

SWWA FYSPRT

Regional September Meeting

Monday, Sept 16th, 2024 4:00 PM – 6:00 PM Virtual

Agenda

Presenters	Торіс				
Angelo Gonzales	Group Norms				
Angelo Gonzales	Introductions and Ice Breaker: If you were keeping a list of all the fun things you've done so far in your life, which two or three things would you put at the very top of the list?				
Sara Love Sanderson	 Boulder Care Focus on treating adults (18+) for opioid and alcohol use disorders via a virtual 				
	 clinic. Current adolescent trial (ages 14-17) specifically for opioid use disorder to begin soon. 				
	• Emphasis on harm reduction and timely access to care.				
	• Pilot designed due to increased opioid-related deaths.				
	• Services include enrollment specialists, care advocates, prescribing clinicians, peer recovery specialists, and case management.				
	• Aim to provide support quickly, with a goal for 80% of patients seen within 48 hours.				
Taanvi Arekapudi	Nexus platform				
	• Platform aimed at providing mental health resources for students and schools.				
	• Breaking barriers and increase access to mental health support, targeting 80 million students nationwide.				
	• Tailored to meet specific district needs and includes resources for both students and caregivers.				
	• Involvement from community members and parents to promote the platform.				
	• Emphasized the importance of listening and adapting support based on a youth's needs during conversations about mental health.				
	• The presentation invited audience feedback and discussed practical ways to initiate mental health conversations with youth.				
	• Three steps to facilitate productive dialogues:				
	• Check-Ins: Regularly let teens know you're available to talk, even if they don't open up immediately.				
	 Emotional Sharing: Encourage sharing emotions; using tools like emotion cards can help. 				



	 Offering Support: Present options for support (listening, sharing advice, or strategies) to empower youth. 			
	 Taanvi shared the "belly breathing technique" as a strategy to help manage anxiety. 			
Real Talk	Setting up your workspace. How do you organize? What are ways you focus for going back to school? What are your emotions about going back to school?			
Updates	 YAE- October 7th-virtual State- September 26th 			
Emma O'Campo	Guessing those song lyrics			
Tri-Lead	Next meeting: October 21 st - in person			

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		Space for youth and families to share their experiences with the Crisis System of
		Care and for System Partners to hear from the community.
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		The Southwest Washington Family Youth System Partner Round Table (FYSPRT) is a community-
		based group of youth, families, professionals, systems, and community members from Clark,
		Skamania, and Klickitat counties who are passionate about making needed changes in the System
	EVCODT	
	FYSPRT	of Care (SOC) that serves those with behavioral health needs. The SW WA FYSPRT strengthens
	is a	sustainable resources by providing community-based approaches to address the individual
		behavioral health needs of children, youth and families and ensures that family and youth are key
		collaborators and in positions of leadership. The SW WA FYSPRT leverages the experience and
		expertise of all participants dedicated to building effective behavioral health services and will
		report up to the Statewide FYSPRT on challenges and successes of the region.
1		

	Listen when others are talking and save any input until they are finished. Share the floor "Step Up, Step Back!"
Comfort	Explain "lingo" i.e. acronyms and abbreviations.
Agreement	Practice respectful honesty and FYSPRT is a safe space void of any judgement.
	Keep an open mind.
	Wait until after the meeting to use your cell phone (unless in an emergency situation.)



Remember that what is said at FYSPRT, stays at FYSPRT.
Attend to support positive change.

	Expand and sustain effective leadership roles for families, youth, and system partners	
	Improve/expand outreach by utilizing local resources	
SW FYSPRT members	Ensure that youth and families are represented and have a voice at the FYSPRT	
will	Create culturally diverse membership	
	Help address stigma around behavioral health for the community	
	Review Wraparound with Intensive Services (WISe) Data Reports quarterly	

If you have something you would like to add, please share with the group and it will be added to the

*This is a living document and will be updated to reflect the guidelines

Boulder

Telehealth addiction treatment grounded in kindness, respect and unconditional support.

Boulder Care Overview - Adolescent Program

A DATES

Boulder's services & treatment philosophy



SUD Treatment

Care teams prescribe medications to treat :

- Opioid Use Disorder (OUD)
- Alcohol Use Disorder (AUD)
- Management of co-occurring conditions with Behavior Health Clinicians including nicotine dependence, depression, anxiety, and insomnia



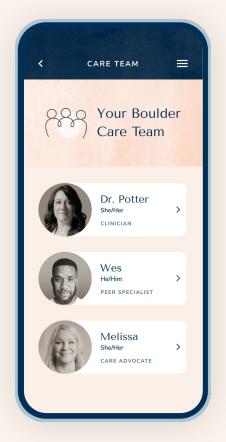
Care Anywhere

Boulder's mobile app makes it easy for enrolled patients to **access care anytime**, **anywhere** through secure video, phone, and messaging.



