Texas Health Science Center, and key state agencies and philanthropic organizations. In that time, the workgroup has shared lessons learned in collaborating with their local mental health providers, developed models for partnering with state mental health hospitals, and initiated the development of a mental health research plan.
- Additionally, this working group has initiated new collaborations with the state agencies to address mental health shortages at state hospitals using telepsychiatry. Partnering with the Health and Human Services Commission (HHSC), UTHealth in Houston

started a telepsychiatry program, whereby two full-time psychiatrists provide telepsychiatric support to the Wichita Falls and Vernon State Hospitals. A third collaboration is planned for the summer of 2018.

- UT Health San Antonio focuses on military populations through research and program development at the Audie Murphy VA. The program's health services research team addresses patient and caregiver needs, including epilepsy, mental health disorders, and management of clinically complex patients with mental health and chronic illness needs.
- UTRGV has a Population Health Mental Health Workgroup to better identify and address the determinants of mental health and how to best increase local capacity to serve the population.
- Since 1990, UTHealth in Houston has partnered with the state and Harris County to run the Harris County Psychiatric Center (HCPC). HCPC is the largest provider of inpatient psychiatric care

in Houston, and is also the teaching hospital within McGovern Medical School at UTHealth in Houston. UTHealth manages and operates the facility on behalf of the state and county.

- The 85th Texas Legislature invested \$300 million to begin the repair, replacement, and expansion of the state mental health hospital system. A number of UT institutions are leading the planning and redesign of state hospitals in their region.

1. East Texas: The plan includes \$91.5 million for planning and construction of a maximum-security facility in the current 2018-2019 biennium, and the development of a new East Texas mental health hospital. UT Health Science Center at Tyler is currently funded by HHSC for 44 of its 70 inpatient mental health beds at its current location. UT Health Science Center at Tyler psychiatric residents also train at Rusk.

2. HCPC at UTHealth in Houston: The plan includes constructing 132 inpatient beds and 172 lower acuity, transitional beds, along with supportive housing, during this biennium. Currently UTHealth manages the HHSC- and Harris County-owned HCPC, a 274-bed teaching facility for



Staff at the UTHealth Harris County Psychiatric Center (HCPC), the largest provider of inpatient psychiatric care in Houston, during Hurricane Harvey.



"Rendering of Unit Courtyard 2," from A Texas Hospital: Planning Modern Psychiatric Care Facilities, Rusk State Hospital and Beyond. Courtesy of the Center for Sustainable Development, UT Austin School of Architecture.

the UTHealth psychiatry department.

- 3. Austin State Hospital (ASH):** The plan includes complete replacement and redesign of the ASH facility, with \$15.5 million for pre-planning and planning. HHSC has contracted with UT Austin Dell Medical School's Department of Psychiatry to lead the

planning and pre-planning work.

- 4. San Antonio State Hospital (SASH):** The plan includes \$14.5 million this biennium for the pre-planning and planning phase. UT Health San Antonio's Department of Psychiatry has partnered with multiple local entities and

is the lead for the pre-planning and planning work. UT Health San Antonio currently does limited work at SASH, but believes that with the new facility this partnership will strengthen.