

# Developing a Digital Web to Address Behavioral Health Disparities in Rural New York State



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## BACKGROUND “WICKED PROBLEM”

Access to quality behavioral health care in rural communities has been a longstanding, national problem.

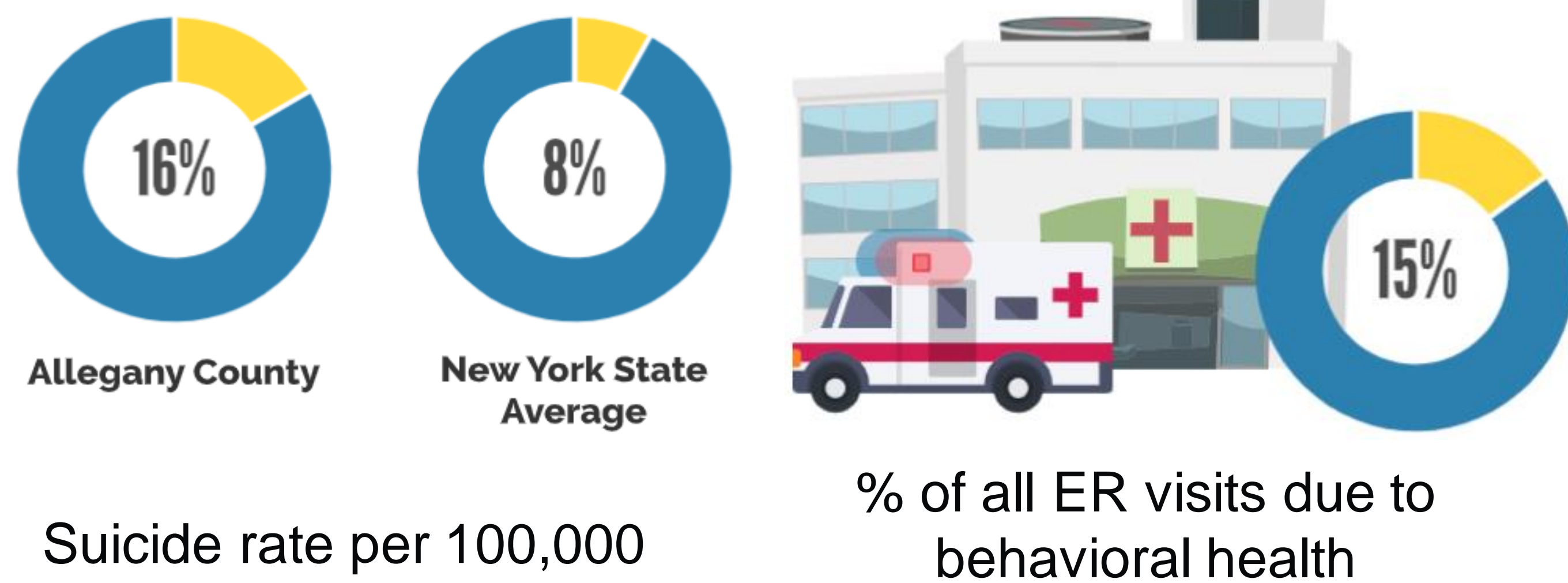
### Resulting in:

- Long wait times
- Repeated emergency room (ER) visits
- Prolonged and unnecessary suffering
- Premature need for institutional care
- Early mortality due to suicide and drug use
- Caregiver burden

