APIC MN – Mental Health, Behavioral Health & Addiction Medicine committee update

November 10th, 2022

Mental health – Behavioral Health – Addiction Medicine

Mental Health:

Emotional, social and psychological state of well being. Impacts the decisions you make and how you cope with life changes, stresses, and the way you act with other people

- Depression, generalized anxiety disorder, bipolar disorder and schizophrenia are examples of MH disorders that are not directly a result of behaviors

Behavioral Health:

The way daily cognitive habits impact overall mental and physical wellbeing. Includes factors like eating and drinking habits, exercise and addictive behavior patterns

- Substance abuse, eating disorders, gambling and sex addiction are examples of BH disorders
- BH disorders indicate a pattern of disruptive or destructive behavior that lasts several months or more

Addiction medicine:

Physical dependance on a substance, characterized by tolerance and withdrawal

- Diagnosis is substance use disorders or chemical dependency
- Alcohol detox/withdrawal can pose safety risk – may need to occur in the presence of medical supervision. Patients may need to detox in order to help identify mental health disorders.
- Often separated because of program licensing differences.

Mental Health in Minnesota

1 in 5 U.S. adults experience mental illness each year.

819,000 adults in Minnesota have a mental health condition.

That's more than **9x** the population of Duluth.

It is more important than ever to build a stronger mental health system that provides the care, support and services needed to help people build better lives.

NAMI
National Alliance on Mental Illness

More than half of Americans report that **COVID-19 has had a negative impact** on their mental health.

In February 2021, **37.2% of adults in Minnesota** reported symptoms of **anxiety or depression.**

16.6% were unable to get needed counseling or therapy.

1 in 20 U.S. adults experience serious mental illness each year.

In Minnesota, **184,000 adults** have a **serious mental illness.**

1 in 6 U.S. youth aged 6–17 experience a **mental health disorder** each year.

57,000 Minnesotans age 12–17 have depression.

Minnesotans struggle to get the help they need.

More than half of people with a mental health condition in the U.S. **did not receive any treatment** in the last year.

Of the **195,000 adults in Minnesota who did not receive needed mental health care,** 34.5% did not because of cost.

4.8% of people in the state are uninsured.

Minnesotans are over **4x more likely to be forced out-of-network** for mental health care than for primary health care — making it more difficult to find care and less affordable due to higher out-of-pocket costs.

1,784,012 people in Minnesota live in a community that **does not have enough mental health professionals.**

Resource: MinnesotaStateFactSheet.pdf (nami.org)

Mental Health in Minnesota

An inadequate mental health system affects individuals, families and communities.

High school students with depression are more than **2x more likely to drop out** than their peers.

59.3% of Minnesotans age 12–17 who have depression **did not receive any care** in the last year.

7,940 people in Minnesota are homeless and **1 in 4 live with a serious mental illness.**

On average, 1 person in the U.S. **dies by suicide every 11 minutes.**

In Minnesota, **739 lives were lost to suicide** and 195,000 adults had thoughts of suicide in the last year.

1 in 4 people with a serious mental illness has been arrested by the police at some point in their lifetime –

leading to over **2 million jail bookings** of people with serious mental illness each year.

About **2 in 5 adults** in jail or prison have a history of mental illness.

7 in 10 youth in the juvenile justice system have a mental health condition.

NAMI
National Alliance on Mental Illness

NAMI Minnesota is part of NAMI, National Alliance on Mental Illness, the nation's largest grassroots mental health organization dedicated to building better lives for the millions of Americans affected by mental illness.