Grounded in Empathy

We provide long-term, unconditional support grounded in **harm reduction.** We understand that recovery is not linear, and we're there for our patients all along the way.



Care Team: Wrap-around support

Peer Recovery Specialist





Case Manager



Care Advocate





Enrollment Specialist



Nurse



Prescribing Clinician

Care teams provide whole-person care



Prescribing Clinicians

- Develop a care plan with the patient that aligns with their needs and goals
- Prescribe medications for OUD and/or AUD
- Behavioral Health specialists manage co-occurring conditions



Enrollment Specialists

- Create a welcoming and simple enrollment process for new patients
- Support current patients: re-scheduling visits, solving basic app issues, connecting to care team



Care Advocates

 Help navigate medical systems: make referrals to other providers, resolve insurance questions, ensure pharmacy/medication access



Case Managers

 Assist high acuity patients with resource and system navigation (housing, mental health/primary care, government benefits, legal support)



Peer Recovery Specialists

- Support patients without judgement, sharing their own lived experience with addiction as a means to build trust.
- Help patients identify and move toward their recovery goals



Nurses

• Support Clinicians, enabling flexible scheduling and increasing patient access

Boulder Case Management Leads!

Megan Bergstrom (Western US)



Megan.bergstrom@boulder.care

Gloria Howard (Eastern US)



Gloria.howard@boulder.care

About Boulder Case Management

We **can** provide assistance with:

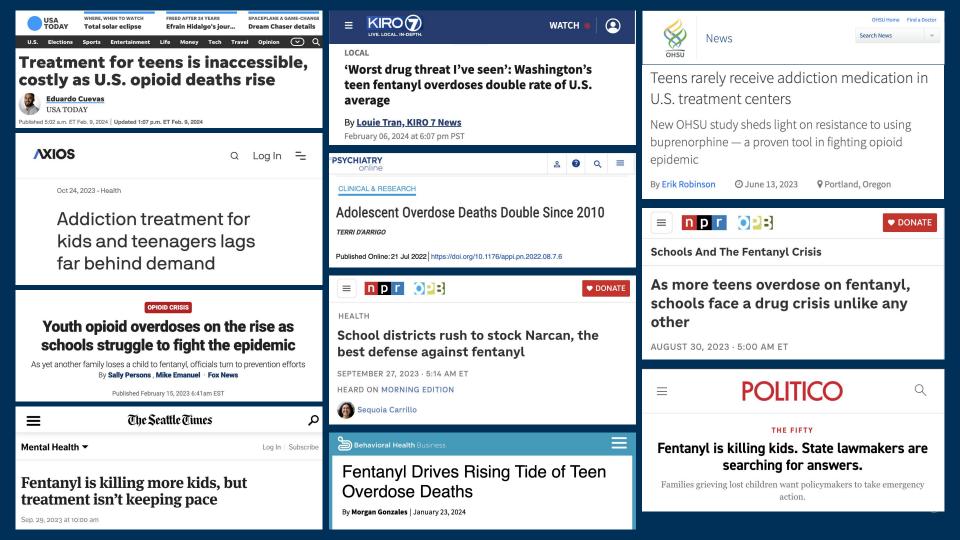
- ★ Finding and navigating resources
- \star Referrals for many agencies
- ★ Crisis triage and referrals to crisis agencies
- ★ Assist with agency applications and documentation of treatment

We **<u>cannot</u>** provide assistance with:

- Direct monetary or voucher resources
- Direct behavioral health services*
 (except for internal referrals to our peer recovery support specialists)
- In-person agency appointments with a patient

*Boulder Care's case managers do not *personally* provide behavioral health services.

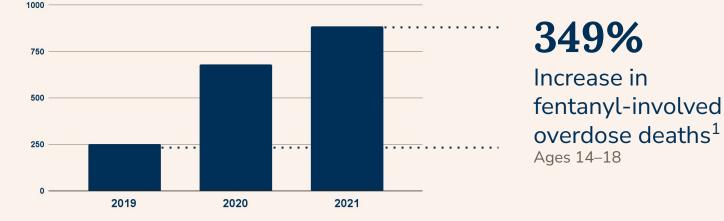
Why pilot adolescent care now?



