**Mental Health Support for Healthcare During COVID-19**

**Tuesday, April 21, 2020 | Noon-1:00 pm**

*Participant list shared separately with this summary. Recording also available.*

Discussion opened after welcome and an antitrust reminder. This effort’s focus is organizing to provide mental health services and support to frontline healthcare providers and staff during the COVID-19 crisis. Invitees consisted of members of all 4 ICSI mental health working groups along with other members and partners. This includes healthcare administrators, mental health leaders, health plans, Emergency Departments, primary care, community mental health programs, DHS, MDH, associations, EAP, etc.

**Meeting Summary**

The main focus of the meeting was on Highlights from HealthPartners Plan, and M Health-Fairview Provider Resiliency Program, including Employee Assistance Programs (EAPs). Full notes below.

**Polling Question:**

Are you planning for-or already delivering specific mental health supports designed for specific populations within your workforce (not counting universal)? If so, which ones? 52% of meeting participants answered. Results:

Inpatient: 64%

Outpatient 55%

Executive & Team Leaders 32%

Support Staff 41%

Displaced Staff 41%

Other: 18% (Peer Support specialists; people who work with children)

ICSI is planning future sessions around these specific population needs and interventions.

**HealthPartners:** Quanah Walker, Behavioral Health and Health Plan Case and Disease Management

* Focus on using standard communication methods (weekly newsletters, etc.) to support mental health and general health. Example: Working from home and self-activities such as stress management, gratitude, etc.
* Daily COVID-19 information emails and updates. Healthy Lifestyle and stress management included. Promoting well-being and EAP.
* Well-Being page has been created for access to resources both local and national.
* Promote EAP.
* Care Delivery providers we are working on setting up support for MH providers to serve needs.
* Community resources to support those providers who are patient facing. (NAMI, etc.)
* Three main focuses: Promote Healthy Lifestyle, getting people to the resources available EAP, Crisis Resources, acknowledge the impact of the situation

**M Health-Fairview:** Jennifer Encinger Mgr EAP & Molly Beckstrom Lead Counselor EAP

Provider Resilience Program (PRP)

* Long standing Internal model EAP, CISM program, Staffing Model of Intake coordinator, employed Counselors and staff 11 counseling offices within system
* External Model: Local and greater MN organizations contract for services

Development

* 2015 started to develop Enhancement program: Provider Resilience Program: Strategies to increase provider engagement, demonstrate support and commitment to providers (physician and APP) and their needs. Internal service embedded into the organization and culture.

Implementation Components for Success

* Internal model, dedicated Lead Counselor, outreach program after an adverse patient event, increased accessibility with flexibility, embedded into the organization (attend clinic leadership meetings, advisory council, provider wellbeing committee, peer support programming).
* Integrated model, needed to be supported before, during or on non-clinical days for access by providers. The Lead Counselor travels to them to support meeting needs. Average of about 6 sessions per concern.

Outcomes

* Utilization Data: Leadership request to roll out to other providers. Average of 18% utilization since its inception.
* Satisfaction Data: 100% of participants agreed that our counselors were skilled and professional. 100% of participants agreed the flexibility scheduling made it easier for them to receive support. 89% agreed that the counselor helped them with personal life. 67% said their work would have suffered if they didn’t receive support.

How have services changed with COVID-19?

* Bulk of work now video conferencing, still short-term care to assess and refer. Bethesda is the COVID-19 site and have two counselors onsite and delivering face-to-face services.
* Both PRP and EAP now sharing “bite size” tips and resources. Examples: Domestic violence, home learning and distance learning, etc.
* Behavioral Health providers have access to standard EAP and 6 session services.

**COVID-19 Mental Health for Healthcare Playbook:**  Jodie Dvorkin, ICSI

* Reflect on past discussion and what you have shared pulled into the Mental Health Playbook.
* The group reviewed and there were general thumbs up / favorable comments on its usefulness.
* This framework is in beta stage – input welcomed.

**Open Sharing:**

* Ashly Davidson, Mayo Hospice. Things we carry: Luncheon connection for people and debrief together as an example.
* HealthPartners Park Nicollet- Natalia Dorf- Sharing that creation of a portal dedicated for providers opening today and will also create access to well-being and renewal resources. Physician led videos will be added as well.

**Next Steps:**

* Call for Speakers: Please contact Tani Hemmila, themmila@icsi.org or Jodie Dvorkin, [jdvorkin@icsi.org](mailto:jdvorkin@icsi.org)
* Have input on Framework (attached with this summary)? Please contact Jodie Dvorkin, jdvorkin@icsi.org
* Resources Web Page: Please continue to provide feedback and resources and stories/vignettes that you think are particularly valuable to post. Link: [Mental Health Support for the Healthcare Workforce website](https://www.icsi.org/mental-health-covid19/mental-health-support-for-covid-19/)