

COVID-19: An Opportunity to Catalyze Expansion of the Behavioral Health Continuum of Care

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As we approach the two-month mark of our nationwide COVID-19 shutdown, almost all of us have experienced significant loss. Grief, coupled with varying degrees of anxiety, difficult adjustments to social isolation, and disruption of daily routines, is taking a toll on our mental health. While we know that declines in our mental health status impact our overall health and well-being, the behavioral health sector still remains an afterthought for some.

The COVID-19 pandemic is creating an almost universal need for a wide range of support and services to preserve and restore our mental and emotional well-being. The COVID-19 crisis highlights both the emerging need for behavioral health services and the insufficient infrastructure that currently exists to support these services. The impending surge of demand is causing many of us to consider how best to prepare for even greater pressure on an already taxed system.

As we respond, there is an opportunity to re-imagine the behavioral health system, ensuring that high-quality services are available across the continuum. Collateral damage from COVID-19 may prove to be a catalyst for innovation and growth, allowing us to further capitalize on the gains that we, as leaders, have been advancing for years. Seizing the opportunity to improve delivery depends on many factors, some of which had been identified pre-COVID-19, while others are still emerging as this new era unfolds.

Our ability to meaningfully act is dependent on understanding the need for services and addressing them via cross-functional collaboration, within and outside of our industry, not in isolation.

Key considerations for understanding demand and expanding the behavioral health care continuum:

- **Understand changes in demand.** Just as we tirelessly scour data to predict COVID-19 surges, we must also begin to estimate how the pandemic, and related fallout, will impact the demand for behavioral health services.
- **Reorganize services to provide access to high quality care.** COVID-19 highlights gaps in our existing system, presenting opportunities to develop and execute strategies that expand capacity and accommodate demand at points of care along the continuum (examples below).

Understanding changes in demand. We do not yet have the data needed to determine how COVID-19 will impact mental health outcomes. However, there are steps we can take now to better understand the needs of those we serve. For example, those of us who monitor the mental health of our patients (e.g. using PHQ-2/9) may wish to consider re-evaluating those we serve to understand latent, unmet, or recently surfacing needs in the wake of COVID-19.

Front Line Focus

May is Mental Health Awareness month, and this week we would like to thank all the frontline mental health providers who are delivering critical services to those impacted by COVID-19. Specifically, would like to highlight [Give an Hour](#), a non-profit organization, which has expanded free access to its corps of mental health professionals to frontline hospital teams treating COVID-19 patients.

As we seek to better understand [emerging themes](#) related to COVID-19 and new demand for behavioral health services, here are a few potential thoughts for your consideration:

- **Frontline workers are experiencing varying degrees of trauma** and many workers must deal with [risks to their mental health](#) as they respond to this crisis and subsequent surges, COVID-19 related, and not. Without adequate support, this may result in poor mental health outcomes.
- Addressing **mental illness as co-morbidity of COVID-19** requires a planful approach, particularly as recovery is clouded with the stress of social isolation.
- **Risks to mental health related to social isolation** and stress are impacting our communities at a greater rate during this time of “sheltering-in-place” and “social-distancing.” Such risks could be particularly impactful for the elderly and families with children at home.
- **Stress related to loss of employment and concerns about income security** are factors that are impacting more of us as unemployment claims rise and small businesses struggle.
- **Those coping with the death and dying of a loved one in the “new-normal”** are facing [new territory](#). Isolation and disruption of cultural norms during bereavement may encumber the healing process and contribute to increased mental illness.
- **Vulnerable populations and those at risk**, including the elderly, children, people dealing with housing and/or food insecurity, those with substance use disorders, and/or existing mental illness, as well as those who are incarcerated or disabled, may find that their conditions worsen and/or their need for behavioral health increases during the pandemic.

Reorganizing behavioral health services to ensure that high quality care is available: We must respond to changes in demand for services in a way that [seizes the opportunity](#) to improve access to care across the continuum. There are several strategies that we, as leaders, may wish to consider implementing in response to increases in demand, and more will emerge as we learn more about the challenges ahead. For now, some thought-starters include:

- **Build individual and community level awareness and resiliency:** Community leaders may serve as trusted guides, encouraging community members to embrace principles of mental wellness and resiliency, while also working to build awareness, normalize challenges related to mental health and substance use, and address misconceptions and stigma.
- **Continue to evolve workplace culture to address mental health:** With so many adjusting to working remotely or being laid-off or furloughed, workplace culture and human resource programming must address mental health and well-being head-on. Workplace support must include and prioritize those who care for COVID-19 patients.
- **Ensure adequate funding and resources to fortify delivery of behavioral health services:** We must continue to advocate for the critical pillars that strengthen our system such as, care financing and reimbursement structures, allocation of capital and program development funds, and legislation that sustains and expands access to care.
- **Embrace new methods of care and integration to improve patient access:** With adequate resources and supportive policies, we can expand access to services, through innovation, partnering, and program development, and by further advancing existing priorities, such as behavioral health and primary care co-location and integration, and telehealth.

How is your organization thinking about delivery of behavioral health services, amid COVID-19? We’d appreciate your thoughts! Please reach us at team@lucaniapartners.org to start a conversation.

With appreciation for all you do,



About Letters to Leaders

Letters to Leaders is a series written by team members at Fund Love and Lucania Partners. Each week we do our best to offer some perspective on the challenges we all face as leaders. We also pause to reflect and thank our industry’s frontline leaders and staff, for showing us the way during this unprecedented period. We share our ideas and appreciations from a place of good fortune, gratitude, and humility.