

## **ESTABLISHING A STATEWIDE RESPONSE FOR COVID**

Washington State COVID-19  
Behavioral Health Group

# Introducing the Presenters

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# Background: Behavioral Health System & Preparedness

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## Washington State Behavioral Health System:

- System under significant change and transformation
- Ranked 46<sup>th</sup> for adult mental health care, 43<sup>rd</sup> for youth
- Lack of access, waitlists and queues common pre-pandemic

## ESF#8 Behavioral Health Preparedness:

- Roles and responsibilities across several state agencies
- No state-level behavioral health response or recovery plans
- Very little involvement of behavioral health in training and exercises
- Initial ESF#8 planning effort started: Draft ESF#8 Behavioral Health Framework
- Started development of a Behavioral Health Strike Team

# Background: Initial Activation & Expansion

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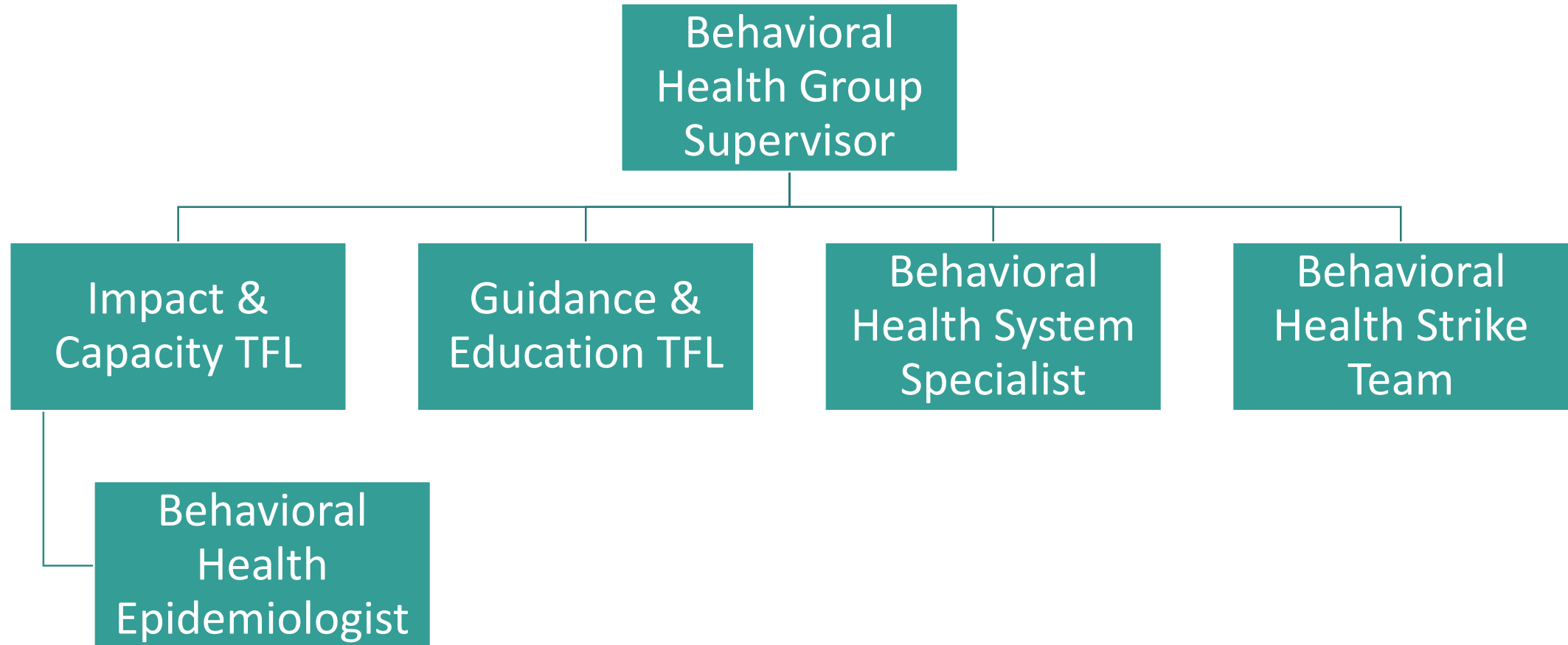
## Initial Activation (Mid-March):