OUD among adolescents is growing rapidly

Fentanyl-Involved Overdose Deaths

Ages 14-18



1. Friedman J, Godvin M, Shover CL, Gone JP, Hansen H, Schriger DL. Trends in Drug Overdose Deaths Among US Adolescents, January 2010 to June 2021. JAMA. 2022;327(14):1398–1400. doi:10.1001/jama.2022.2847

Treatment industry is behind – *especially* for adolescents

"Effective addiction treatment for young adults has been hampered by insufficient evidence, poor quality of care, inadequate clinician training, siloed systems, punitive approaches, and the view that relapse is failure rather than a hallmark of a chronic illness...**There is much work to do to upend the status quo, but in the face of unprecedented morbidity and mortality attributable to young adult substance use, action is now more urgent than ever.**"

Hadland SE, Yule AM, Levy SJ, Hallett E, Silverstein M, Bagley SM. Evidence-Based Treatment of Young Adults With Substance Use Disorders. Pediatrics. 2021 Jan;147(Suppl 2):S204-S214. doi: 10.1542/peds.2020-023523D. PMID: 33386323; PMCID: PMC7879425. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7879425/



UHC Medicaid Pilot

- Adolescents 14-17 years with OUD
- Specialized care plans supported by:
 - Clinicians (MD, NP, RN) with adolescent experience
 - Dedicated peer recovery specialists with adolescent experience
 - Case managers experienced working with schools and teens/families

• Coordinated care

- Increased communication with families and external support teams
- Collaborations with school-based clinics

Initial Pilot Priorities

Boulder's Care Team will principally address:

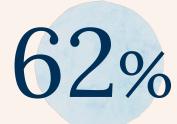
- Ongoing active substance use or recent return to use, including medications for addiction
- Needs for support from certified peer recovery support specialists, via in-app texting & video visits
- Escalated care needs due to hospitalization or justice system involvement
- Educational assistance
- Family or parental issues affecting patient's substance use



Unparalleled outcomes



of new patients seen in <48hrs



of patients stay in care for 6 months

29%

industry average

93%

of patients are meeting their goals of reducing unwanted use

Retention in buprenorphine treatment **reduces mortality risk by 50% or more**. After 12 months in care, **ED utilization and hospitalizations decline by >85%**.

Referring **Adolescents** to Boulder Care

- → Submit a referral form including date of birth at <u>www.boulder.care/referral</u>
- → Dedicated phone number for adolescent-only referrals: 206-737-1315
- Services for Adolescents are for opioid dependence and opioid use disorder only, not alcohol use disorder.

Referring **Adults** to Boulder Care

- → Give us a call at 888-720-2236 Mon-Fri 9am-6pm, Sat 9am-2pm
- → Submit a referral form at <u>www.boulder.care/referral</u>
- → Encourage your patient to self-enroll at <u>www.boulder.care/enrollnow</u> or by calling 888-720-2236
- → Download the Boulder app and enroll





Boulder Care offers telehealth addiction treatment grounded in kindness, respect, and unconditional support.





Compassionate Care At Boulder, you and your care team will make all the important decisions together. We offer help with everything from medical needs and prescriptions to finding housing and resolving insurance issues.

Medication that Works

The right combination of medication for addiction treatment (MAT) and other recovery supports helps people achieve happier, healthier lives and stay in recovery longer.



Customized to You

Recovery looks different for each individual. What matters to you is what matters to us. We'll never penalize you for missed visits, returning to use, or using other substances we're just here to support you and help you work towards your goals.

www.boulder.care/startnow (888) 595-5427

Getting Started



Curious to learn more?

You can find more information on our website, <u>www.boulder.care/startnow</u>, or you can give us a call at (888) 595-5427.

We'd love to share more about our treatment program, and answer any questions to help you decide whether Boulder is right for you.



Ready to enroll?

If you're ready to get started, you can enroll and schedule your first visit at www.boulder.care/enrolling.

"I love Boulder; the convenience, the privacy of being in my own home – it is all life changing." – BOULDER PATIENT



Thank you!

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(866) 288-5885 www.boulder.care

Boulder

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Appendix

Referrals for Many Agencies

Agencies in Washington to whom we often refer:

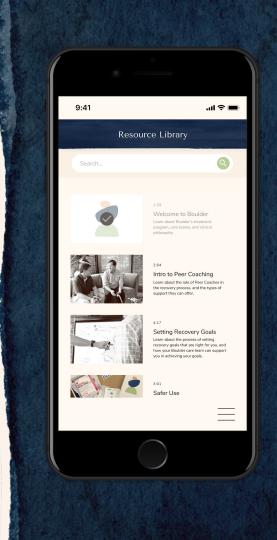
- 1. Department of Social and Health Services
- 2. Consistent Care Services
- Housing and Recovery through Peer Services (HARPS)
- 4. Inpatient treatment programs



Crisis Triage

Crisis triage commonly involves assisting a patient experiencing domestic/interpersonal violence or a mental health crisis, through safety planning and patient-led referrals to appropriate agencies.

*We additionally provide in-app resources for 24/7 crisis lines if a patient is in crisis outside of our available hours.