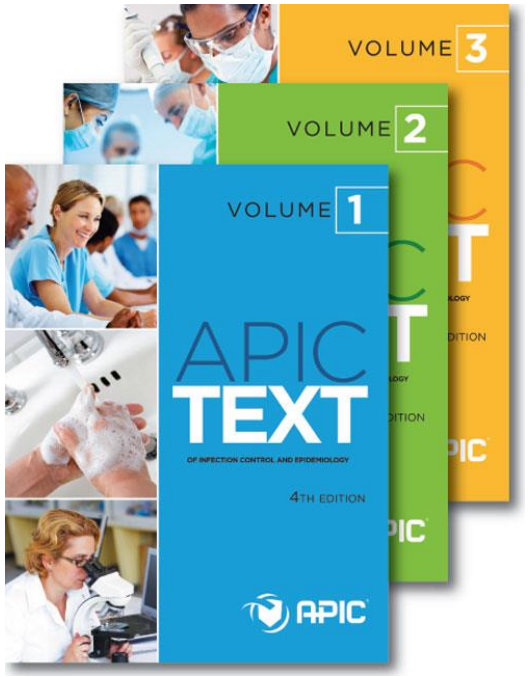
This fact sheet was compiled based on data available in February 2021. For full citations, visit: nami.org/mhpolicystats.

Resource: MinnesotaStateFactSheet.pdf (nami.org)

IP related challenges: patient behaviors

"Infection prevention in behavioral health requires application of recommended prevention strategies to the extent possible. The unique behavioral traits of some clients may pose an obstacle to traditional methods."

APIC text, 2014, Chapter 50



- Substance abuse, intoxication, mistrust of providers or certain genders, ages, and professions, paranoia, hallucinations, slowed cognition, mania
  - May give misinformation or withhold information
  - May decline screening or testing
- Withdrawal & medication changes can mimic infection
- Aggressive behaviors and poor impulse control → exposure risk
- PPE and self injury risk
- Lifestyle and living conditions → increased risk of infection

The RIPPLE EFFECT of Mental Illness

Having a mental illness can make it challenging to live everyday life and maintain recovery. Let's look at some of the ways mental illness can impact lives — and how the impact can ripple out.

PERSON

People with serious mental illness have an increased risk for chronic disease, like diabetes or cancer

18% of U.S. adults with mental illness also have a substance use disorder

Rates of cardiometabolic disease are twice as high in adults with serious mental illness

FAMILY

At least **8.4 million** Americans provide care to an adult with an emotional or mental illness

Caregivers spend an average of **32 hours** per week providing unpaid care

COMMUNITY

21% of people experiencing homelessness also have a serious mental illness

37% of people incarcerated in state and federal prison have a diagnosed mental condition

70% of youth in the juvenile justice system have at least one mental health condition

1 in 8 of all visits to U.S. emergency departments are related to mental and substance use disorders

WORLD

Depression is a leading cause of disability worldwide

Depression and anxiety disorders cost the global economy **$1 trillion** each year in lost productivity

Data from CDC, NIMH and other select sources. Find citations for this resource at nami.org/mhstats

NAMI HelpLine 800-950-NAMI (6264) | NAMI | NAMICommunicate | NAMICommunicate | www.nami.org

NAMI National Alliance on Mental Illness

IP related challenges: environment

- Hand sanitizer, disinfectant & safety risks
- Limited access to PPE
- Isolation vs. seclusion
  - Seclusion: "*the involuntary confinement of a person in a room or an area where the person is physically prevented from leaving*."
- Staff not typically used to infections/managing exposures
- Regulatory presence
- Limited access to laboratory & medical services
- Shared/communal spaces
- Therapeutic milieu
  - Weighing sometimes unknown risks of transmission vs. benefits of inpatient care

Image of Regions Inpatient Mental Health unit, photo courtesy of BWBR

Milieu Therapy

- Evidence based & best practice – a group treatment method for mental health issues
- Involves using everyday activities and a safe, conditioned environment to help people with interaction in community settings.
- Therapeutic milieu = structured community environment that promotes healthy and therapeutic learning for patients through interaction with peers and staff
- A flexible treatment intervention that may work together with other treatment methods.
- Research indicates it can help reduce conflict behaviors in people with certain types of mental illness
    - E.g., Reduces violent behavior in people with schizophrenia