- Mission: Inform other functions with behavioral health considerations, staff support
- Team: Behavioral Health Group Supervisor, Behavioral Health Strike Team
- Informed existing functions with expertise, activated Behavioral Health System Specialist, started to develop expanded mission proposal

## Expanded Mission (Early April):

- Expanded mission to “lead and coordination the “whole of state” response to behavioral health impacts of COVID-19” including expanded public health functions
- Expanded team: Impact & Capacity Assessment Task Force Leader (TFL), Guidance & Education TFL, Behavioral Health Epidemiologist, in addition to initial team members
- Team began to develop functional areas within the team, establish a “battle rhythm,” and develop foundational products and services of the team

# Initial Organizational Chart (Expanded Mission)



# COVID-19 Behavioral Health Group Framework

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Work was divided into broad functional areas to support the assigned mission and to facilitate a response informed by *data, expertise, and partner engagement*

## Functional areas:

Response Coordination- Coordinate across response functions and state/local agencies

Impact & Capacity Assessment- Establish situational awareness of behavioral health impacts and current capacity

Access to Behavioral Health Care- Increase access to behavioral health care by helping organizations stay open and expanding available services (professional and non-professional)

Guidance & Education- Provide public messaging, training, and resource documents to inform the public and partners about behavioral health impacts, considerations, and resources

**-All work supported and informed by Behavioral Health Strike Team!**

# Function Overview: Response Coordination

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Purpose: To establish effective processes and forums to facilitate interagency collaboration and coordination around behavioral health using ESF#8 frameworks and protocols. This includes collaborating with key behavioral health partners, identifying roles and responsibilities, and establishing coordination in key functional areas.

## **Major products, outcomes, or successes:**

- COVID-19 ESF#8 Behavioral Health Response Framework
  - Confirmed by ESF#8 Behavioral Health Coordination Group (state)
- COVID-19 ESF#8 Behavioral - Recommendations for Actions (Primer)
- Routine support to local ESF#8: Monthly webinar, consultation calls, “support menus”, etc
- Team collaboration: connections to other response functions (I&Q, volunteer management), implementation of response tools like Psy-START Triage, response strategy development, assisting team in navigating ICS and ESF#8 processes

# Function Overview: Impact & Capacity Assessment

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Purpose: To identify, collect, maintain, and share behavioral health situational awareness related to the mental health impacts and behavioral health system continuity/capacity challenges. Information is presented in a format that is actionable for response and behavioral health system partners.

## **Major products, outcomes, or successes:**

- Collected, refined, and developed behavioral health metrics:
  - Syndromic surveillance, call lines, tax revenue, social media sentiment analysis, and more
- Statewide Behavioral Health Impact Forecasts (Monthly)
- Behavioral Health Impact Situational Report (Weekly)
- Youth Behavioral Health Impact Situational Report (Monthly)
- Collaborations: routinely collaborated with internal and external groups around data and impacts, informed response leadership regarding trends and concerns



# Statewide Behavioral Health Impact Forecast

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## Background:

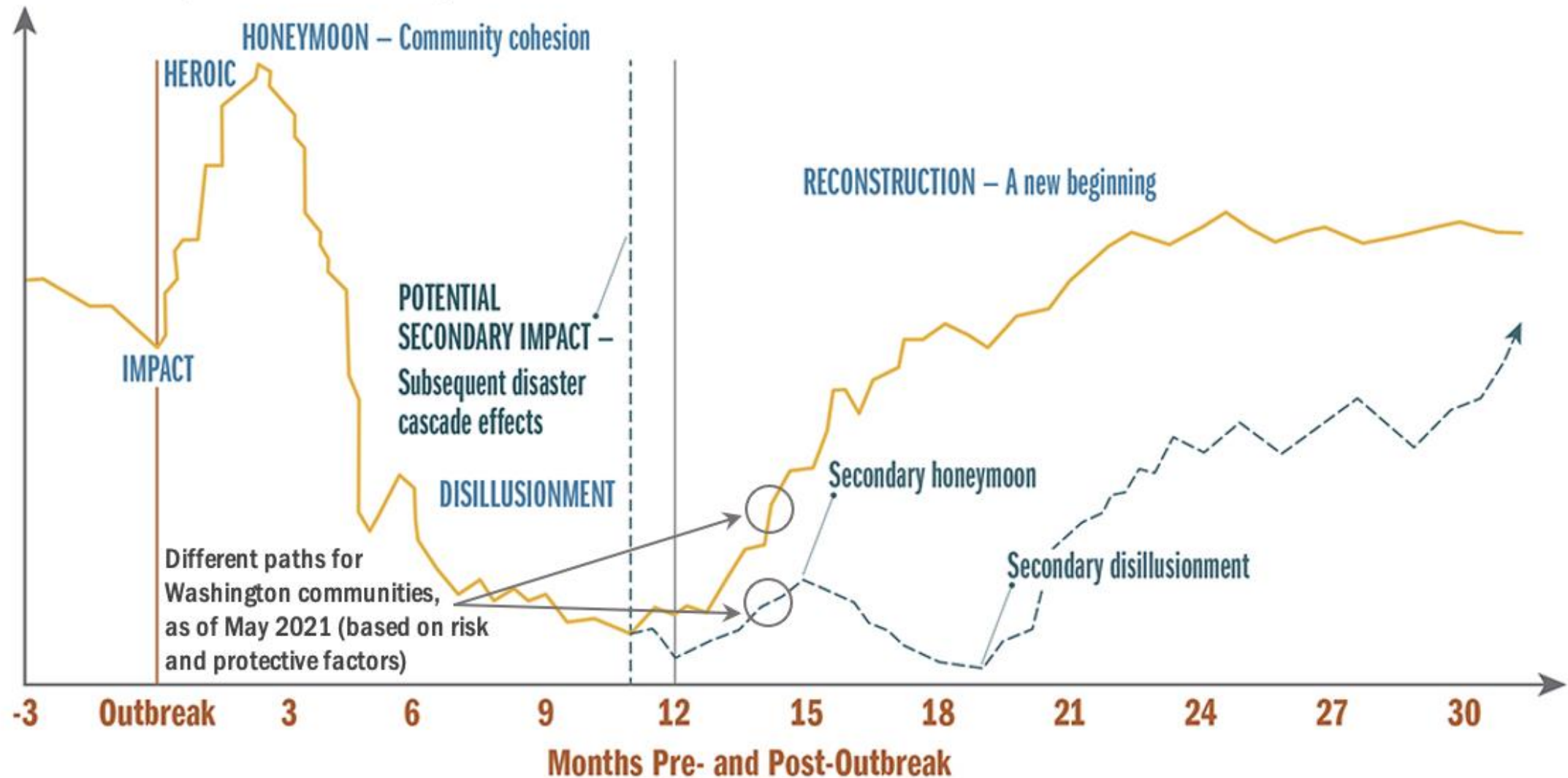
- Developed by combining academic literature, a wide variety of data sources, and the expertise of the DOH Behavioral Health Strike Team
- Highly subject to future waves, government actions, societal trends, social and economic impacts
- Continually informed by new research and data sources

## Content:

- Bottom Line Up Front (Key things to know)
- Phase related considerations, trends in data or research
- Hot topics or items of concern (eg: vaccines, return to work, etc)

# Reactions and Behavioral Health Symptoms in Disasters

Emotional Response – Lows to Highs



# Weekly Behavioral Health Situational Report

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**Purpose:** Provide a concise source of weekly information on behavioral health trends

## **How was it made?**

Drafted by the Impact & Capacity Assessment Task Force (data and epidemiology), informed by Behavioral Health Strike Team (disaster behavioral health insights)