Agency applications, Documentation of treatment

10

Appendix: Boulder Case Management Complexities

- Insufficient mental health or primary care access
- HIV infection or AIDS
- Chronic and/or acute health problems
- Homelessness
- Child in state custody
- Justice system involvement
- Release from incarceration
- Physical disabilities
- Learning disabilities & educational assistance
- Lack of income
- Barriers to care as a result of sexual orientation, gender identity/expression, or race
- History of suicidal ideation

- Active use or recent return to use in the last 90 days
- Domestic violence
- Patient seeking inpatient treatment
- Hospital discharge
- Poor medication management
- Drug screening protocol non-compliance
- Trauma
- Transportation needs
- Lack of necessary technology to participate in Boulder Care visits
- Lack of medical insurance
- Care coordination escalation

*Bolded items indicate complexities where case management services require additional or differing resources for adolescent care.

Satisfaction: Washington





industry average

Net Promoter Score

Great program has made a huge difference in my life and helping me actually start to rebuild it again! I tell everyone I know about you guys!!

- WA Medicaid Patient

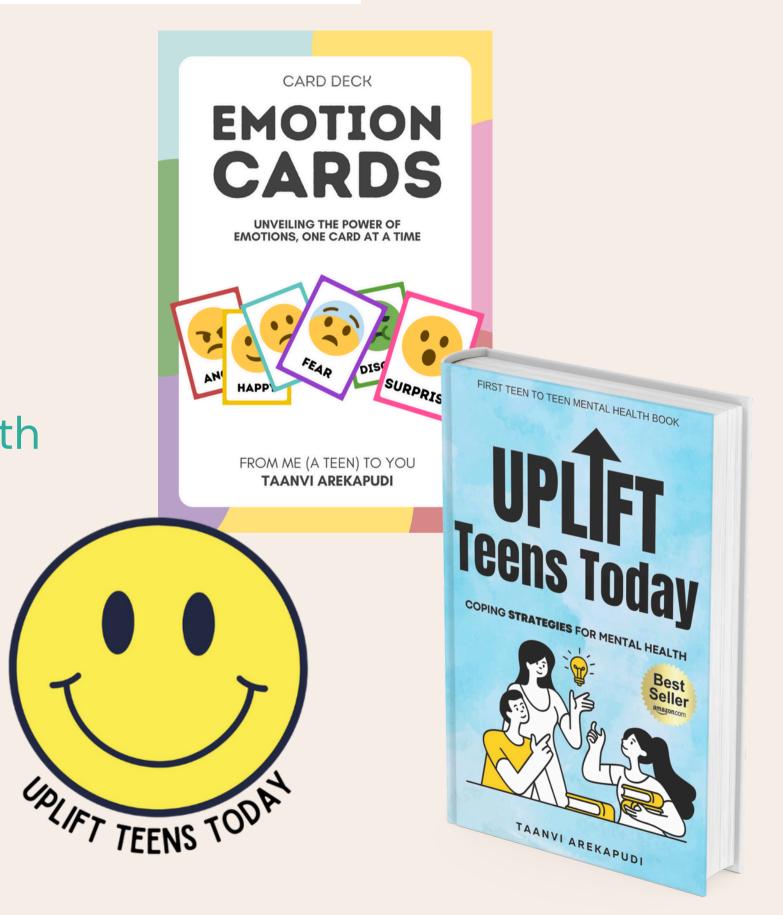
I can not thank you enough for all of the care and help I receive from your team and services. You are literally saving my life and giving me a second chance to get my life back together.

- WA Medicaid Patient

NEXUS - TAANVI AREKAPUDI

- 15 y/o, 10th Grade
- Founder/President of Teen Empowerment Club
- Teen Mental Health First Aid Certified
- Youth Ambassador for the NAMI
- NSAC in Work2BeWell
- Washington HCA YYACC Youth Lead
- FYSPRT KC3 Co-Youth Tri-Lead
- AAP CoE on Social Media and Youth Mental Health YAP
- Suicide Prevention Peer-To-Peer Training Certified
- And more!