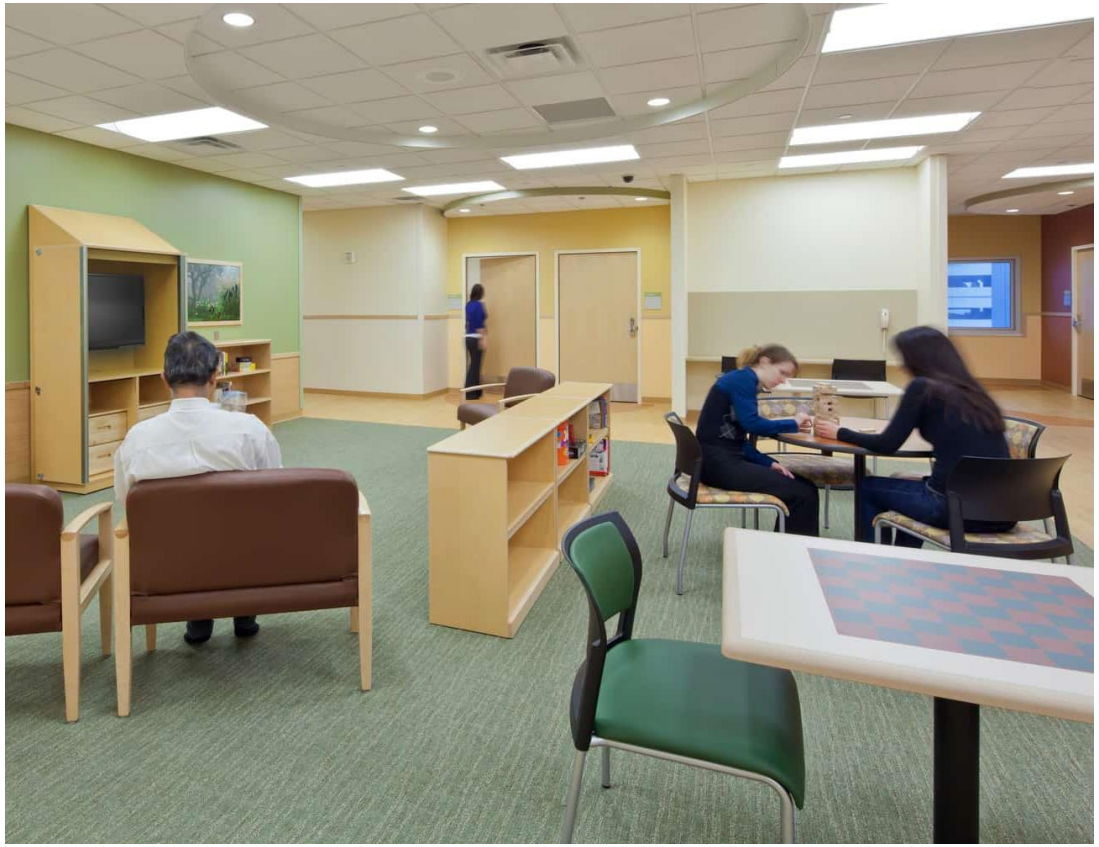


Image of Regions Inpatient Mental Health unit, photo courtesy of BWBR

Guidance

- The Centers for Disease Control and Prevention (CDC) Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings (2007):
  "Each of these settings has unique circumstances and population risks to consider when designing and implementing an infection control program…While this Guideline does not address each setting, the principles and strategies provided may be adapted and applied as appropriate."
- CMS Guidance for Infection Control and Prevention of COVID-19 in Hospitals, Psychiatric Hospitals, and Critical Access Hospitals
  "Special consideration should be given to patients with psychiatric or cognitive disabilities to ensure they are able to adhere to the COVID-19 discharge recommendations and fully comprehend the significance of the precautions."
- CMS QSO-20-23 (3/30/20)
  "Facilities will have to consider multiple solutions to quarantine and preparedness is key in addition to good infection control practices."
- SAMHSA (Substance Abuse and Mental Health Services Administration). *COVID19: Interim Considerations for State Psychiatric Hospitals.* 8 May 2020.

