



USING PROJECT ECHO TO ADDRESS YOUTH MENTAL HEALTH IN RURAL NEW HAMPSHIRE

Coproduction Lab Seminar

Jackie Pogue





NH Rural Behavioral Health Workforce Centers- Northern Border Region

Grantor: Health Resources and Services Administration (HRSA)

Grantee: Dartmouth Health

Term: 9/2021 – 8/2024

Funding: \$1.4M

Region: 6 HRSA-defined rural counties

Goal: Provide training and mentorship programs for the behavioral health workforce in rural New Hampshire

Network: Collaboration with Maine, Vermont, and New York



Project Team



Program Director: Barbara Dieckman, MS, MBA (Director of Knowledge Map and Patient Education, Dartmouth Health)

Program Manager: Jacqueline Pogue, MPH, MA (Research Project Manager at Dartmouth College)

Clinical Advisor: Julie Balaban, MD, FAPA, DFAACAP (Section Chief - Child and Adolescent Psychiatry; Co-Director - Psychiatry Outpatient Clinics; Assistant Professor of Psychiatry and Pediatrics; Dartmouth Health)

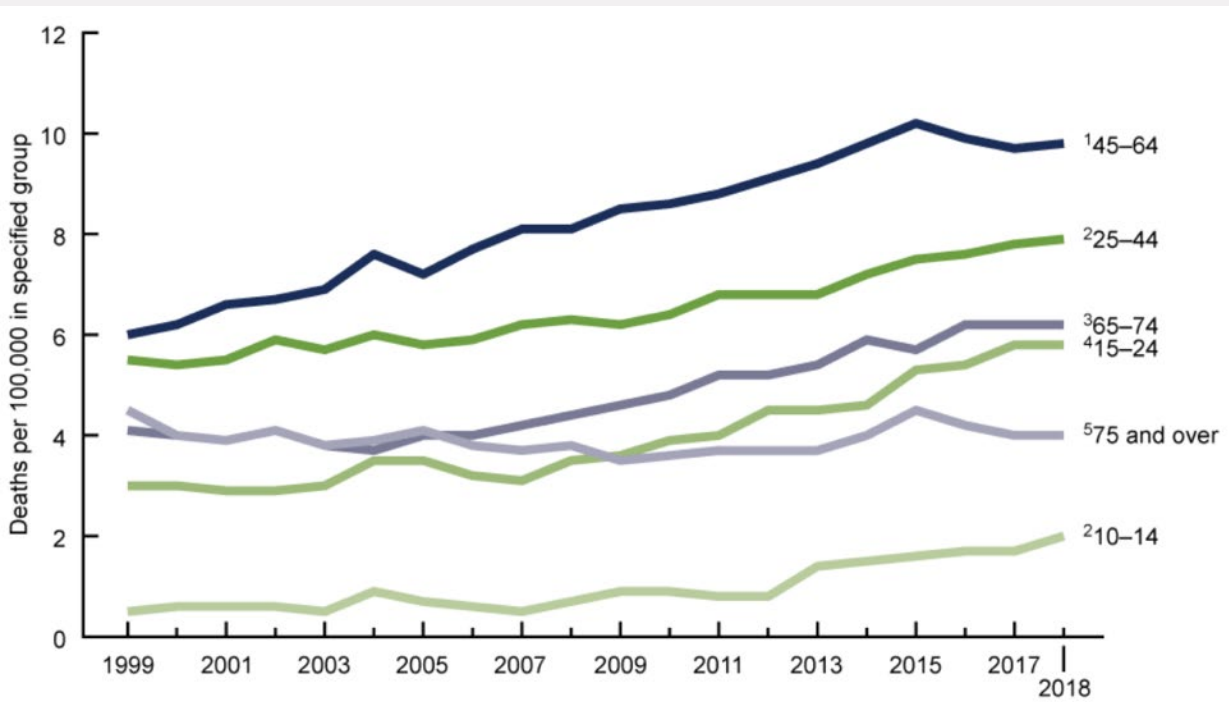
Strategic Advisor: Mark Belanger, MBA (Advisor to Dartmouth Health, Founder and CEO of Integration Sciences)

Super Supporter: Sally Kraft (VP of Population Health, Dartmouth Health)