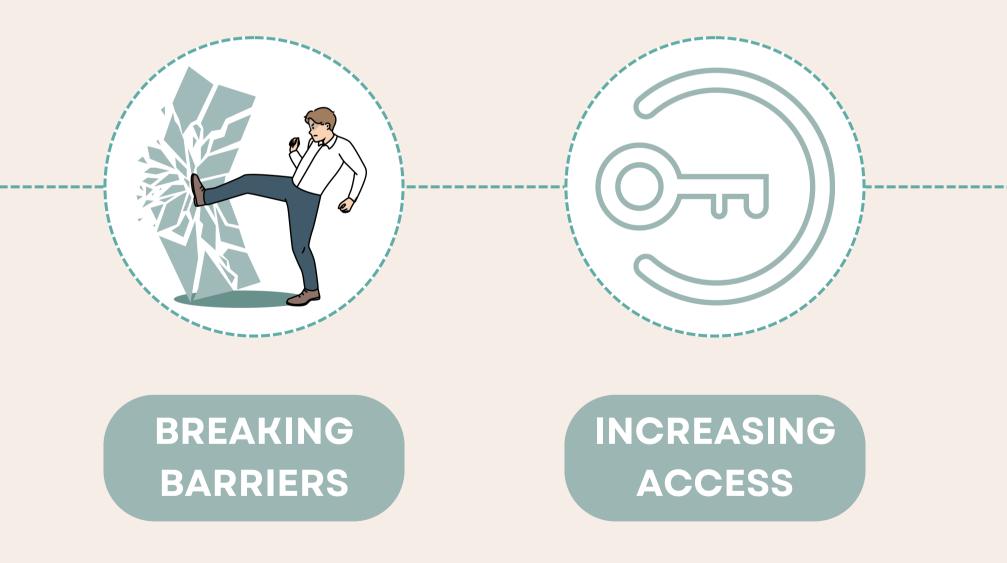




NEXUS: MENTAL HEALTH HUB FOR SCHOOLS

by: Taanvi Arekapudi (Founder)

A PREVENTATIVE APPROACH TO YOUTH MENTAL HEALTH







www.taanvi.us

WHY?

Barriers like stigma, counselor shortage, and cost prevent many students from accessing the support they need.





youth **lack** mental health awareness and hold **stigma**

depressed youth lack mental care

WHAT?

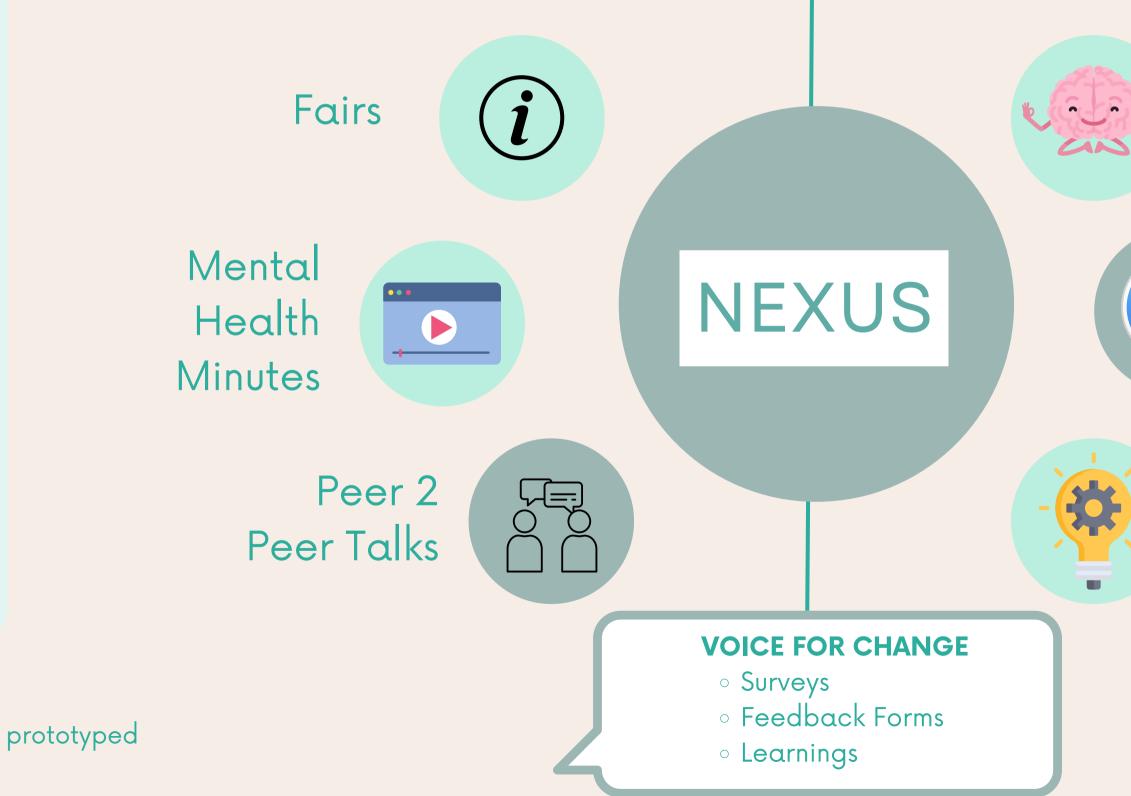
A COMMON ACCESS PLATFORM FOR ALL STUDENTS TO USE 24/7; SHARING COPING STRATEGIES, IN-PERSON SUPPORT AND A PEER CONNECTION.