## **Things to know:**

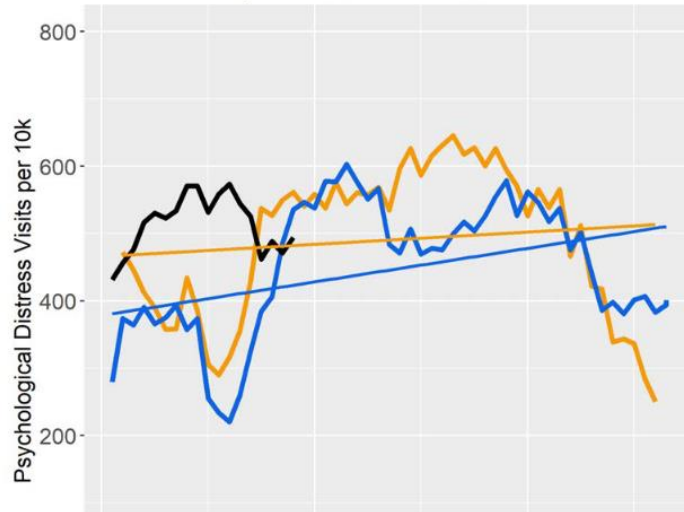
- Includes data sources from a wide variety of sources (syndromic surveillance, social media sentiment, tax revenues, call line data FBI, sheriffs and police chiefs)
- Analysis of year over year trends difficult due to significant changes in care seeking behavior over the course of the pandemic
- Situational report became more refined over time in terms of sources and analysis

# Weekly Behavioral Health Situational Report

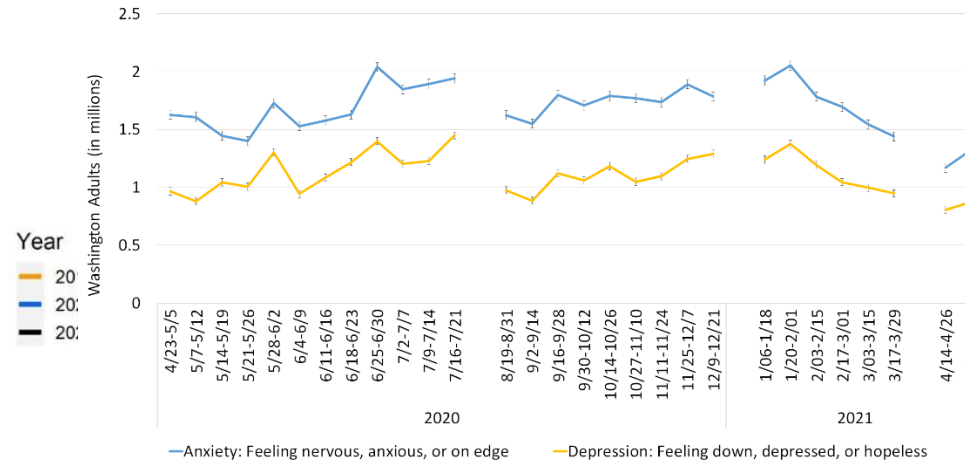
Broad spectrum of data to capture state level trends for behavioral health

## Syndromic Surveillance

Number of Psychological Distress Related Visits per 10,000 ED Visits

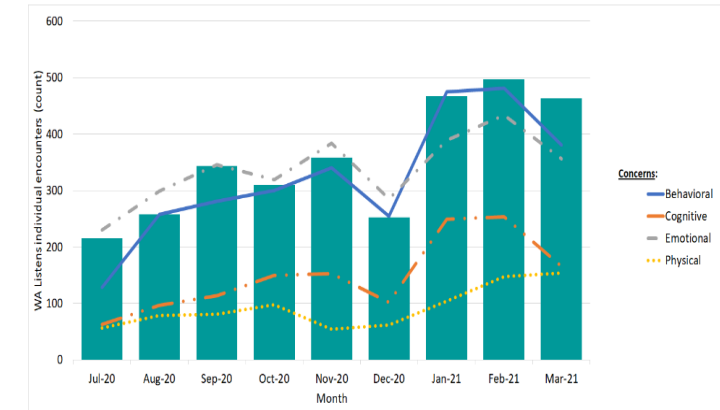


## Pulse Survey (Census Bureau)



## Call Lines

Graph 11: Total count of WA Listens individual calls and concerns, by month  
(Source: Washington State Health Care Authority [HCA])



# Function Overview: Access to Behavioral Healthcare

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Purpose: To ensure there is adequate access to behavioral health care throughout the outbreak. This requires maintaining continuity of the behavioral health system while also building capacity, both professional and non-professional, to meet increased behavioral health needs created by the incident.