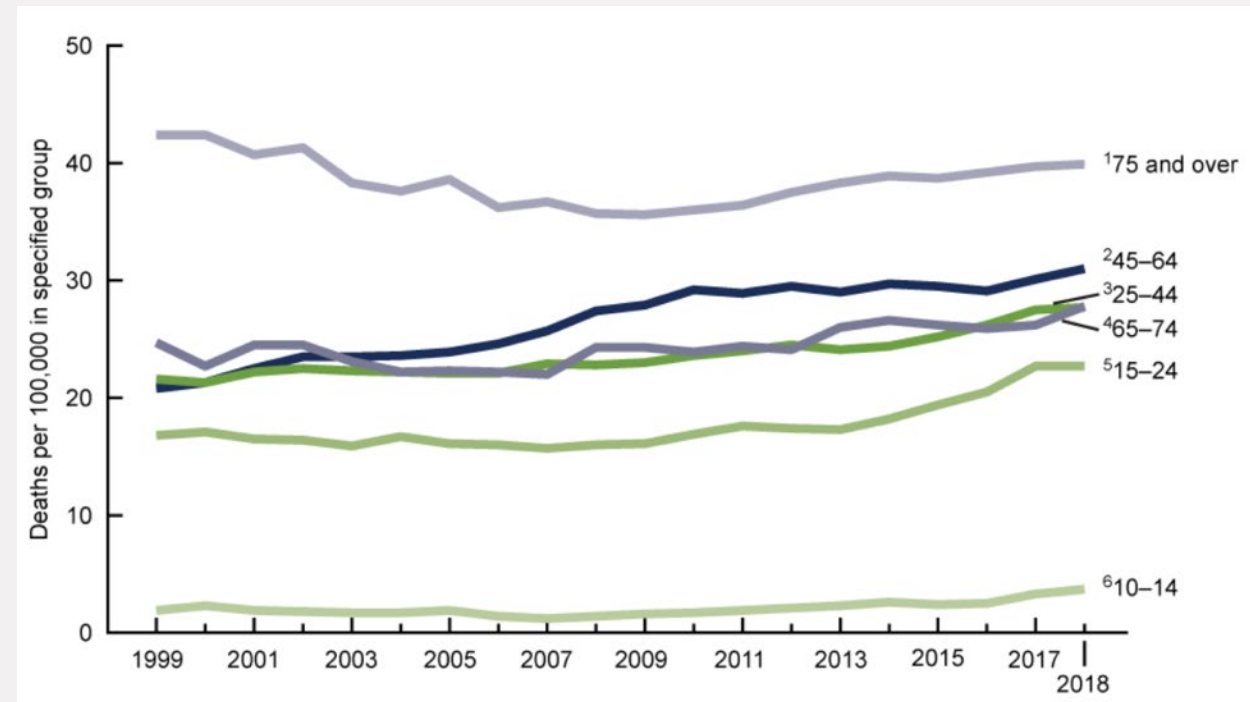


Suicide rates are trending upward

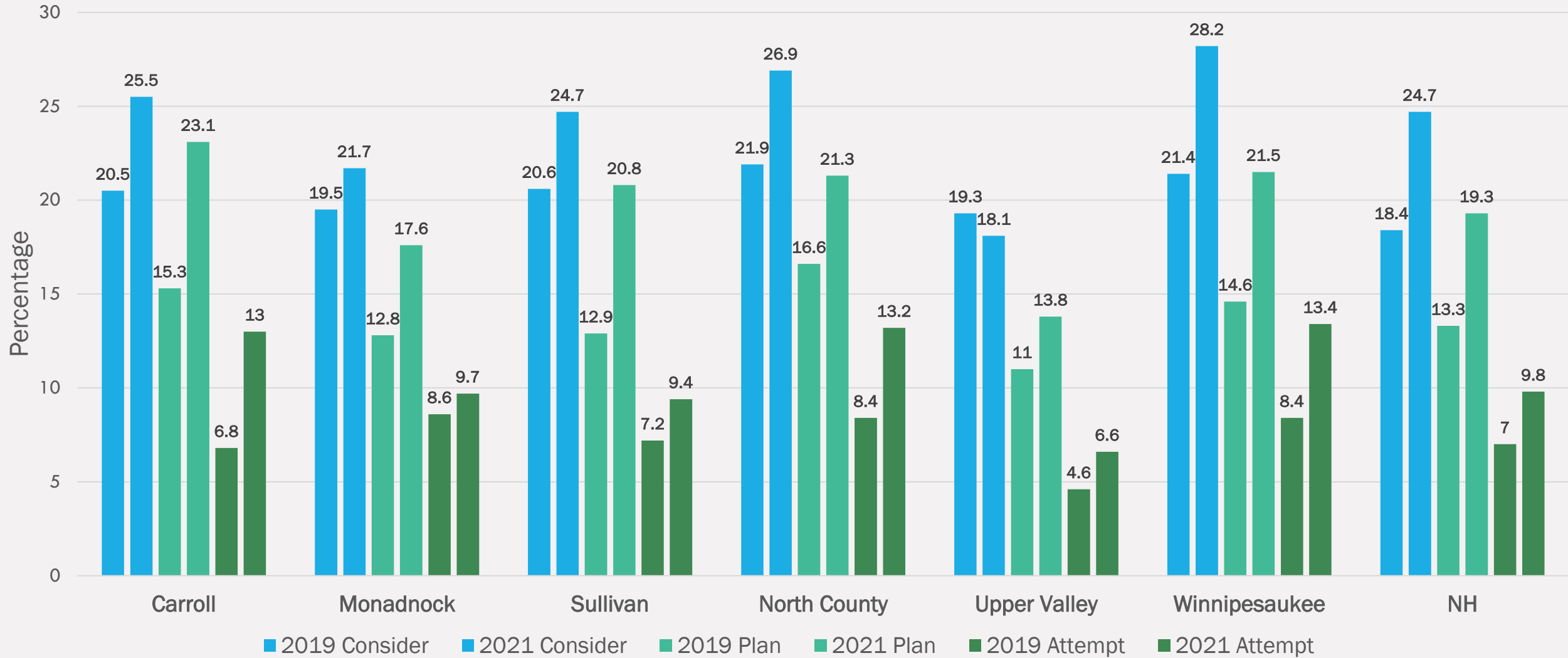
Suicide rates for females in the United States by age group, 1999–2018



Suicide rates for males in the United States by age group, 1999–2018



Percentage of New Hampshire High School Students with Suicidal Behavior, 2019-2021



