

Closing the Gap: A Three Pronged Approach to Addressing Inequities at a Community Mental Health Center

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Background

Community mental health clinics (CMHCs) are often the primary and most consistent point of contact with healthcare for marginalized populations.

People with Serious Mental Illness (SMI) die on average 25 years earlier than the general population due to significant medical co-morbidity and limited access to preventive or ongoing medical care (Olfson, 2015)

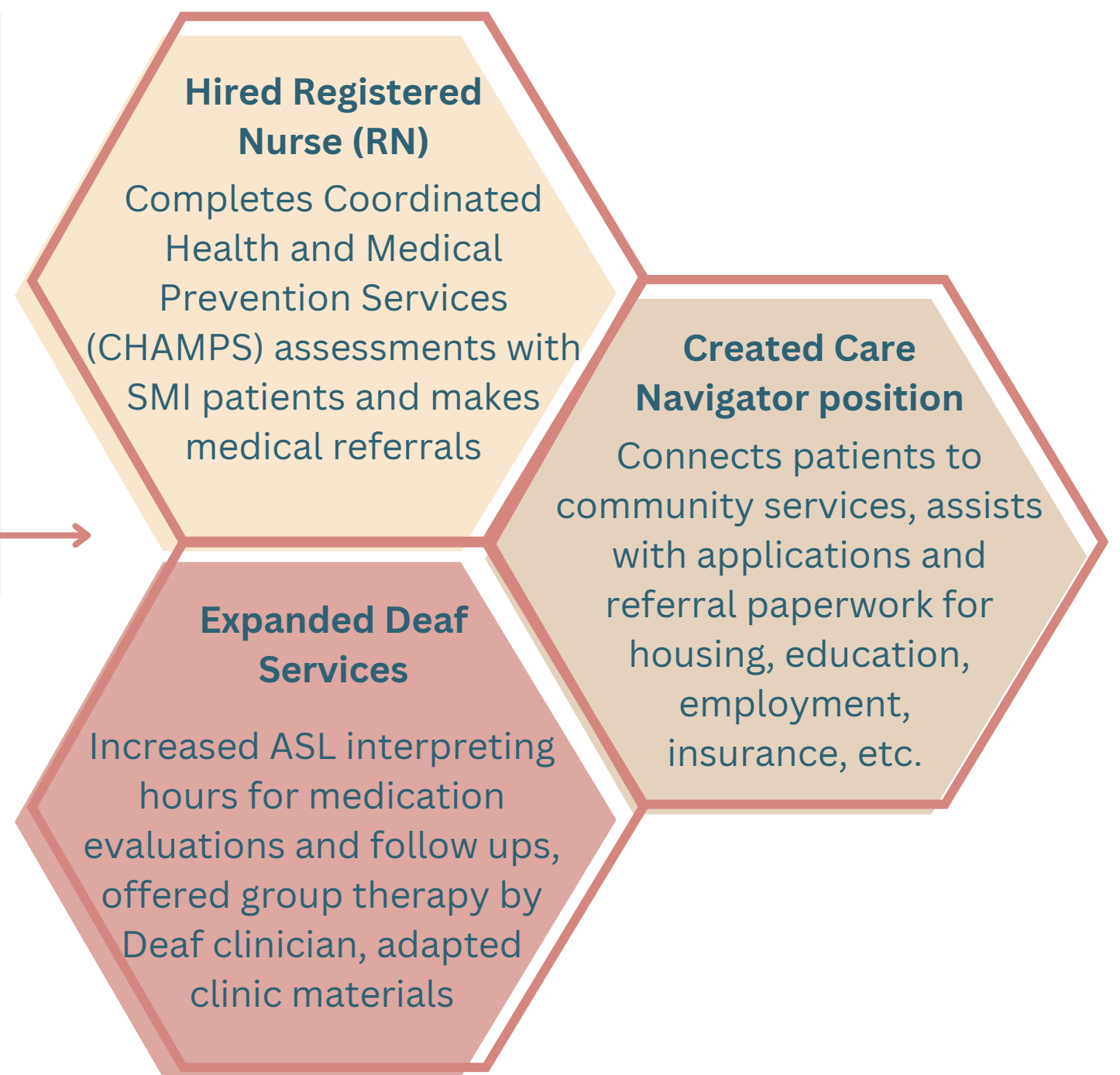
Psychiatric providers are uniquely positioned to assess and advocate for the medical and social needs of their patients.

Intervention

Freedom Trail Clinic (FTC) received a SAMHSA CMHC Grant in Sept 2021 and expanded services to three underserved populations: patients with SMI, homeless patients, and patients who are Deaf or Hard of Hearing (D/HH).

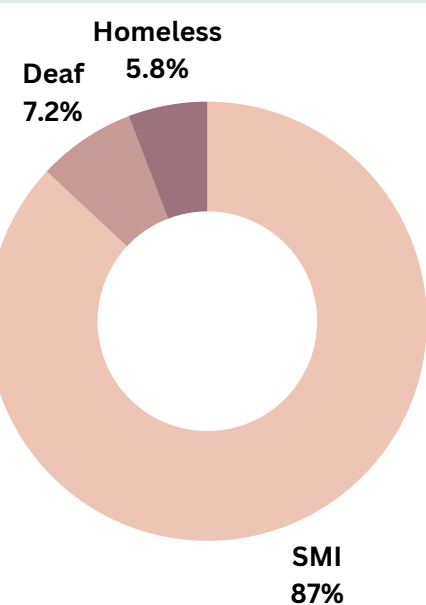
The clinic implemented reverse medical-behavioral integration focused on assessment and care coordination with outside medical services for most common preventive screenings (cancer, metabolic, vaccines).

Staffing and programmatic changes include:



Findings

272 individuals were enrolled in expanded grant services January 1, 2022- January 31, 2023



138 Patients completed CHAMPS and received help scheduling PCP or dental appointments, cancer screenings, EKGs, etc.

68 Patients used care navigator services

102 Patients received COVID, flu, shingles or pneumonia vaccines at mobile vaccine clinic

15 Deaf patients scheduled new medical evaluations

13 Groups were offered including Health & Wellness, Diabetes Management, Yoga, Healthy Relationships & Coping Skills. 3 of 13 were offered in ASL.

Conclusions

- Access to care for these three vulnerable populations has been facilitated by a few programmatic shifts.
- This effort demonstrates the feasibility and efficacy of expanding services beyond those typically provided by CMHCs.
- These early outcomes suggest larger scale implementation could reduce delays to cancer treatment, to community resources, and to ASL-facilitated psychiatric care.