CDC
CENTERS FOR DISEASE CONTROL AND PREVENTION
CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES
U.S. Department of Health and Human Services

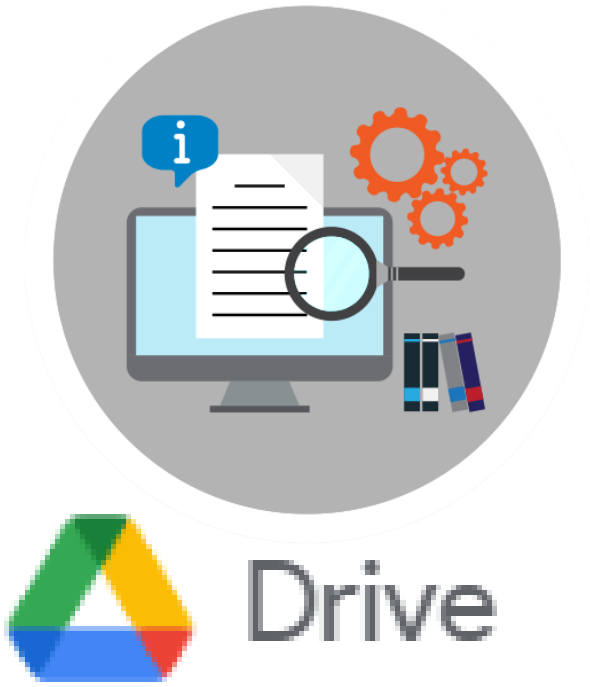
Overview of committee

- Newly formed – as of Q1 2022
- The Behavioral/Mental Health & Addiction Services committee serves as a resource and discussion group for healthcare facilities serving patients requiring behavioral health, mental health, and/or addiction related care.
- Encompasses inpatient, outpatient, and/or residential facility types, and includes both adolescent and adult patient populations.
- The committee discusses relevant issues and topics that pertain to infection prevention practices in behavioral/mental health and addiction services settings.
- Meets virtually, at least quarterly, and on an as needed basis
  - Has met 8 times in 2022