## ALLEGANY COUNTY, NEW YORK

Rural county 90mi south of URMC; pop. approx. 47,000

### 2017 – 2018 Statistics

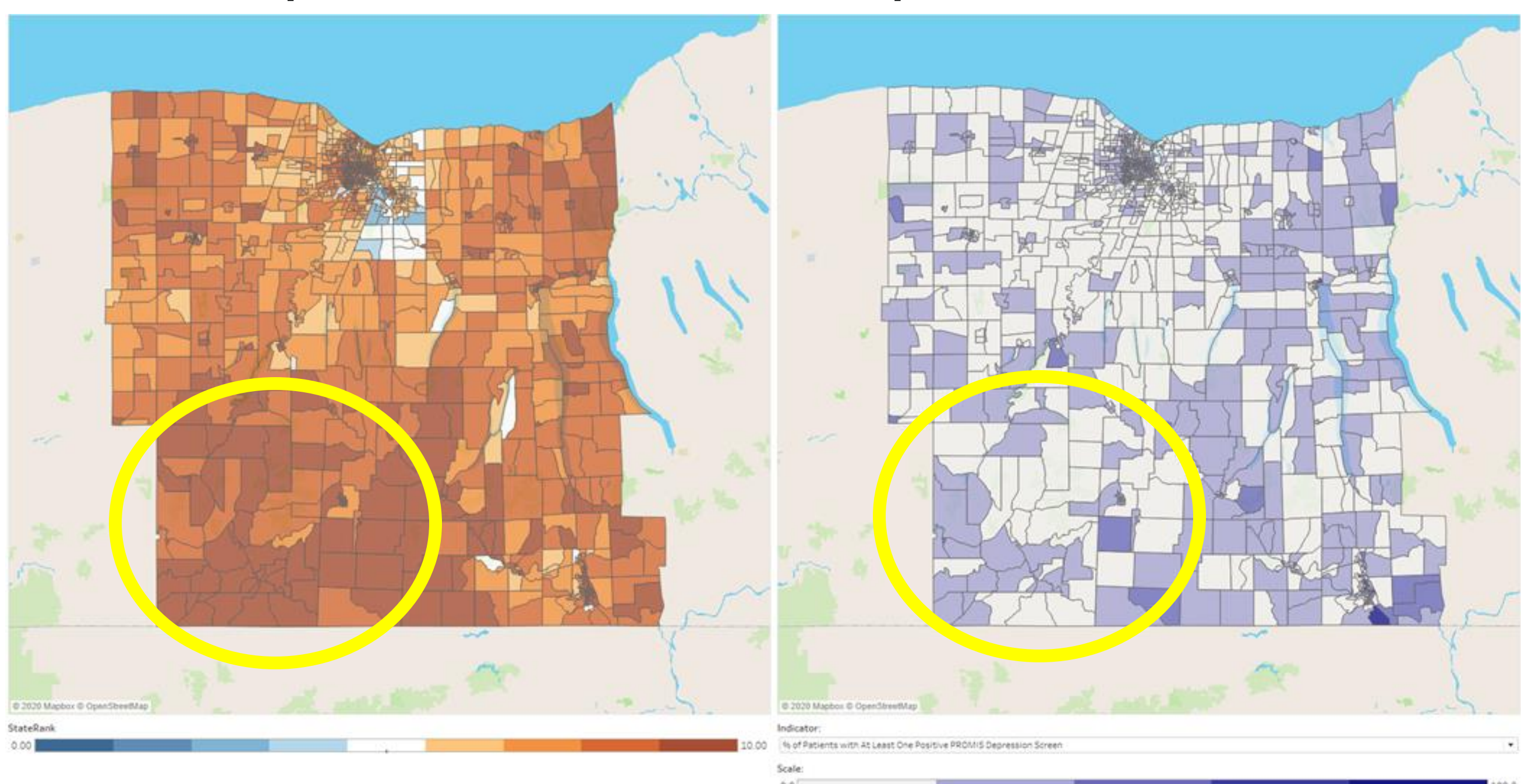


## NEEDS ASSESSMENT

### GEOMAPPING

#### 2017 – 2018 Statistics

Area Deprivation Index Depression Prevalence



## COMMUNITY STAKEHOLDER MEETING

Included representative voices from the community’s behavioral health clinic, social services, substance use clinic, managed care services, primary care, and acute hospital



## ACTIVITIES/PROGRAM

Development of technology enabled services to increase access to psychiatric care in the outpatient behavioral health, primary care, and acute hospital ER settings.



### Clarity Telepsychiatry Service

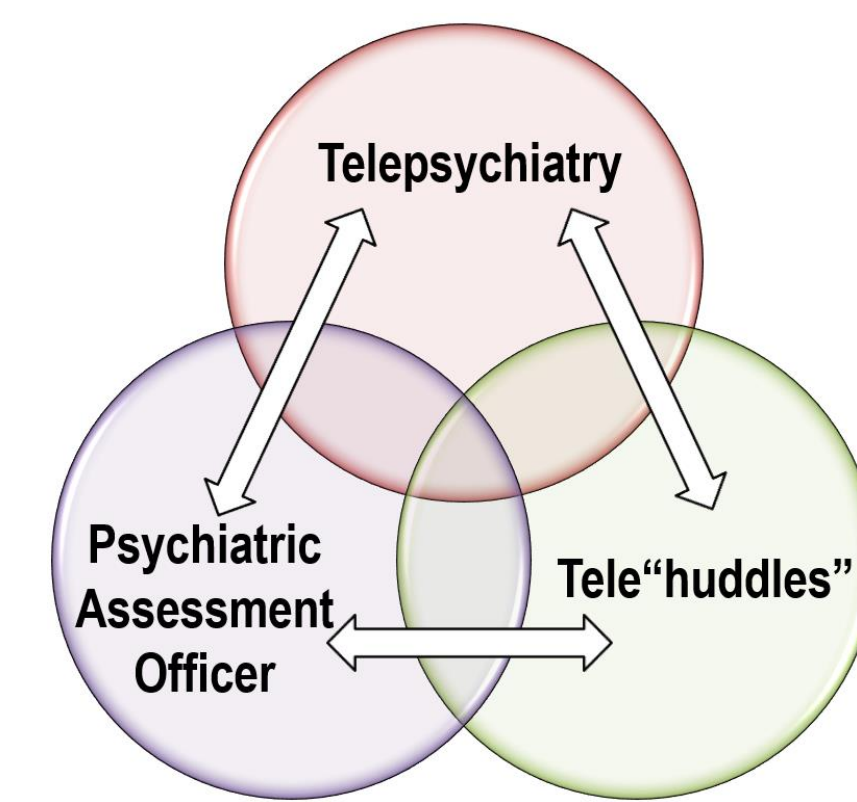
Outpatient telemedicine to support:

- Psychiatric diagnostic assessment
- Psychotropic medication management

### PAO Telepsychiatry Model

Multimodal telehealth service for Jones Memorial Hospital emergency department and inpatient medical units:

- Onsite assessment by Clarity therapist
- URMC psychiatrist weekly clinical rounding via videoconference with PAO
- URMC psychiatric provider telemedicine support to PAO



### Project ECHO PSYCH

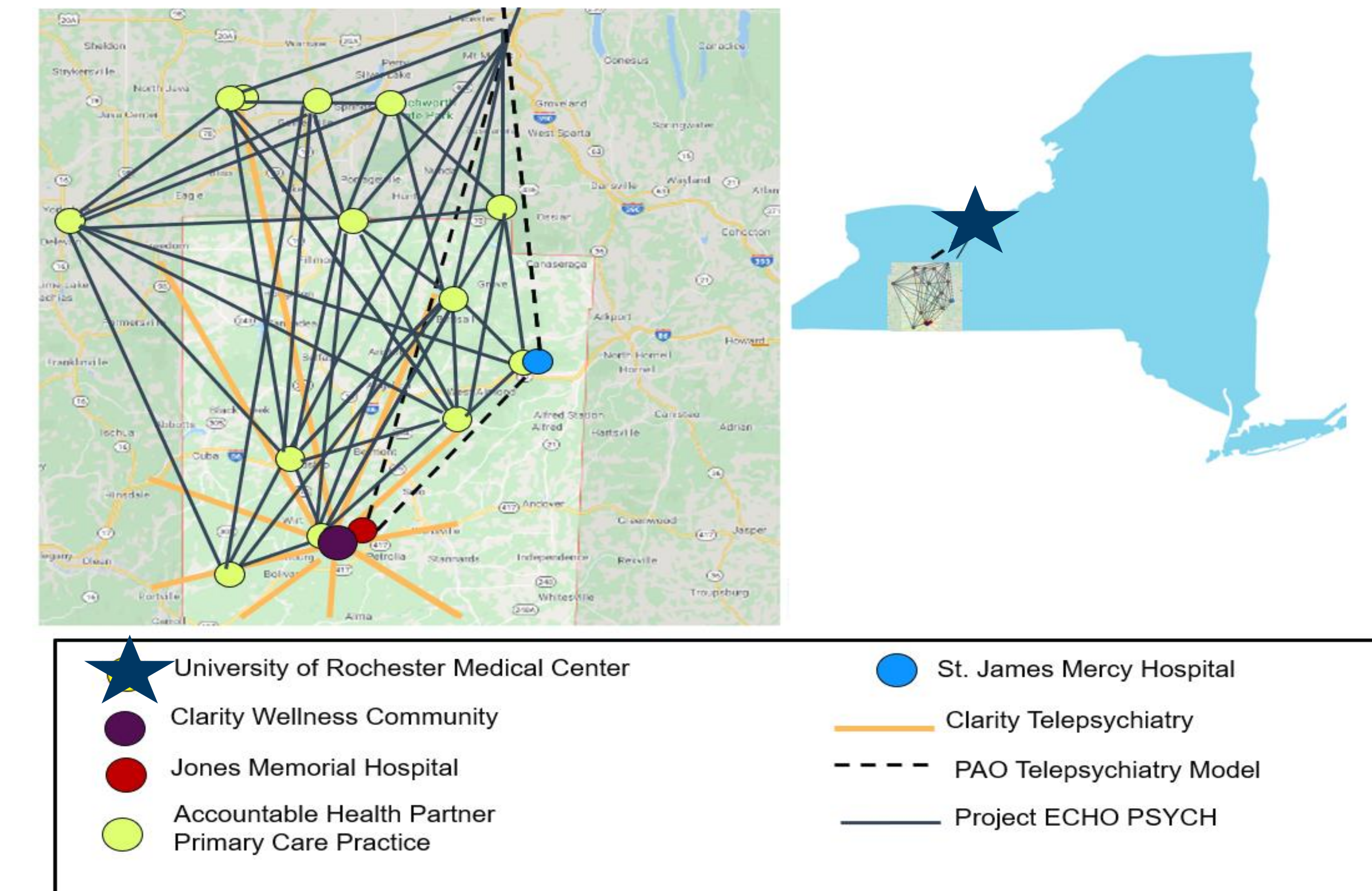
Telementoring to support Accountable Care Organization primary care sites:

- Connects URMC psychiatric specialists with community care managers



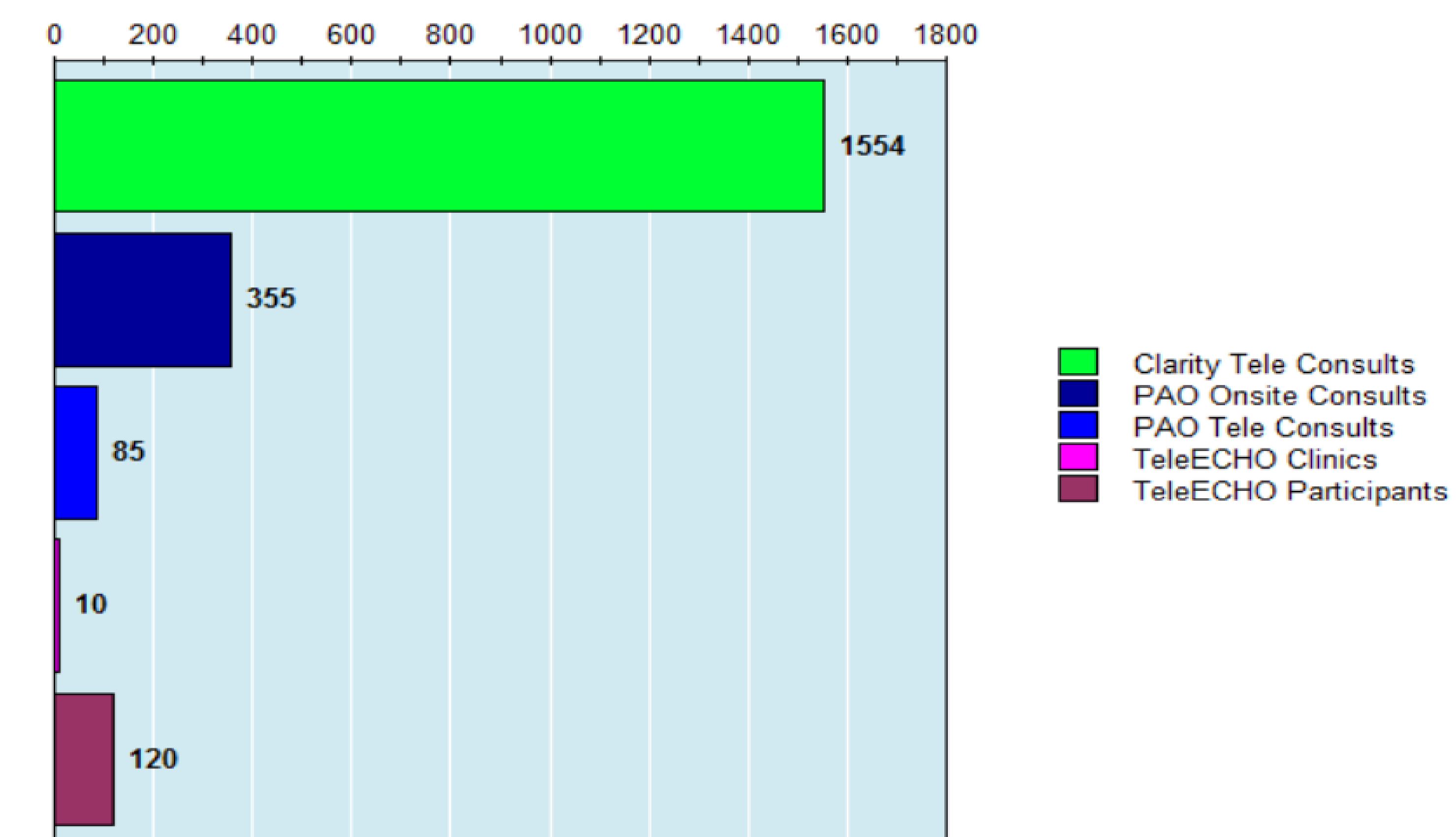
## PRELIMINARY RESULTS

### Digital Web Established in Allegany County



## PROCESS METRICS

### 10/1/2018 – 12/31/2019



## NEXT STEPS

- Continue community impact evaluation
- Begin dissemination of lessons learned
- Explore sustainability