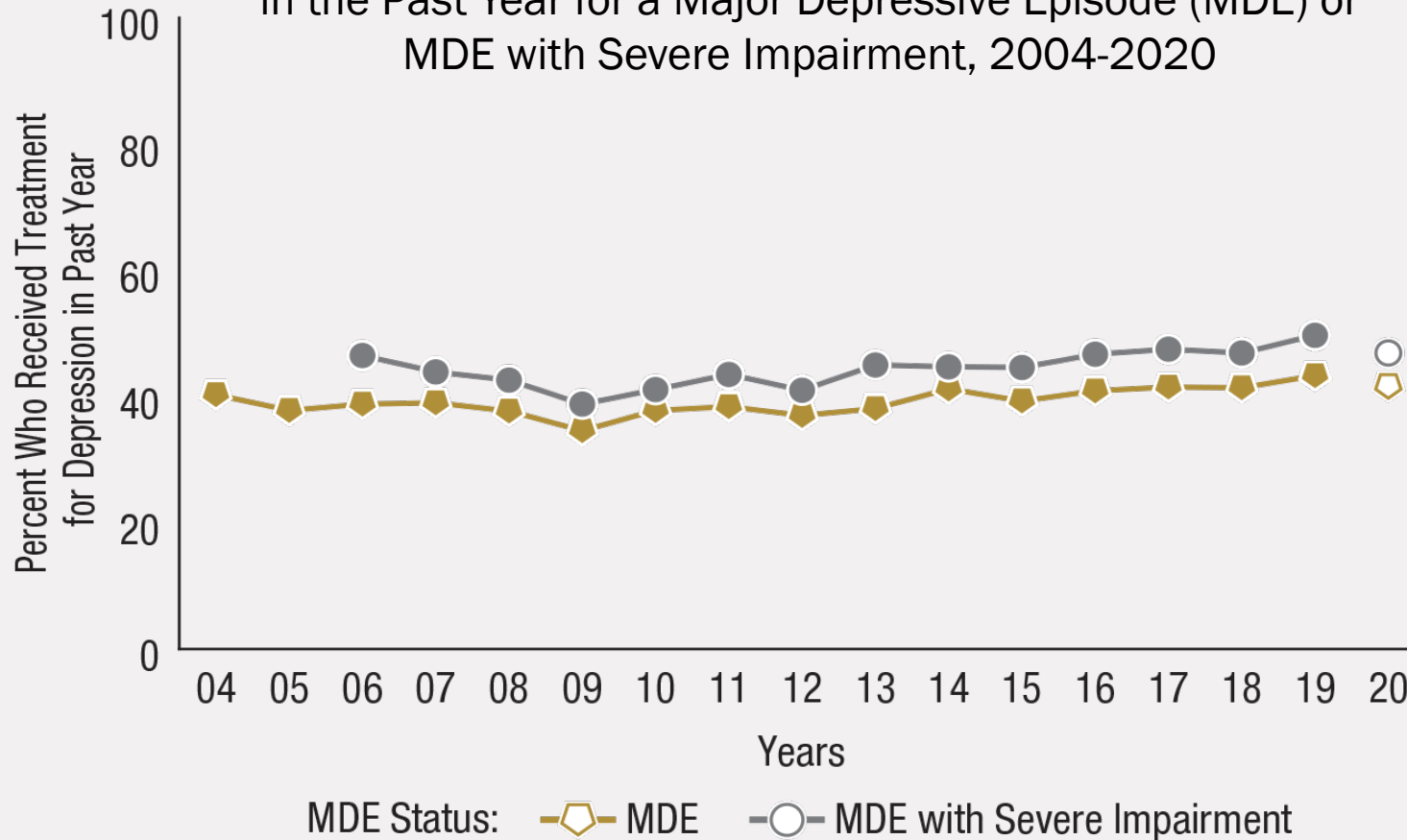
Mental Health Indicators from the Primary Care Practices at Valley Regional Hospital, 2020-2021

	2020	2021
	n=169	n=263
Youth mental health indicators		
-Felt depressed or sad most days, even if you felt okay	28.4%	33.6% ↑
-Serious thoughts of Suicide	6.5%	9.1% ↑
-Attempted suicide	5.3%	9.5% ↑
-Patients with PHQ-9 scored 10 or higher (depression screen)	20.1%	24.5% ↑
-Patients with GAD-7 scored 10 or higher (anxiety screen)	18.9%	19.8% ↑

Source: Region 1 Integrated Care Project at Valley Regional Hospital in Claremont, NH