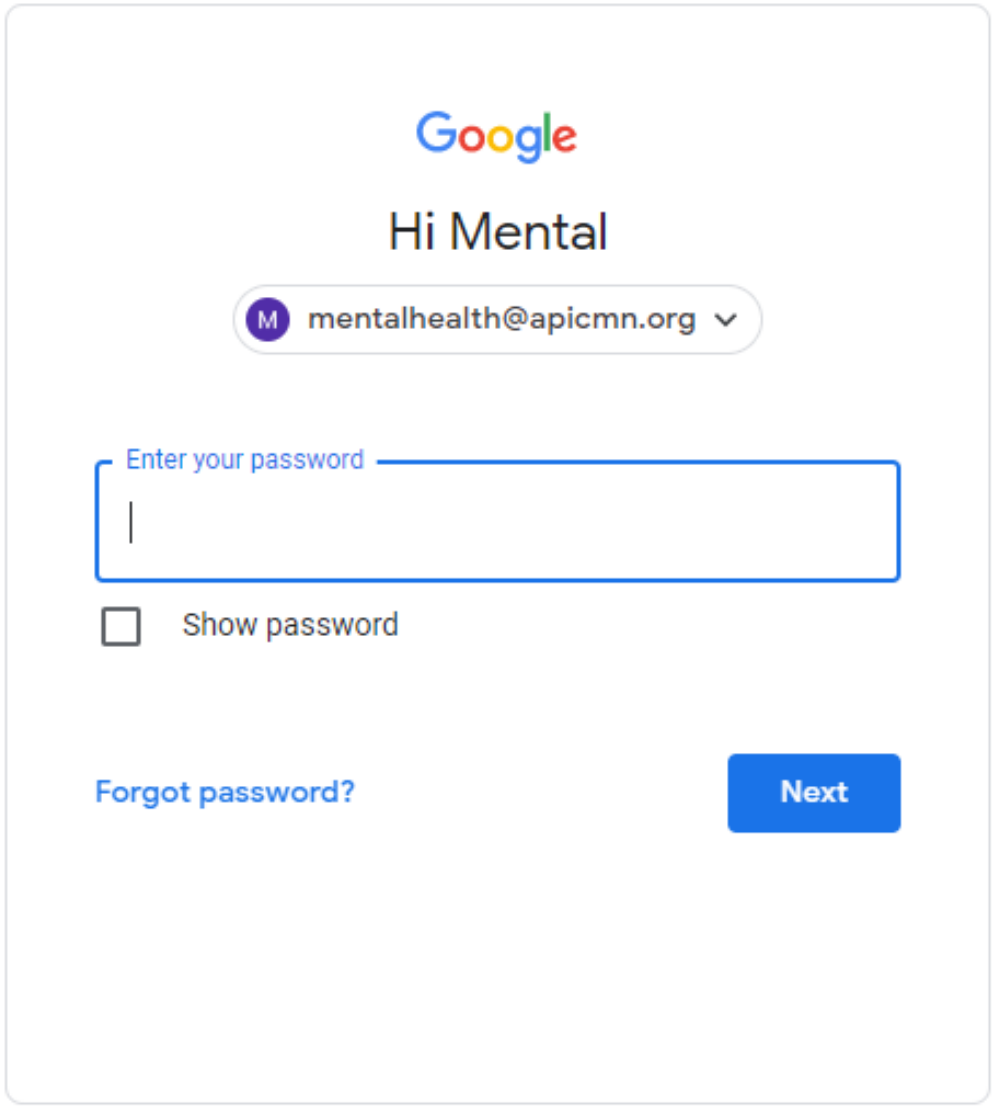
Discussion topics

- Managing containment or isolation on inpatient units
- Masking (HCW and patients)
- Testing protocols
- PPE challenges
- Outbreak investigations
- Patient cohorting concerns & challenges
- Ongoing CDC recommendation updates
- Concerns for decreased access to care

Access to shared drive



- Shared resources
- Meeting agendas & minutes
- Committee member roster



Impact of COVID recommendations on access to MH services & programming

9/23/22 Updated Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the COVID19 Pandemic

- PPE, exposure management, and testing updates
- Modified social/physical distancing language. Removed "six feet" terminology.

"Take measures to limit crowding in communal spaces"

Inpatient group therapy sizes reduced by 55-60%

Residential services down 39% due to single occupancy

Inpatient capacity reduced by 40% due to single occupancy

Transitional care unit for mental health patients reduced by 33% due to single occupancy

Quarantine process has caused significant delays in discharge – sometimes up to months

Boarding COVID+ MH pts on medical units or the ER significantly impacts quality of MH care

Partial hospitalization program capacity reduced by 33%

Short term residential substance use disorder facility capacity reduced by 33%

Data above based on feedback from 4 healthcare organizations within MN

SAMHSA
Substance Abuse and Mental Health Services Administration

TAKING CARE OF YOUR BEHAVIORAL HEALTH

Tips For Social Distancing, Quarantine, And Isolation During An Infectious Disease Outbreak

What Is Social Distancing?

Social distancing is a way to keep people from interacting closely or frequently enough to spread an infectious disease. Schools and other gathering places such as movie theaters may close, and sports events and religious services may be cancelled.

What Is Quarantine?

Quarantine separates and restricts the movement of people who have been exposed to a contagious disease to see if they become sick. It lasts long enough to ensure the person has not contracted an infectious disease.

What Is Isolation?

Isolation prevents the spread of an infectious disease by separating people who are sick from those who are not.It lasts as long as the disease is contagious.

Introduction

In the event of an infectious disease outbreak, local officals may require the public to take measures to limit and control the spread of the disease. This tip sheet provides information about **social distancing**, **quarantine**, and **isolation**. The government has the right to enforce federal and state laws related to public health if people within the country get sick with highly contagious diseases that have the potential to develop into outbreaks or pandemics.

This tip sheet describes feelings and thoughts you may have during and after social distancing, quarantine, and isolation. It also suggests ways to care for your behavioral health during these experiences and provides resources for more help.

