

## **Appleton Area Health Hosts Regional Mental Health Brainstorming Event**

Appleton Area Health (AAH) and the Lac Qui Parle Health Network (LQPHN), which consists of Appleton Area Health, Johnson Memorial Health Services, and Madison Healthcare Services, sponsored a collaborative meeting at Appleton Area Health on Thursday, November 21st.

Eric Arzubi, MD, a Montana-based psychiatrist and founder of Frontier Psychiatry, PLLC, led the discussion to identify gaps in mental health care and to develop effective and practical solutions to prevent and address the mental health crisis in our region.

Key stakeholders from the region were invited to partake in the discussion about the mental health care crisis. Swift, Lac Qui Parle, Big Stone, Chippewa, Yellow Medicine, and Stevens County law enforcement and social services agencies, as well as CEO's and nurse leaders from Appleton, Dawson, Madison, Montevideo, Ortonville, Granite Falls, Benson, and Morris participated in this event.

Also attending were behavioral health providers from Woodland Centers and Appleton Area Health, The Minnesota Hospital Association (MHA), The Institute for Clinical Systems (ICS), Avera E-care, and State Representative Tim Miller.

Dr. Arzubi started the discussion with an overview of several innovative mental health programs he helped launch in Billings, MT, including integrated behavioral health, regional tele-psychiatry services, and emergency psychiatric care.

Dr. Arzubi led the opening of an Emergency Psychiatric Assessment, Treatment, and Healing (EmPATH) unit at the Billings Clinic. The unit is designed to provide a calming, therapeutic environment and immediate access to psychiatric care. The EmPATH unit is a 24 hour observation unit that is an option for someone who may or may not need psychiatric hospitalization. It provides a bridge between the ED and inpatient psychiatric units.

Discussion was held regarding the current mental health system and the care provided. An overview of the services that are provided regionally included: in-patient psychiatric care, crisis stabilization, and mobile crisis. “I recognize that a number of mental health services are available, but, judging by the many people in attendance today, it appears that access to psychiatric care is still a problem in rural Minnesota.” stated Dr. Arzubi.

Several comments from participants included concerns that patients have nowhere to go. Although there are options for mental health care, such as inpatient units and crisis centers, there is certain criteria that patients have to meet that can prevent some patients from getting the care they need. Jennifer Erdmann, Director of Nursing at Johnson Memorial Health Services voiced concern that when patients come to the ED, they often have nowhere for the patient to go. Patients end up in emergency departments for hours while staff works to find placement. Sometimes they end up getting admitted to the hospital because no one will take them and most rural hospitals don't have the resources to provide the psychiatric care that is needed.

State Representative Tim Miller addressed the group stating, “Wherever I go, I hear these same concerns, I applaud you for coming together to look for solutions. This is not a rural or urban problem, it is everywhere. People are not getting the care they need.”

John Holtz, Swift County Sheriff stated, “We sit with patients for ten hours or more at times in the Emergency Department (ED), once we finally get them out of the ED and on the way to getting some help, that brings a sense of relief for them knowing that finally someone is going to help them.” Appleton Area Health's Chief Executive Officer (CEO) Lori Andreas added, “We have a responsibility to the patients we serve. There are gaps in psychiatric care and it is up to us as a region to find solutions so that patients are getting the care they need.”

Discussion continued regarding different models of care and what would need to occur to develop and open a regional EmPATH unit and the challenges and opportunities that would occur in the process.

Tani Hemmila, Team Director for The Institute for Clinical Systems (ICSI - a non-profit health care improvement organization that helps health care facilities find ways to redefine and redesign systems to improve care)

added that ICSI would be willing to be a resource for the collaborative group as they move forward.

“The ultimate goal is to improve mental health care in this region. Our current system of care isn’t working, so we have to think outside the box. We have an opportunity to make a difference and, although there are always challenges, there are solutions as well. I look forward to see the positive changes to mental health care that this collaborative group develops and achieves,” stated Dr. Arzubi.