Treatment is not keeping pace with need

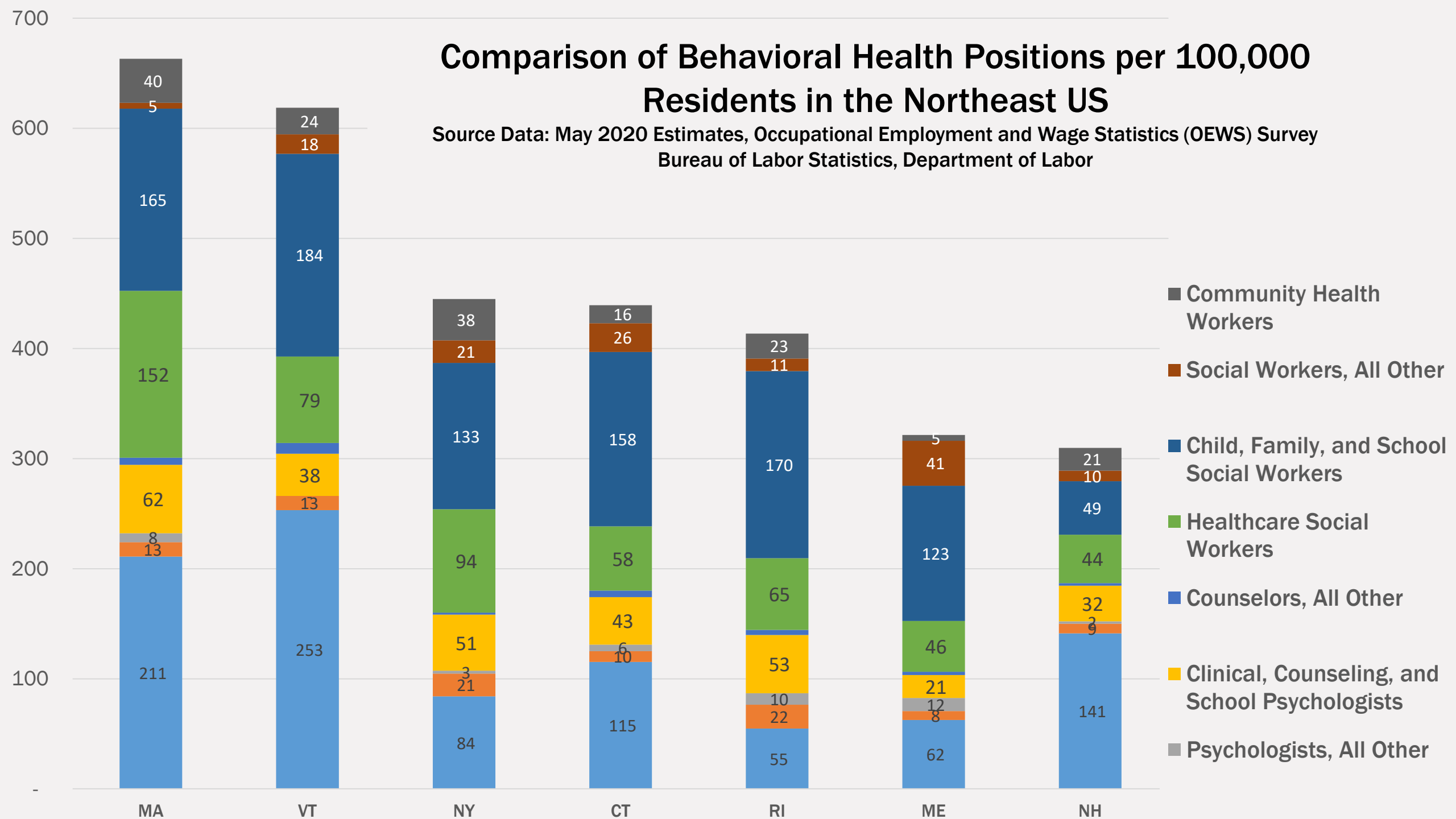
Youth 12-17 in the United States Who Received Treatment in the Past Year for a Major Depressive Episode (MDE) or MDE with Severe Impairment, 2004-2020



Source: 2020 National Survey on Drug Use and Health, Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health and Human Services, <https://www.samhsa.gov/data/report/2020-nsduh-annual-national-report>

Comparison of Behavioral Health Positions per 100,000 Residents in the Northeast US

Source Data: May 2020 Estimates, Occupational Employment and Wage Statistics (OEWS) Survey
Bureau of Labor Statistics, Department of Labor


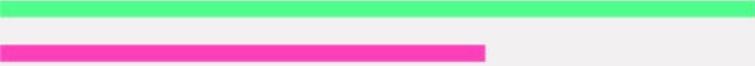


Indicators of Community Mental Health Center Workforce Challenges in NH, May 2021

	Open Positions	Clinical Vacancies	Vacancy Rate	12-Month Turnover Rate	Days to Fill Positions
Rural CMHCs					
Northern	31	26	12.8%	15.2%	169
WCBH	18	18	10.9%	36.9%	143
Lakes	28	21	13.6%	23.9%	95
MFS	27	25	11.6%	25.0%	130
Urban/Suburban CMCHs					
Riverbend	48	43	10.9%	27.0%	85
Nashua	26	22	9.3%	22.9%	92
Manchester	28	23	6.0%	15.7%	124
Seacoast	20	12	6.9%	13.3%	97
CP	31	29	16.6%	23.6%	99
CLM	31	30	12.8%	22.2%	65
Mean			10.5%	22.6%	96



Focus Groups and Stakeholder Interviews, early 2022

- NH School Counselor Association
 - NH School Counseling Directors Association
 - NAMI NH Suicide Prevention
 - Hampstead Hospital
 - NH Bureau of Children's Behavioral Health
 - Foundation for Healthy Communities
 - Endowment for Health
 - NH Student Assistance Program
 - Dartmouth Health- Community Health
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Themes from Stakeholders

