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EXPANDING THE MENTAL HEALTH CAREGIVER WORKFORCE

LOCAL APPROACH TO ADDRESSING OPIOID ADDICTION • CLARKSON INSTITUTE TARGETS GAP IN HEALTH CARE DELIVERY

EXPANDING THE MENTAL HEALTH CAREGIVER WORKFORCE



Picture this: A group of eight physicians – most nearing retirement or at least starting to prepare for that stage in their lives – gathered for breakfast on Saturdays to discuss the topic of the day. Their conversations at one point turned to what they might do in retirement to give back to their community and support those in their profession.

“We thought: ‘We don’t know,” said John Mitchell, M.D., a recently retired gastroenterologist. “‘Why don’t we start interviewing community leaders to find out what the greatest needs are.’”

So they did. A presentation by Howard Liu, M.D., chairman of UNMC’s Department of Psychiatry, caught their attention and provided them with a starting point. “He gave us a compelling analysis of the dearth of mental health providers and access in our community,” Dr. Mitchell recalled. “The question was ‘What could we do to help?’”

The group had considered needs in the realms of politics, affordable housing, education and many other issues connected to current events. But Dr. Liu’s analysis stood out. “This is something we know a little bit about and maybe something we could do – and feel confident about what we were doing,” Dr. Mitchell said.

Talk first turned to opening a clinic to serve people suffering from mild to moderate levels of mental illness. “Dr. Harris Frankel pointed out we would be robbing Peter to pay Paul because we would be taking mental health practitioners – there already is a shortage – from one clinic to another.”

This group of physicians was aware of the escalating prevalence of mental health issues in the country, accelerated during the COVID pandemic. The stats filled in the rest of the story: 21% (52.9 million) of adults in the United States experience mental health issues in 2020. In addition, 5.6% of U.S. adults experience serious mental illness that year. While the cause for the increase is multifold, the result is a shortage of appropriately trained health care providers.

In Omaha, wait times to see a psychiatrist or psychologist extended between 8 to 12 weeks. While psychiatrists are best suited to treat those with severe mental illnesses, this leaves an estimated 39 million Americans with mild to moderate mental issues on long wait lists while their symptoms worsen.

Talk narrowed to the workforce of mental health practitioners and how to expand it. The group did its homework and talked with experts in the field. Their conversations led to one with Rhonda Hawks, well-known for championing mental health care in Omaha. They discussed a concept: Train current providers (primary care and specialists) to be more confident in assisting patients who came to them for other reasons, but ultimately needed mental health care.

Finally, after more research and more conversation, the breakfast group had a threefold plan for supplementing mental health care resources in Omaha:

- Enhance primary care professionals’ knowledge and confidence in treating their patients who exhibited mild to moderate mental illness.
- Instill that same kind of confidence among specialist physicians and mid-level health practitioners, something done nowhere else in the country.
- A third unique aspect is to mobilize physicians in retirement (who wanted to continue to assist in patient care) to expand the workforce and provide mental health care – either in-person or by telehealth.

Dr. Mitchell, who now falls into the third category, and Bill Lydiatt, M.D., who falls in the second, worked with their group to form Bridges to Mental Health, a workforce expansion project aimed at increasing the confidence and abilities among primary care and specialty care physicians, along with other health care professionals to manage mild to moderate mental illness.

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The Max Lydiatt File

Hometown
Bellevue, Nebraska

Undergraduate Degree
University of Nebraska-Lincoln in biology

Medical Degree
University of Nebraska Medical Center

Residency
UNMC in psychiatry

Specialty
Psychiatry

Title
Third-year resident

Location:
UNMC

Hobbies
Writing creative nonfiction

Family
Wife, Hannah Lydiatt

Why He Joined MOMS
“To network and meet interesting people.”



The Bill Lydiatt File

Hometown

Chappell, Nebraska

Undergraduate Degree

Stanford University in
Stanford, California,
in biology

Medical Degree

University of Nebraska
Medical Center

Residency

UNMC in otolaryngology
head and neck surgery

Fellowship

Memorial Sloan Kettering
Cancer Center in New
York City in head and
neck oncologic surgery

Specialty

Head and neck
surgical oncology

Title

Professor of surgery

Location

Creighton University

Hobbies

Collecting ancient coins,
reading and spending time
with his children and dogs

Family

Wife, Kathy Lydiatt, and
his children Max Lydiatt,
M.D., Joey Lydiatt, DPT
and Samantha Lydiatt

Why He Joined MOMS

"MOMS is a vibrant
organization doing tangible
projects to improve the care
of physicians and to improve
the health of our region."

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The group engaged – with financial support from Rhonda and Howard Hawks Foundation – experts from Massachusetts General Hospital and Harvard University to lead a two-day course in diagnosis and treatment of mild to moderate depression and anxiety. "We didn't know if anyone would show up," Dr. Lydiatt said.

Twenty-two people did. Thirty-six others attended the second session six months later (both held at Clarkson College), which was funded by Behavioral Health Education Center of Nebraska with guidance from Dr. Marley Doyle and Dr. Rod Markin. Collectively, over 40 percent of attendees were physicians, the remainder were mid-level or advanced practice caregivers.

Session attendees left with several resources – including the "Behavioral Health Treatment Guidelines" for primary care by William Miller, M.D., and his associates in Idaho, and the Waco Guide to Mental Health – for in depth information. They also received contact information for local resources and access to the 2022 Annual Psychopharmacology Conference presented by the Massachusetts General Hospital Psychiatry Academy. The sessions were recorded and are available for review at Bridges' administrative home, Clarkson Institute's website (<https://clarkson-regional.com/bridges-to-mental-health/>).

Bridges leaders realized this program needed to prove the concept that they could expand the workforce through these sessions.

Enter Max Lydiatt, M.D. (Bill's son), chief resident-elect in UNMC's Psychiatry Department. The younger Dr. Lydiatt's interest in the program: to design and implement a study (approved by Methodist IRB) to gauge participants' comfort level – pre-session and post-session – for treating patients suffering from mental illness, and publish the results.

"We looked at whether the seminar could increase people's confidence in a variety of ways (specific diagnoses, specific medications, for example)," Dr. Max Lydiatt said. "We found every single domain we studied had a significant difference from pre- to post. The feedback was very positive."

Those results were reassuring, Dr. Mitchell said, which could lead to additional funding for future sessions. Bridges also sought feedback from the State Board of Medicine and Surgery, which endorsed the program.

Another issue is backup when clinical questions arise.

"We knew we needed a backstop for issues beyond us," Dr. Mitchell said.

Dr. Lydiatt put it another way. "We needed someone on the other end of the Bat Phone (for the reference watch the 1970s television show featuring Batman)."

One option is to affiliate with an academic institution. For example, perhaps the senior psychiatry residents could help organize the program, and their involvement could be incorporated into their medical training. The long range hope would be to develop another psychiatry residency training slot.

An aspiration is to create a structure to the Bridges program – possibly a physical freestanding one, one that joins with another organization already providing mental health care, or by providing care virtually. Another issue yet to be resolved is determining how to keep Bridges sustainable. Could the group bill for some services?

Bridges also looked at where mental health providers practice in Nebraska. Some counties have none, others one or two. The next step is to host additional sessions both in Omaha and areas of greatest need in Nebraska.

Bringing people together for these sessions is critical, Dr. Bill Lydiatt said. "We feel there is a role for virtual training, but there's something about being together – particularly when you're trying to gain confidence."

Session leaders – experts in the field of mental health care – instilled this confidence in participants, including Drs. Lydiatt and Mitchell.