**Behavioral Health Strike Team (BHST) Support for Long Term Care Facilities (LTCF)**

**Overview**

The Department of Mental Health piloted the Behavioral Health Strike Team (BHST) for the COVID19 response in St. Louis. Targeted assignments were identified and teams comprised of two professionals were deployed from our Community Mental Health Center (CMHC) network. Using vetted staff covered by insurance and other benefits through their employer allowed the Department to reimburse the CMHC for their staff at an hourly rate covering their salary and fringe benefits. The rate ranged between $30-40/hour so for this proposal`$35 per hour used.

**Team Composition**

Team members either deployed to the site where behavioral health services were needed to embed with responders and provide support, or were available on call after hours should their services be required. The on-site team member worked with the day-shift personnel and stayed to interact and support the night shift as needed. The on-call member worked from home and answered calls or requests after hours, with the availability to report to the site if summoned. (An enhancement to deepen these resources after hours is to use Missouri’s behavioral health crisis system delivered by the Access Crisis Intervention Hotlines <https://dmh.mo.gov/mental-illness/program-services/behavioral-health-crisis-hotline> )

A two-week deployment of 12-hour shifts daily for 14 days was standard although eight-hour days and/or part time contact may suffice. This concept was fully tested during COVID19 with early deployments by members to the Alternate Care Site (ACS) in Florissant and the Dignified Transfer Center in Earth City. Teams can be identified to work directly with county or regional teams supporting COVID19 outbreaks in LTCFs.

**Key Components**

**Component 1: Activate BHST to hotspot locations as needed**

Activate two BHST members to hotspots in counties as requested by local county health officials, DHSS or Missouri Healthcare Association. Each team would assess the level of stress, anxiety, and mental fatigue at LTCFs and provide on-site resources, consultation, debriefings and other requirements as requested and approved. Each team will be supervised by the DMH Director of Emergency Management. If in STL or KC, they would work also with STARRS and MARC ESF 8 planner, respectively, and report findings to them, and Missouri Health Care Association. They would provide initial resources and individual/group assessment with referral to professional services as required.

See tables below outlining costs for full time, 2 week deployment of strike team variations.

|  |  |
| --- | --- |
| **Cost per clinician** | **14-day deployment** |
| Hourly rate $3512 hour shift $420 | $5880 |
| Per diem | $34 per day x 14 = $476 |
| Travel @ .43 per mile | $.43 x 50 miles x 14 = $301 |
| Lodging | N/A Will assign from localBHST members |
| **Total costs** | $6,657.00 |

|  |  |  |  |
| --- | --- | --- | --- |
| **Costs per team** | **14- day** | **1 month** | **2 months** |
| 1 team/2 BHST members | $13,314 | $26,628 | $53,256 |
| 2 teams/4 BHST members | $26,628 | $53,256 | $106,512 |
| 3 teams/ 6BHST members | $53,256 | $106,512 | $213,024 |
| 4 teams/ 8 BHST members | $106,512 | $213,024 | $426,048 |
| 5 teams/ 10 BHST members | $213,024 | $426,048 | $852,096 |

**Resource 2: Engage the ACI network**

The existing Access Crisis Intervention (ACI) hotlines provide emergency telephone access to services for individuals experiencing a behavioral health crisis.  ACI staff are licensed mental health professionals who assess the caller’s needs and connect them to local behavioral health crisis services as needed in an effort to reduce unnecessary interventions such as hospitalization or detentions.  ACI coverage is statewide and aligned with our community mental health system.

* All calls are strictly confidential.
* ACI hotlines are staffed 24 hours a day, seven days a week by behavioral health professionals who are available to provide assistance such as phone contact, referrals to resources in the community, next day behavioral health appointments, or a mobile response.  Mobile is defined as either going to the location of the crisis, or to another secure community location.
* Find the ACI number by county here <https://dmh.mo.gov/mental-illness/program-services/behavioral-health-crisis-hotline>

**Example: BHST staffing of Mid America Regional Council (MARC) ESF 8**

MARC is looking for a BHST member to join the ESF 8 team to assess stress/anxiety levels across the entire ESF8 spectrum in the MARC. The MARC has a virtual Multi Agency Coordination Center operating in KC Metro. The BHST member will work with the MARC team to provide specialized consultation to ESF 8 partners, MARC leadership and work directly with any LTCF that has COVID positive patients to assist them in managing their stress and anxiety. This is not likely a full-time position but necessary, so funding needs below would be different. Here is the staffing plan and estimated costs.

|  |  |
| --- | --- |
| **Cost per clinician** | **14-day deployment** |
| Hourly rate $354-hour shift $120 | $1960 |
| Per diem | $0 |
| Travel if needed for data gathering or meetings @ .43 per mile | $.43 x 50 miles x 14 = $301 |
| Lodging | N/A Will assign from localBHST members |
| **Total costs** | $2,261.00 |

**DMH Recommendation: A Blended Approach**

DMH recommends a blended approach to provide direct BHST support to LTCFs in counties. Deploying the proven BHST concept to support intensive/on-site or in-facility behavioral health needs, and blending it with the existing crisis network, provides 24-hour coverage as needed.

Another alternative is to the ACI network is to provide a “duty officer” phone to the BHST or CMHC servicing the impacted area. Additional phone charges would apply. Estimates below

|  |  |
| --- | --- |
| If clinician uses own phone | If “duty officer” phone(s) procured |
| Phone stipend of $ 30 per 14 day shift | $30 for 14 days or $60 per month plus cost of floater phone (range of |

Additional content and resources that may be helpful in advance to LTCFs in counties and are provided below for distribution.

**Immediate Resources for LTCFs:**

**Stressed by COVID-19? Access these resources for your emotional health** [**https://dmh.mo.gov/disaster-services/covid-19-information**](https://dmh.mo.gov/disaster-services/covid-19-information)

**DHSS COVID-19 24 hour hotline: 877-435-8411**

**Disaster Distress Helpline: Phone 800/985-5990.  Text “TalkWithUs” to 66746**

**CDC: Mental Health and Coping**

<https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/managing-stress-anxiety.html>

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