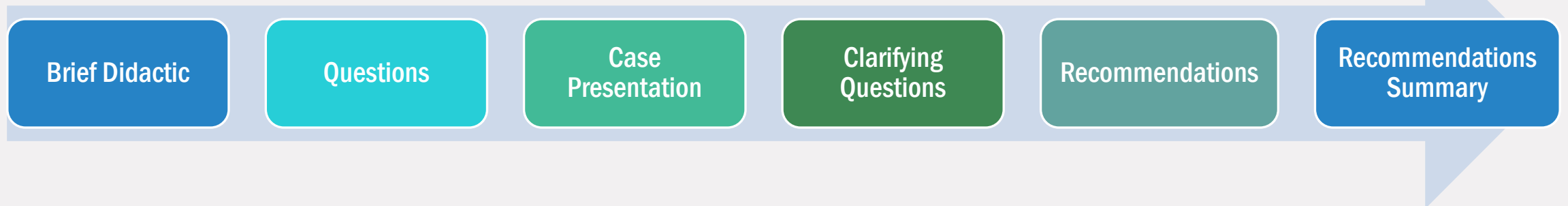
- Higher frequency and intensity of student mental health distress
- Students having a hard time staying in the classroom
- More social and behavioral issues at school
- Lack of available resources (therapists, inpatient services, help for families)
- Lack of understanding of the mental health system
- Need for improved care coordination
- Insufficient training for many school staff, including counselors



Project ECHO (Extension For Community Healthcare Outcomes)

Project ECHO is an “all teach, all learn” framework that uses virtual technology to support learning, mentoring, and peer support.

Components of ECHO:





Core Panelists

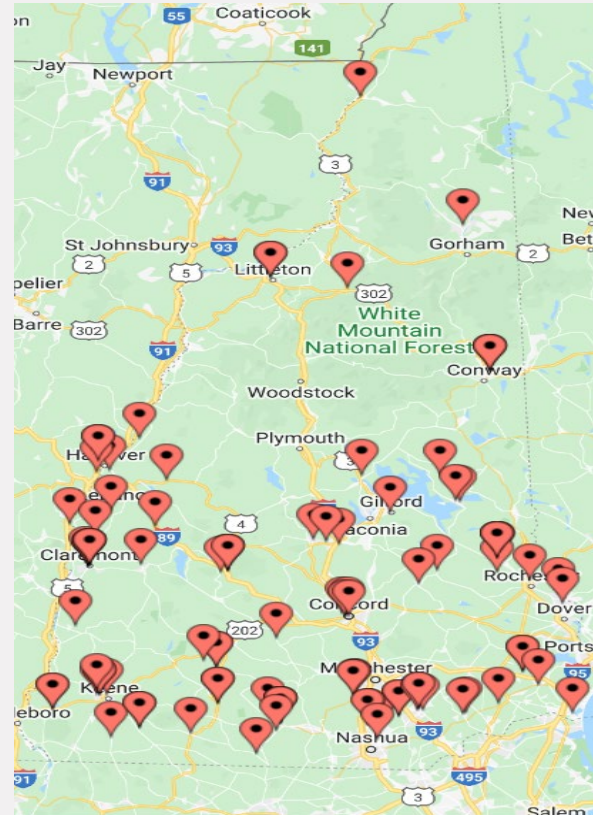
- Julie Balaban, MD, Course Director, Dartmouth Health
- Barb Dieckman, MS, MBA, Director, Dartmouth Health
- Jackie Pogue, MA, MPH, Facilitator, Dartmouth College

- Kattie McKinnon, MA, Student Assistance Program Coordinator, White Mountain Regional High School
- Lisa Hayward, PhD, Prevention Coordinator, NH Dept of Education Office of Social and Emotional Wellness
- Steve Beals, Principal, Alvirne High School
- Rabbi Robin Nafshi, Temple Beth Jacob
- Mark Belanger, MBA, Advisor, Dartmouth Health



Series 1 for School Staff, April - May 2022

Nurses	34
School Counselors	28
Principals/other roles in education	13
Social Workers	13
Health Education coordinators	10
Psychologists	4
Other	13
Total	115



Topics
Recognizing and responding to students at serious risk of harm
Understanding inpatient psychiatric hospitalization
Recognizing and responding to students in distress
Improving school partnerships with community mental health and primary care services
Preparing for the next school year- Social emotional learning

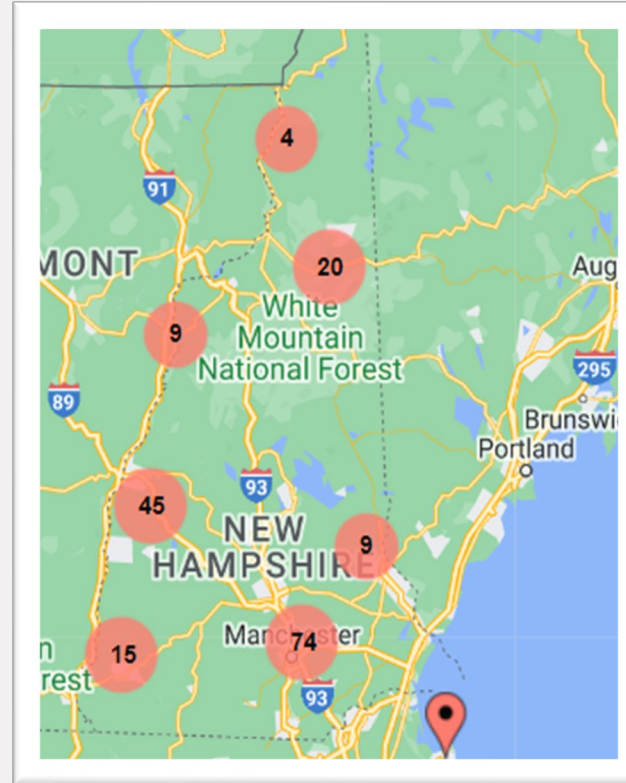
Average attendance- 52



Series 2 for School Staff, October - December 2022

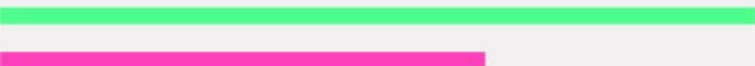


Nurses	46
School Counselors	30
Principals/other roles in education	21
Social Workers	10
Health Education coordinators	19
Psychologists	10
Nursing students	4
Transitional + Rehab counselors	3
Family Peer Support Specialists	2
Other	31
Total	176