B Alcohol Use Substance

MENTAL HEALTH HUB

BREAKING THE BARRIER





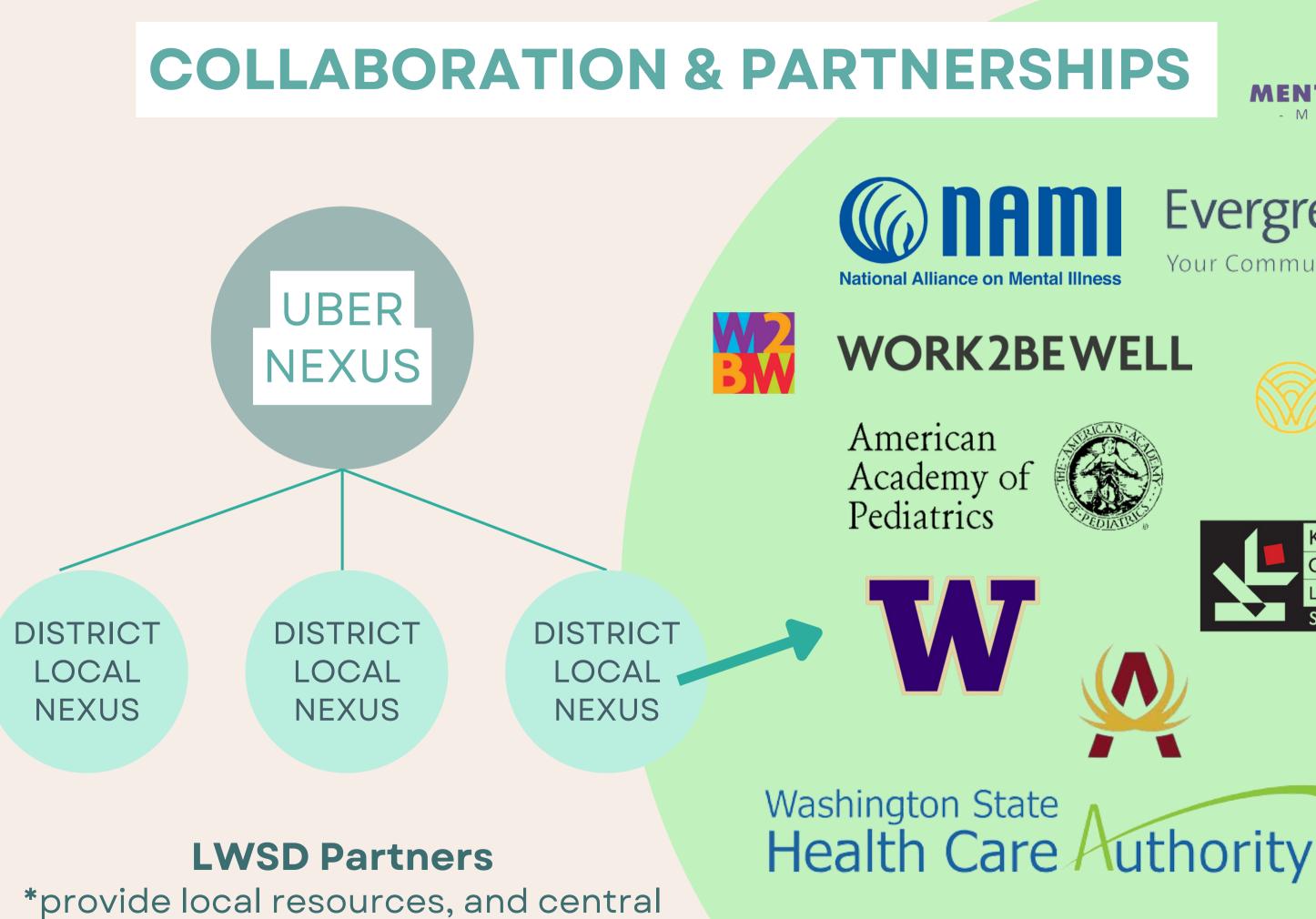
INCREASING ACCESS







Coping Strategies







EvergreenHealth Your Community-Owned Hospital

Washington Office of Superintendent of **PUBLIC INSTRUCTION**





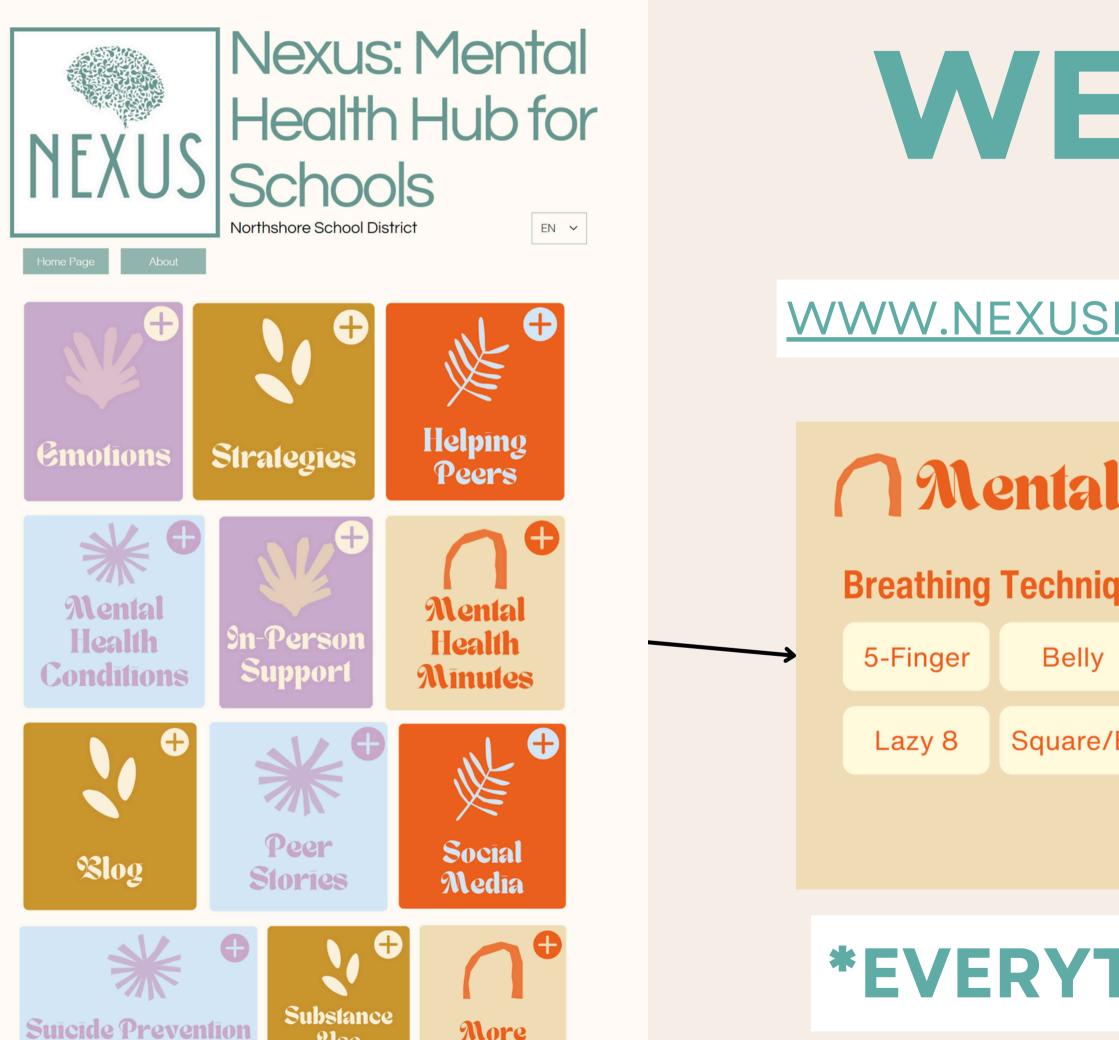
Seattle Children's











WEBSITE*