## **Major products, outcomes, or successes:**

- Collaborated with other state agencies and system partners to ensure continuity of services, *EG*:
  - Connected system partners to the group to share information and collaborate on challenges
  - Advocated for PPE access and connected agencies to PPE resources
  - Facilitated development of specialized infection control guidance for behavioral health facilities
- Championed action by the state based on concerning trends and data related to behavioral health:
  - Provider alerts related to youth suicide risk and opioid concerns
  - Proclamation related to youth behavioral health crisis and order for government action
- Created internal initiative to support response and DOH staff via consultative meetings, webinars, and support sessions

# Function Overview: Guidance, Training, & Education

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Purpose: To meet the behavioral health related public information, training, and guidance development needs for both the response, partners, and the public. By leveraging the expertise of the Behavioral Health Strike Team and partners, this team identifies and shares critical information based on data, trends, and partner feedback.

## **Major products, outcomes, or successes:**

- *Extensive* development of behavioral health resources for partners, including:
  - Group Impact Reference Guide, Behavioral Health Toolbox for Families, tip sheets, and more!
- Participated in and supported numerous behavioral health messaging campaigns and initiatives
- Developed and operated a presentation and training program, delivering roughly 1 presentation per day and 1 training per week:
  - Health Support Team, Psy-START Responder, mini-trainings, specialized sessions
  - Presentations: Impact Forecast, Situational Report Briefing, specialized presentations
- Supported other team resource development functions and facilitated publishing process

# Cross-Function Support: Behavioral Health Strike Team

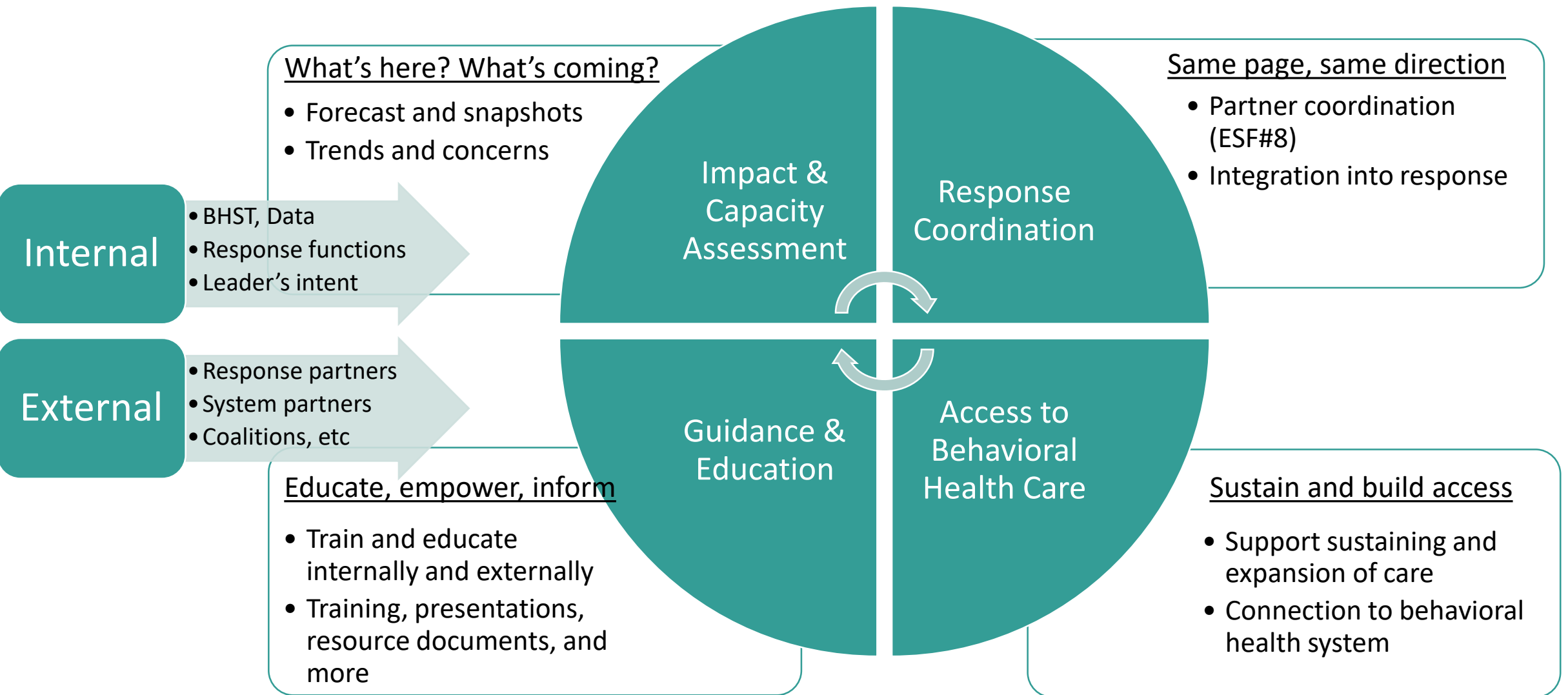
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Purpose: To support and inform the response by using the clinical and academic disaster behavioral health expertise of the team. This includes consulting with internal group functions, broader response activities, and with partner organizations. Furthermore, this team routinely delivers disaster behavioral health training and presentations in addition to direct staff support.