What To Expect: Typical Reactions

Everyone reacts differently to stressful situations such as an infectious disease outbreak that requires social distancing, quarantine, or isolation. People may feel:

Anxiety, worry, or fear related to:

- Your own health status
- The health status of others whom you may have exposed to the disease
- The resentment that your friends and family may feel if they need to go into quarantine as a result of contact with you
- The experience of monitoring yourself, or being monitored by others for signs and symptoms of the disease
- Time taken off from work and the potential loss of income and job security
- The challenges of securing things you need, such as groceries and personal care items
- **Concern** about being able to effectively care for children or others in your care
- **Uncertainty or frustration** about how long you will need to remain in this situation, and uncertainty about the future
- **Loneliness** associated with feeling cut off from the world and from loved ones
- **Anger** if you think you were exposed to the disease because of others' negligence
- **Boredom and frustration** because you may not be able to work or engage in regular day-to-day activities
- **Uncertainty or ambivalence** about the situation
- **A desire** to use alcohol or drugs to cope
- **Symptoms of depression,** such as feelings of hopelessness, changes in appetite, or sleeping too little or too much

Toll-Free: 1-877-SAMHSA-7 (1-877-726-4727) | Info@samhsa.hhs.gov | http://store.samhsa.gov

[Tips For Social Distancing, Quarantine, And Isolation During An Infectious Disease Outbreak (samhsa.gov)]

2020 Mental Health By the Numbers

RECOGNIZING THE IMPACT

2020 was a year of challenges, marked by loss and the uncertainty of the COVID-19 pandemic.

We must recognize the significant impact of the pandemic on our mental health – and the importance of increasing access to timely and effective care for those who need it.

Among U.S. ADULTS:

1 in 5 experienced a mental illness

1 in 20 experienced a serious mental illness

1 in 15 experienced both a substance use disorder and mental illness

12+ MILLION had serious thoughts of suicide

1 in 5 report that the pandemic had a significant negative impact on their mental health

45% of those with mental illness

55% of those with serious mental illness

Among U.S. ADULTS who received mental health services:

17.7 MILLION experienced delays or cancellations in appointments

7.3 MILLION experienced delays in getting prescriptions

4.9 MILLION were unable to access needed care

Many struggled to get necessary mental health care, with telehealth proving an essential option.

26.3 MILLION adults received virtual mental health services in the past year

34% of those with mental illness

50% of those with serious mental illness

Data from CDC, NIMH and other select sources. Find citations for this resource at nami.org/mhstats

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NAMI National Alliance on Mental Illness

Interested in joining?
Contact mentalhealth@apicmn.org

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References

- Fedoriw, LM, Behavioral Health. In: Boston K.M., et al, eds. APIC Text. 2014. Available at: https://text.apic.org/toc/infection-prevention-for-practicesettings-and-service-specific-patient-care-areas/behavioral-health
- Centers for Disease Control and Prevention. Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the COVID-19 Pandemic. Available at: https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html
- Minnesota Department of Health. Infection Prevention and Control: COVID-19. Available at: https://www.health.state.mn.us/diseases/coronavirus/hcp/infectioncontrol.html
- Fakuta, Y., Muder, R.R. Infections in Psychiatric Facilities, with an Emphasis on Outbreaks. Infect Control Hosp Epidemiol 2013;34(1):80-88.
- Siegel J, Rhinehart E, Jackson M, et al., and the Healthcare Infection Control Practices Advisory Committee (HICPAC). 2007 Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings. Available at: https://www.cdc.gov/infectioncontrol/pdf/guidelines/isolation-guidelines-H.pdf
- US Department of Housing and Urban Development (2015). *HUD 2015 Continuum of Care Homeless Assistance Programs Homeless Populations and Subpopulations.*
- Stubbs JL, Thornton AE, Sevick J, Silverberg N, Bair A, Honer W, et al. Traumatic brain injury in homeless and marginally housed individuals: a systematic review and meta-analysis. *Lancet Public Health* 2019; 5: e19–e32.