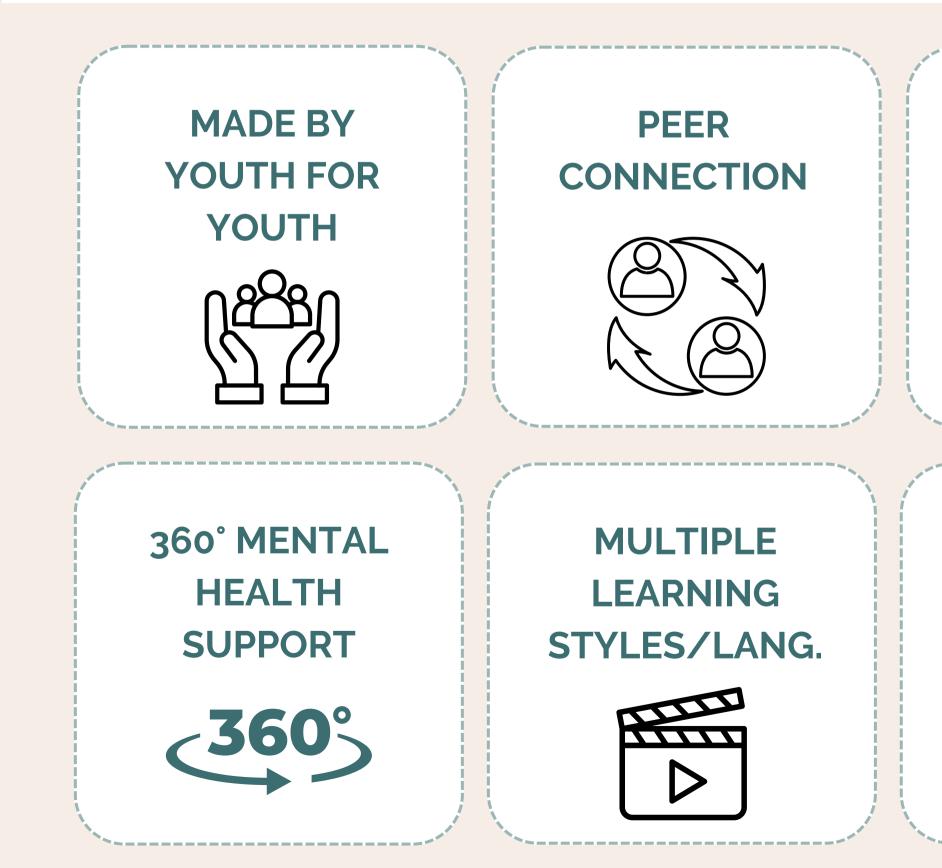
EX. URL: WWW.NEXUSFORSCHOOLS.COM/LWSD

Mental Health Minutes

iques:	Regulation Methods:				
у	5-4-3-2-1	Тар	oping		
e/Box	Mindfulness		To-Do Lists		
	Positive A	ffirm	ations		

*EVERYTHING IS VETTED

INNOVATIVE APPROACH



LOCAL NEXUS HUBS PER DISTRICT



ACCES 24/7, ANYWHERE & ANYTIME 24/7

MULTI-TIERED SYSTEM OF SUPPORTS (MTSS)