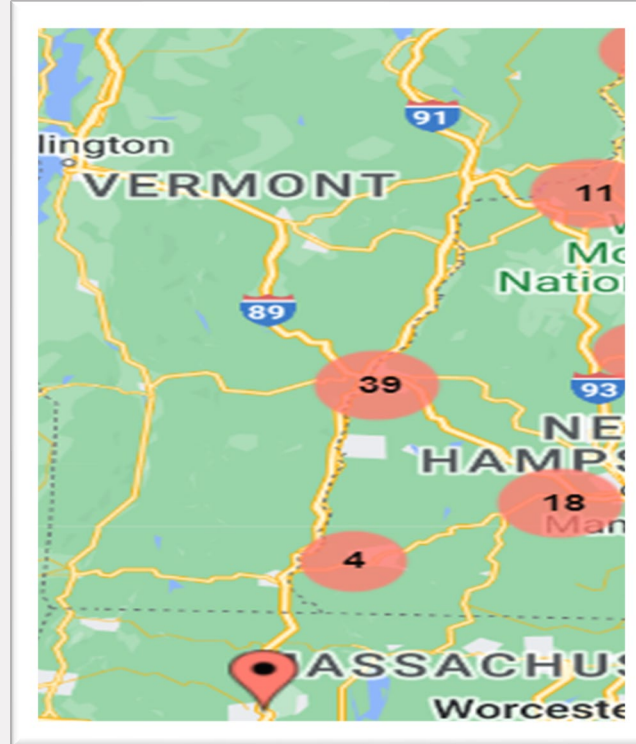
Topics
Recognizing and responding to students at serious risk of harm
Understanding inpatient psychiatric hospitalization
Recognizing and responding to students in distress
Improving school partnerships with community mental health and primary care services
Partnering with families

Average attendance- 59



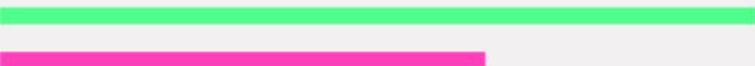
Series 3 for Community Youth Supporters, May - June 2023

Principals/other roles in education	21
Librarians	18
Health Education coordinators	16
Nurses	13
Administrators/Directors	11
Athletic coaches + Camps	4
Legal	4
Child Welfare	3
School Psychologists	2
Other	19
Total	111



Topics
Recognizing youth in distress
What might we be seeing? The underlying causes
What can we do about it? Building resiliency and connection
Getting help when we need it- resources and working with families
Practical strategies for this moment in time

Average attendance- 50



All ECHOs Total

Nurses	93
School Counselors	58
Principals/other roles in education	55
Health Education coordinators	45
Social Workers	23
Librarians	18
Psychologists	16
Administrators/Directors	11
Athletic coaches + Camps	4
Legal	4
Nursing Students	4
Child Welfare	3
Transitional + Rehab counselors	3
Family Peer Support Specialists	2
Other	63
Total	402

