

Partners in Mental Health Initiative: Stakeholder Report 2019



Overview

The PArtners in Mental Health Initiative Steering Committee, composed of leaders of the six largest PA organizations and PA and interprofessional champions, met on June 23-25, 2019 in Johns Creek, Georgia. With returning and new participants, the meeting's purpose was to share successes; to update the initiative's environmental scan; and to identify actionable strategies that will foster and reinforce momentum for this work in 2020. The steering committee affirmed its commitment to a collective impact strategy whereby partners organizations and grassroots champions conduct mutually-reinforcing activities that advance the common purpose established at the PArtners in Mental Health Summit in 2017, namely to effect systemic change that improves the nation's health by advancing the roles of PAs and strengthening partnerships to address issues impacting mental health and substance use disorders.

Activities & Accomplishments

Change requires coordinated top-down and bottom-up action by PA organizations and grassroots champions, respectively. The exchange of information and experience empowers and supports these efforts. PA organization leaders shared activities within each organizations' mission and capacity to support the common purpose. Highlights are noted:

- **AAPA:** Sustained partnerships with mental and behavioral health organizations, governmental groups, and others, including the Behavioral Workforce Research Center, which strives to produce a psychiatric workforce of sufficient size and skill to meet the nation's needs; continued state and federal advocacy to remove barriers to PA practice in mental and behavioral health and to address the opioid use disorder, including making the Buprenorphine waiver permanent; offered mental health CME activities at the annual conference and additional educational content.
- **ARC-PA:** The 5th edition of the *Standards* continues to require PA education to include didactic instruction in psychiatric / behavioral health conditions including substance misuse and supervised clinical practice experiences that enable students to meet program learning outcomes for psychiatric / behavioral health conditions. It adds required curriculum about provider personal wellness, including prevention of impairment and burnout.
- **NCCPA:** Implemented updated examination content blueprints derived from comprehensive job task and practice analysis, which includes psychiatry and behavioral science content; continued to offer psychiatry PAs a Certificate of Added Qualification; mined NCCPA data and completed a manuscript to describe PA contributions to addressing mental health needs; and leveraged publications and social media to highlight PA efforts.
- **nccPA Health Foundation:** Led and supported the steering committee, including sponsoring and hosting this meeting; administered a \$1,000 mental health outreach seed grant for PAs and PA students, with four grants issued to date; raised awareness of PA mental health roles through its PA Mental Health Spotlight, social media, and outreach at PA and interprofessional conferences; and sponsored three Vital Minds podcasts in partnership with the PA Foundation.
- **PAEA:** With SAMHSA funds received in partnership with the American Academy of Addiction Psychiatry, provided technical assistance for integration of Medication-Assisted Treatment training for PA faculty and students as part of the Opioid Response Network (ORN) and hosted CME opportunities at the Education Forum. Received a subaward from the Providers Clinical Support System (PCSS) to host yearly PCSS trainings over the next 3 years. A one-year follow-up survey of PA programs revealed 30% are requiring MAT Waiver Training prior to graduation in 2019 and 60% are anticipated to do so by 2020, double the original aim of PAEA. Awareness of the initiative was raised through presentations, articles, webinars, and repeated direct outreach to program directors.
- **PA Foundation:** Expanded PA Mental Health Outreach Fellowship from its first cohort to a community college initiative with plans for a second PA fellows cohort; partnered with Allied Against Opioid Abuse with a two-year "Pledge to Pause" student initiative; outlined plans with the Student Academy for an interprofessional educational program related to opioid prescribing; supported its mental health IMPACT grants (funding in the fall); and featured mental health in its Vital Minds podcast series, including a partnership with the nccPA Health Foundation.

PA and interprofessional champions highlighted efforts in their practices, communities, etc., and those efforts reinforced the importance of local efforts to seed and sustain education, practice, and awareness changes to advance this movement.