—**Tier #3:** Specific Group e.g. BIPOC, AAPI, Special Ed.

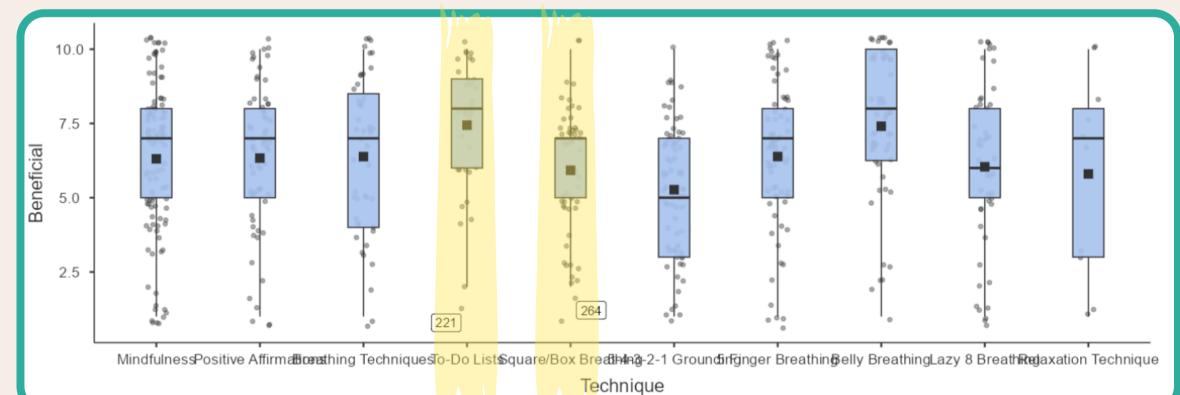


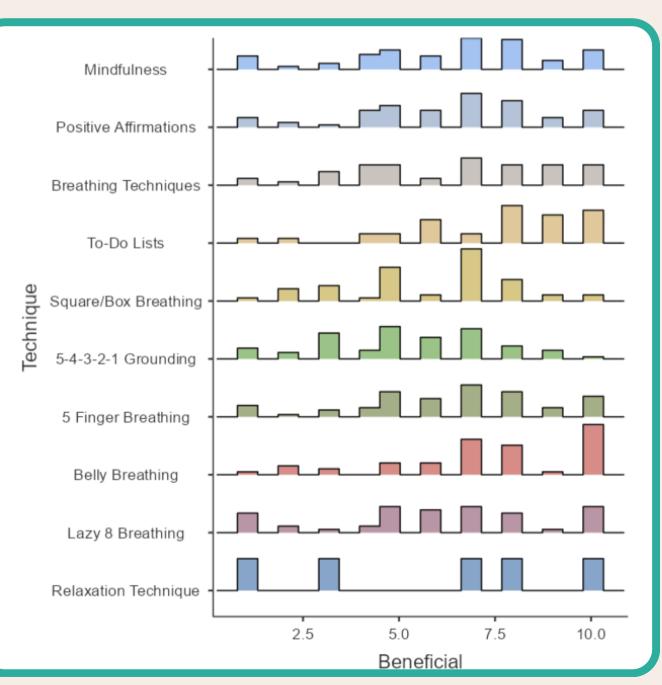
-Tier #2: School Level e.g. MS/HS or ES

Tier #1: School District e.g. Northshore SD, Issaquah SD

IMPACT

1. Till Today - 200K+ (Year 1) 2. Goal - 80M+ (Year 5-7)





NEXUS: MENTAL HEALTH HUB FOR SCHOOLS

THANK YOU SO MUCH!