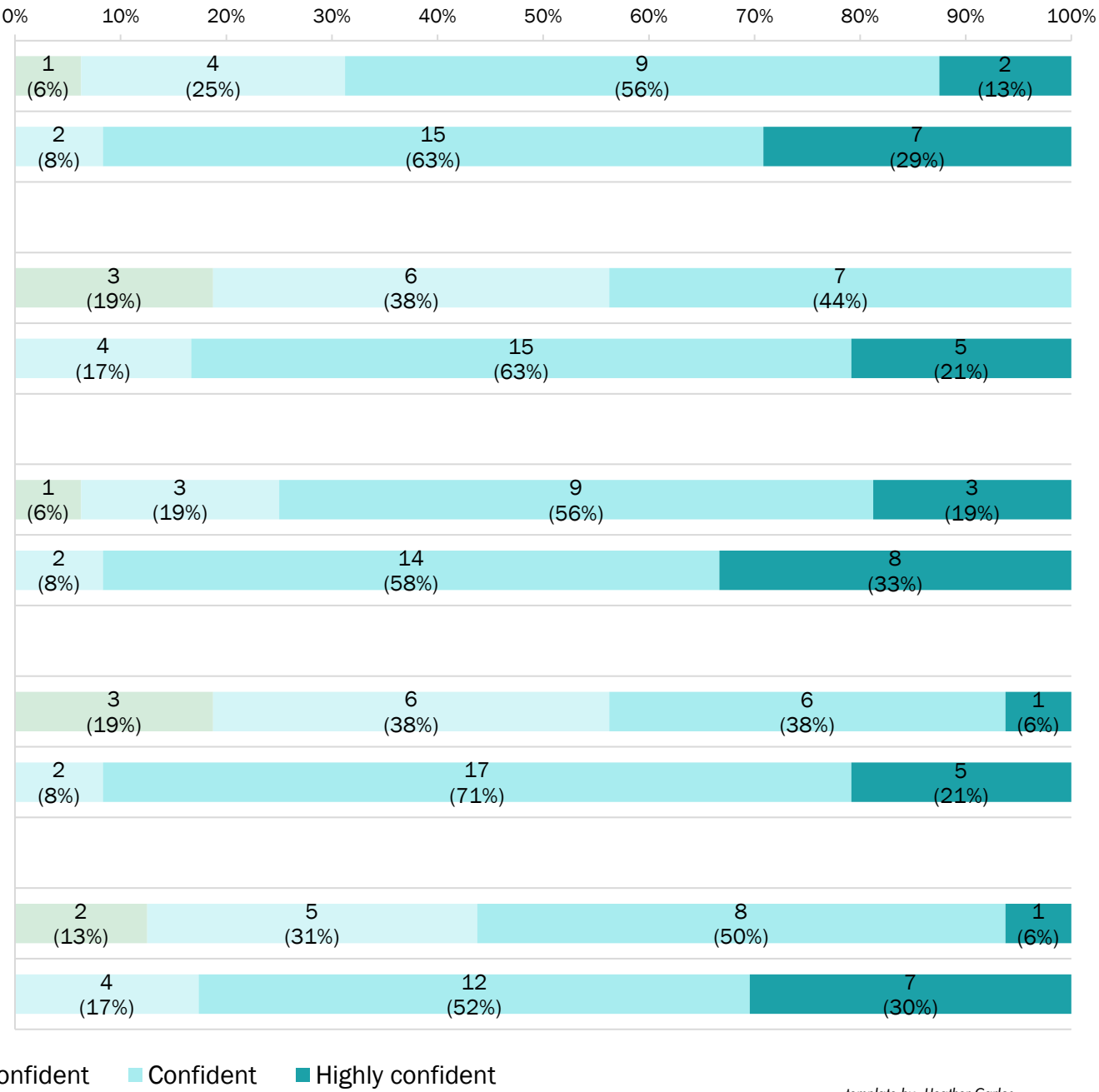
Case Presentations



- How to help disengaged, languishing high school students
- Middle school students are bullying and acting out in class
- Sharp increase in middle school students' negative and hate speech
- Helping parents support their kids
- LGBTQ+ students returning to school after release from the hospital
- Library with many unaccompanied children after school
- Library wanting to better support queer, neurodiverse, and bullied children
- Religious community experiencing uptick of kids in faith and identity crises



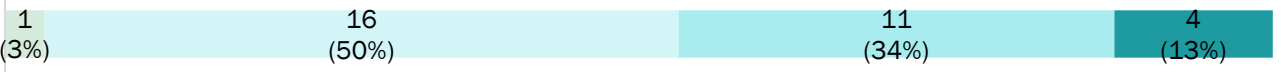
KEEPING STUDENTS SAFE ECHO #1 PRE/POST SURVEY
APRIL 5 - MAY 31, 2022 (SOURCE: REDCAP SURVEY)



**KEEPING STUDENTS SAFE ECHO #2 PRE/POST SURVEY
OCTOBER 18 - DECEMBER 13, 2022 (SOURCE: REDCAP SURVEY)**

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

PRE - Identifying students at high risk



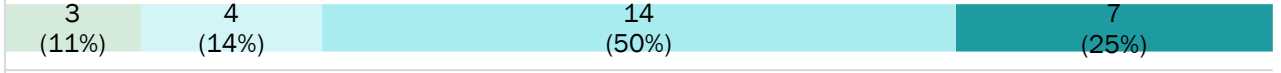
POST - Identifying students at high risk



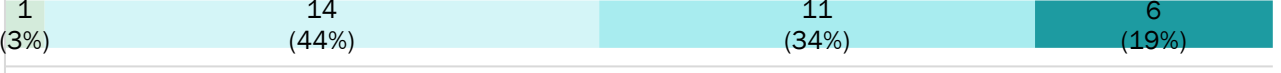
PRE - Managing students at high risk



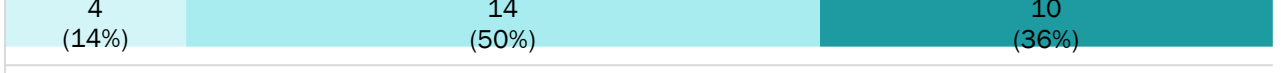
POST - Managing students at high risk



PRE - Identifying students in distress



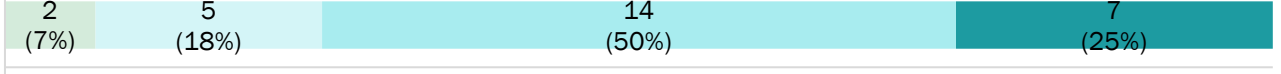
POST - Identifying students in distress



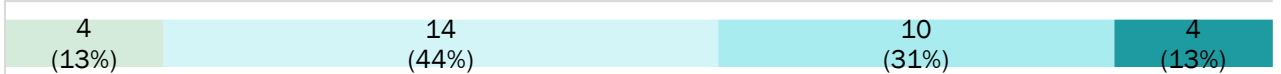
PRE - Managing students in distress



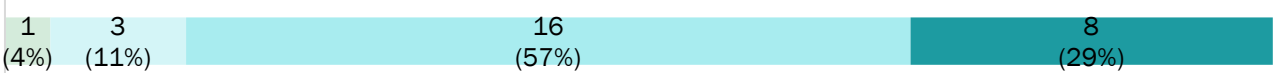
POST - Managing students in distress



PRE - Interacting with and supporting parents of children with significant distress or safety concerns