Environmental Scan

To ground its work, steering committee members conducted a force field analysis to identify and update the forces working for and against the initiative's efforts to enhance education, strengthen practice, and raise awareness of the role of all PAs to address mental health needs. Forces identified included:

Forces Working FOR Us:

- *Increasing awareness:* Social and media attention increase visibility of mental health needs; federal awareness, including funding opportunities; and health profession awareness, including physician and public health groups.
- *Willing and equipped PA workforce:* Growing front-line PA workforce trained in the medical model that can evaluate, manage, and prescribe for whole-person care, including physical and mental health; willingness of PA profession to embrace training to fill system gaps; and coordinated efforts of PA organizations.
- *Changing mental health workforce and access to care challenges:* Recognized workforce shortages, including aging psychiatry workforce and cash-only clinics; growing number of states that have authorized perspective privileges for psychologists; and potential for telehealth.

Forces Working Against Us

- *Perceptions:* General impressions of mental health within and beyond healthcare; lack of recognition by PAs and of PAs (by insurance companies/others) regarding mental health, which results in underreporting of contributions; outdated views about the role of PAs; and unfavorable state laws and regulations.
- *Competition:* Limited PA curricula time; scarcity of faculty, mentors to teach mental/behavioral health; and insufficient local continuing education opportunities to reinforce PA knowledge, skills, abilities and to educate the healthcare workforce about the same.
- *Opioid Crisis:* Intense focus and stigma may exclude other substance use disorders or mental illnesses from the agenda; lack of uptake for prescribing MAT despite x-waiver eligibility.
- *Capacity:* Limited bandwidth of organizations/ individuals to tackle overwhelming challenge of mental health and substance use.

Following this exercise, the steering committee reflected on its previous environmental scan, noting significant similarity which underscored the need for continued action.

Actionable Strategies for Further Exploration

The steering committee acknowledged the mental and behavioral health and substance use crises in America are increasingly overwhelming. The committee expressed a desire to do more as a collective and as individual organizations within the PA profession to advance the Summit's recommendations to enhance educational approaches, to strengthen the practice environment and foster integration, to raise awareness of PA efforts and models to integrate mental health into practice, and to support this movement. The steering committee next sought to identify actionable strategies in support of those recommendations. Through a series of exercises, the steering committee generated avenues for consideration. Subsequent discussion to prioritize the ideas to for exploration in the coming year identified the following opportunities:

- Develop mental health-focused CME for state PA conferences with a focus on the mental health crises, unmet needs, access to care issues as well as the resources available to PAs through this initiative and its partners.
- Foster relationship building with mental-health focused agencies such as SAMHSA and physician organizations, including Psych Congress and the American Psychiatric Association, focusing on PAs' unique advantages and strategies for practice integration.
- Raise awareness among all PAs via outreach campaigns on social media that leverage PA-specific hashtags, highlight national mental health observances, and offer content, including PA-patient stories, that can be shared.
- Improve practice environment and state laws through continued advocacy.
- Enhance steering committee engagement, including additional participation of members on behalf of the collective.

Please note: The items for continued exploration may be in addition to activities the PA organizations will undertake in support of their own spheres of influence and expertise, consistent with a collective impact strategy.

Supporting the Movement

The steering committee concluded by declaring its continued commitment to this movement, recognizing it as a multi-year initiative. It was noted that annual meetings were desirable with consideration to be given to conference calls or other strategies to also share activities and advance collaborative efforts. Further, the committee expressed its belief in the need for action that leverages past investments and fosters continued engagement by organizations and individuals to enhance education for all PAs, to strengthen PA practice, and to raise awareness of PA efforts with the goal of providing the best care for patients. To stay apprised of these efforts, share your contact information with the nccPA Health Foundation at contactus@nccpahealthfoundation.net.

Participants & Acknowledgements

The nccPA Health Foundation thanks the following individuals for their participation at this meeting:

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Although unable to attend the meeting, the nccPA Health Foundation acknowledges the contributions of steering committee members:

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