## **Major products, outcomes, or successes:**

- Extensively supported and informed each functional area of the team throughout the response, including informing the planning and operations of the broader response
- Delivered trainings and presentations within the response and to partners across the state
- Provided focused and timely expertise to influence major response decisions with significant behavioral health impacts
- Informed the state and response about potential behavioral health impacts and trends

# COVID-19 Behavioral Health Group Framework



**-All work supported and informed by Behavioral Health Strike Team!**



# Team Coordination: Meetings & Processes

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An internal “battle rhythm” was set to maintain a common operating picture and allow the team to nimbly navigate changes in the pandemic or response structure.

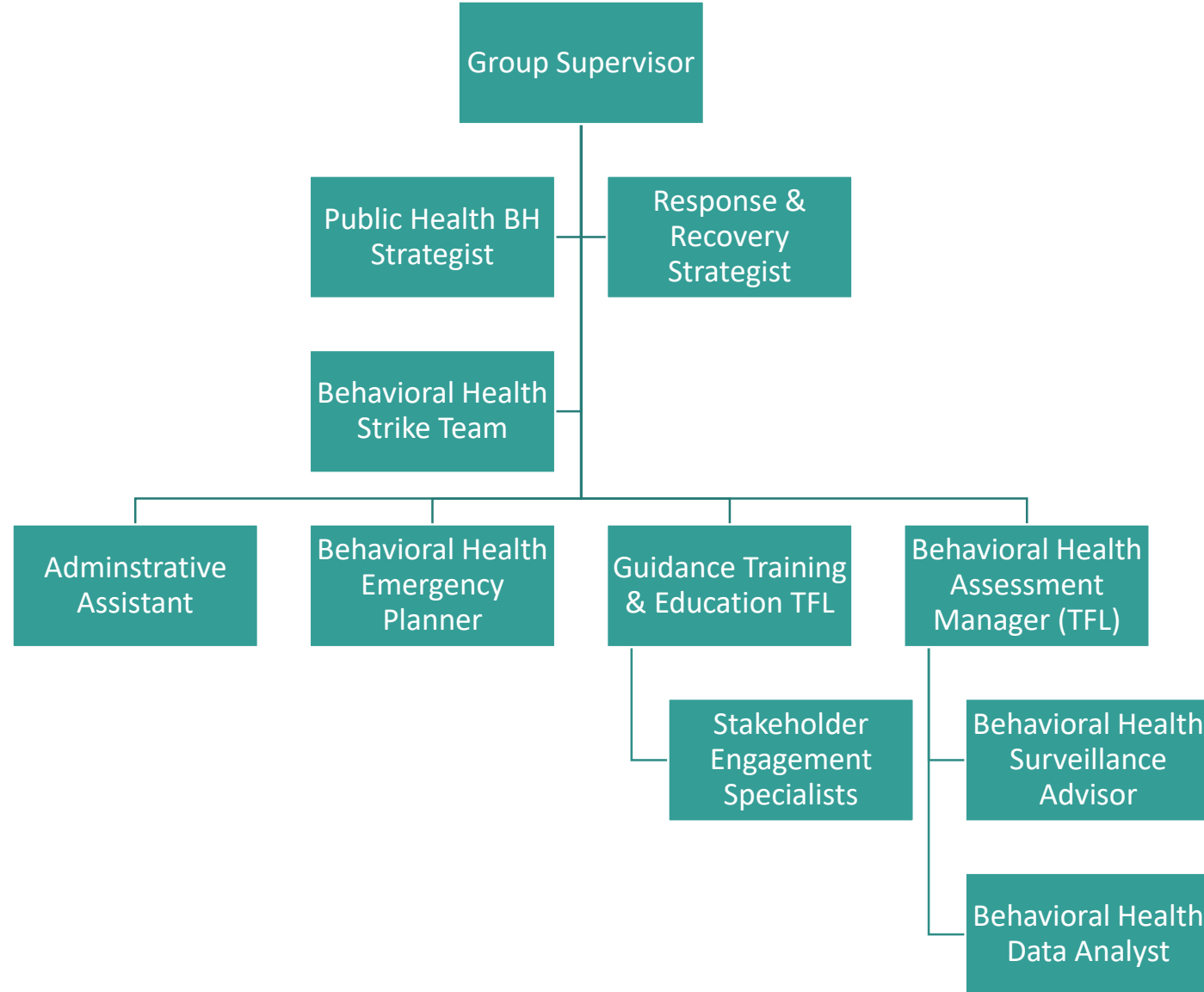
## Initial tempo:

- Morning Meeting (30-45 mins): Key information updates from morning briefing, planned work for the day, and any major items for awareness
- End of Day Huddle (30 mins): Successes/challenges/roadblocks for the day, key changes in information or areas of concern

## Refined tempo:

- Weekly Situational Awareness Meeting (Monday, afternoon): Key information and trends across the functional areas, concerning information for immediate action
- Weekly Coordination Meeting (Tuesday, morning): Planned work for the week, key things to know and keep in mind, updates from the broader response
- Weekly Wrap-up Meeting (Friday, afternoon): Successes/challenges/roadblocks from the week

# Current Organizational Chart



# Putting it all together: Youth Behavioral Health Surge Management

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Background: Like many other states, Washington State is seeing a disturbing increase of severe behavioral health impacts on youth. This has led the Governor to issue a proclamation related to the youth mental health crisis which required state agencies to develop recommendations to mitigate the surge.

The Behavioral Health Group, in response to this need, has developed a proposed youth behavioral health surge management mission by engaging response and behavioral health partners.

This proposed mission package was developed by engaging partners across behavioral health state agencies, healthcare and behavioral health system partners, educational system partners at state and local levels, and response organizations.

# Putting it all together: Youth Behavioral Health Surge Management

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## How each function was involved over time:

- Impact & Capacity: Identified concerning trends related to youth and collaborated with strike team to confirm the concern and risk to that population
- Access to Behavioral Health Care: Confirmed concerns by connecting with partners to understand “on the ground realities,” mobilized behavioral health system partners and state agencies to engage around this issue, and facilitated the development of recommendations and proposed mission package to manage the surge
- Guidance, Training, & Education: Developed resources to support youth and those that provide care/support to youth, including toolboxes, tip sheets, and communication campaigns
- Response Coordination: Assisted team in navigating ESF#8 and ICS processes to establish expanded mission and leverage response resources, helped connect partners to the effort through response partnerships
- Behavioral Health Strike Team: Informed data and impact analysis with clinical expertise, advocated for government action and educated stakeholders on effective intervention strategies

# Lessons Learned

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- Existing behavioral health systems and response frameworks not prepared to scale (time and size)
- Staff health and wellness must be prioritized as a key component of an effective long-term response
  - Leaders must be aware of impacts of pushing for short-term objectives
- Behavioral health must be integrated into disaster response, including operations (direct missions and mission support), planning (forecasts and sitreps), logistics/safety (staff health), public information (communication, resources), and command (leadership decision making)
- Lack of plans and identified roles/responsibilities was a major operational hurdle throughout the entire response
- Successes: Broad expertise collaborating with a focused mission allows for rapid development of functions, team culture of trust and entrepreneurial spirit is key for response, navigate uncertainty with a motto “perfect is the enemy of the good”

Questions?



Thank you!



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