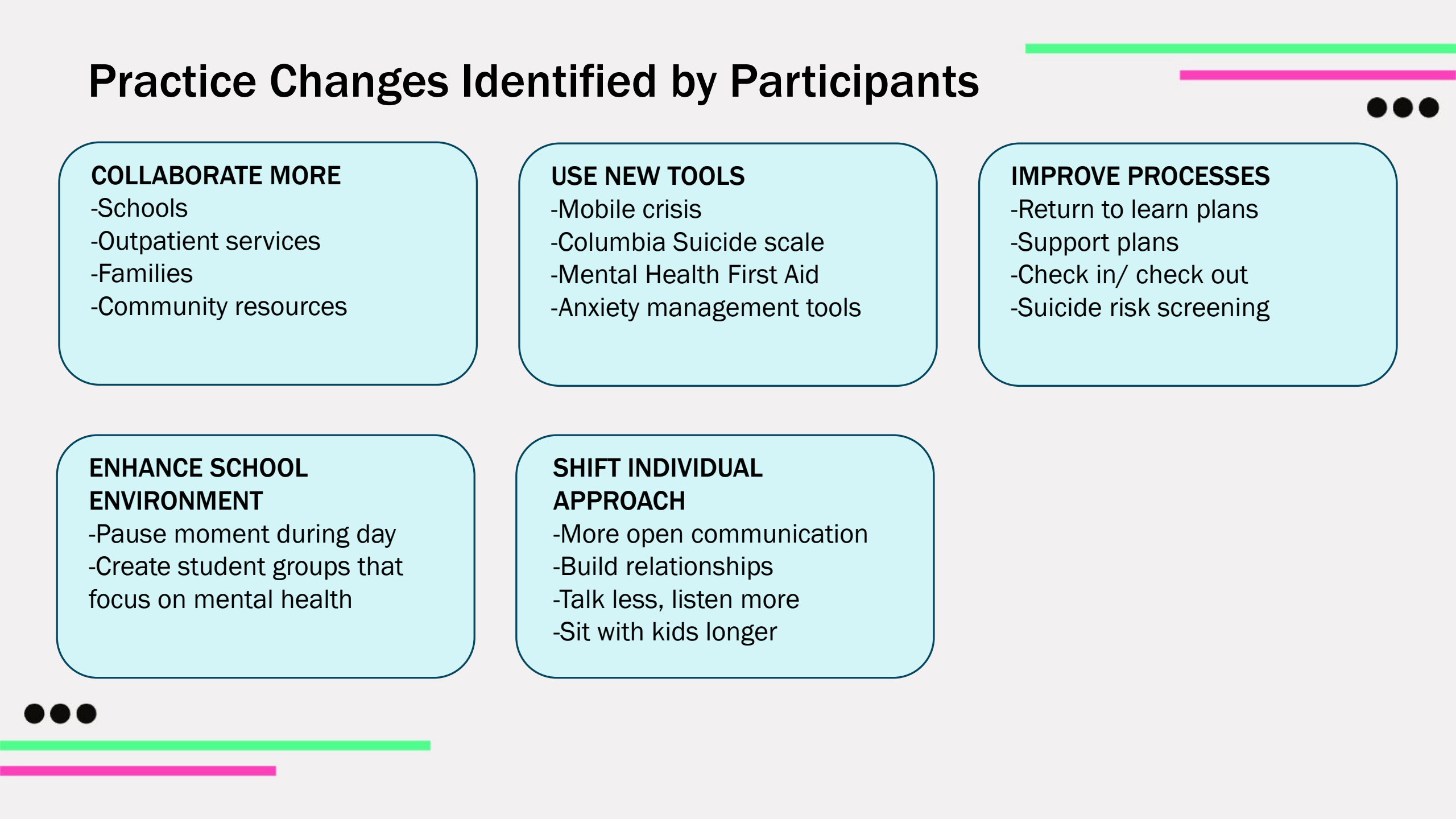


POST - Interacting with and supporting parents of children with significant distress or safety concerns



Not Confident Somewhat Confident Confident Highly confident

Practice Changes Identified by Participants



COLLABORATE MORE

- Schools
- Outpatient services
- Families
- Community resources

USE NEW TOOLS

- Mobile crisis
- Columbia Suicide scale
- Mental Health First Aid
- Anxiety management tools

IMPROVE PROCESSES

- Return to learn plans
- Support plans
- Check in/ check out
- Suicide risk screening

ENHANCE SCHOOL ENVIRONMENT

- Pause moment during day
- Create student groups that focus on mental health

SHIFT INDIVIDUAL APPROACH

- More open communication
- Build relationships
- Talk less, listen more
- Sit with kids longer

Project ECHO Impact on Participants

- More confident in working with students
- Better understanding of mental health system
- Increased knowledge of school resources
- More insight into what families are experiencing
- Helping students more pre-crisis
- Using mobile crisis services (9-8-8)
- Feeling less professionally isolated in the problems

A few final tidbits:

- Facilitating ECHO for diverse groups requires more prep and monitoring
- Many participants' roles are evolving to include more youth mental health work
- Community youth supporters are important and need more help
- The youth mental health crisis is an all hands on deck situation