McLean Hospital

2019 Community Health Needs Assessment: Implementation Strategy

Approved by McLean Hospital Board of Trustees
January 16, 2020
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Executive Summary
2019 Community Health Needs Assessment
& Implementation Strategy

Executive Summary

McLean Hospital has been meeting the needs of individuals and families with psychiatric illness since its founding in 1811. McLean offers a full spectrum of care spanning inpatient, acute and longer-term residential, partial hospitalization and outpatient services. McLean also offers an expanded array of specialized academic and clinical programs for children and adolescents, as well as dedicated services for older adults with Alzheimer’s disease, other dementias and late onset mental illness. For nearly two decades, McLean has expanded its clinical reach beyond Belmont to communities throughout Massachusetts. McLean operates satellite programs in Boston, Cambridge, Lincoln, Middleborough, Petersham, Princeton, and Waltham, while providing emergency psychiatric coverage to hospitals in Attleboro and Plymouth and inpatient and ambulatory psychiatric consultative services in an Attleboro hospital.

Due to McLean’s highly specialized mission and services, we rely on community, regional and state-wide public health and community needs assessments as well as feedback from CHNA 17 and Middleborough town officials. Needs assessments that were reviewed can be found in the appendix (pages 19-21).

Across these community needs assessments, common themes related to mental health, behavioral health and substance abuse include:

- Mental health as a top health concern with specific foci on depression, anxiety, trauma, and suicide
- Concerns about substance abuse, including use of alcohol, prescription drugs and heroin, and the link between substance abuse and mental health issues
- Urgent need to address the opioid epidemic
- Significant waiting lists for adult mental health services
- Inpatient beds in freestanding psychiatric facilities and psychiatric units at general hospitals operating at or above full capacity, resulting in long stays and boarding in hospital emergency departments by people requiring inpatient levels of psychiatric care.
- Patient access to optimal continuum of mental health and substance abuse care seriously reduced by limited residential and community care capacity
- Inadequate services for children, adolescents and elders
- Complex flow of patients through the behavioral health care system in Massachusetts, with fragmentation and limited coordination of services across provider organizations
- Need for greater integration of mental health, substance abuse and primary care services
• Concerns about shortages of mental health professionals across the state
• Need for more public education and dialogue about mental health and substance abuse

McLean's implementation strategy focuses on people and families affected by psychiatric illness and substance use disorders within CHNA 17 service areas and Middleborough and includes:
• Expanding psychiatric services to meet community needs and decrease lengths of stay in hospital emergency departments for patients with mental/behavioral health needs
• Improving community mental health through innovative programs
• Caring for uninsured and underinsured
• Strengthening behavioral health workforce to address access and quality
• Expanding public education and engagement to reduce stigma
• Providing community support and contributions
2019 Community Health Needs Assessment (CHNA): Implementation Strategy

Over the next 3 years, McLean will leverage its specialized expertise and resources to focus on community needs related to mental health, behavioral health and substance use.

<table>
<thead>
<tr>
<th>Implementation Strategies</th>
<th>Actions</th>
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</table>
| Expand psychiatric services to meet community needs and decrease lengths of stay in hospital emergency departments for patients with mental/behavioral health needs | • Work with CHNA 17 and other CHNAs within Massachusetts to fund mental and behavioral health projects in response to critical community needs  
• Expand neurotherapeutic services  
• Expand psycho-educational residential programs for teens and young adults |
| Improve community mental health through innovative programs    | • Coordinate and provide timely mental health consultations to pediatricians and school nurses in eastern MA as they address needs of pediatric and adolescent patients with mental health challenges  
• Provide clinical and prevention services within the Boston Public School System  
• Provide consultative and educational services for staff in school districts across the Commonwealth of MA  
• Help college students with mental illness and adjustment issues live more productive lives  
• Provide mental health services to law enforcement and active duty personnel and emergency responders  
• Partner with emergency departments at community hospitals to improve access to psychiatric care  
• Provide recovery-based services and activities that help people with mental illness live meaningfully in the community |
<table>
<thead>
<tr>
<th>Category</th>
<th>Actions</th>
</tr>
</thead>
</table>
| Care for uninsured and underinsured          | - Help uninsured patients and their families through the application process to receive public benefits  
- Provide care to patients awaiting state beds  
- Provide free care and absorb bad debt  
- Provide scholarship for students at Arlington School and Pathways Academy and patients in McLean’s residential programs |
| Strengthen behavioral health workforce to address access and quality | - Provide continuing education for practicing mental health professionals  
- Provide training for high school and college students, student nurses and social work interns |
| Expand public education and engagement to reduce stigma | - Develop educational programs for the public that enhance awareness of mental health issues and treatment availability  
- Provide public education programming focused on geriatric brain health and neurocognitive disorders  
- Expand Deconstructing Stigma, a multi-site public awareness campaign to reduce stigma about mental illness  
- Offer curriculum for middle and high school students and educators that combines basic mental health information, brain biology and stigma reduction messages |
| Provide community support and contributions  | - Support consumer-to-consumer education and community recovery group to help mental health consumers achieve full and healthy lives  
- Work closely with community groups on a wide range of patient care and advocacy issues  
- Provide financial support for community organizations |
As part of the Massachusetts Department of Public Health Determination of Need process, McLean is continuing its 5-year commitment of community payments through December 2020 associated with the hospital’s Admissions Building expansion. McLean is working with CHNA 17 and local towns and agencies within Massachusetts to fund mental and behavioral health projects in response to critical community needs.

This implementation strategy was approved by the McLean Hospital Board of Trustees on January 16, 2020. It is prominently posted on the McLean website (www.mcleanhospital.org).

Partners HealthCare’s filing of Form 990 on McLean’s behalf includes the URL to the implementation strategy on the McLean website.

The 235-foot gallery located Boston Logan Airport between Terminals B and C features more than 30 portraits of people living with mental illness, including celebrities such as Howie Mandel and NFL star Brandon Marshall.
Appendix

McLean Hospital
Community Health Needs Assessment

Approved by McLean Board of Trustees
September 19, 2019
Executive Summary

McLean Hospital has been meeting the needs of individuals and families with psychiatric illness since its founding in 1811. McLean offers a full spectrum of care spanning inpatient, acute and longer-term residential, partial hospitalization and outpatient services. McLean also offers an expanded array of specialized academic and clinical programs for children and adolescents, as well as dedicated services for older adults with Alzheimer’s disease, other dementias and late onset mental illness. For nearly two decades, McLean has expanded its clinical reach beyond Belmont to communities throughout Massachusetts. McLean operates satellite programs in Boston, Cambridge, Lincoln, Middleborough, Petersham, Princeton, and Waltham, while providing emergency psychiatric coverage to hospitals in Attleboro and Plymouth and inpatient and ambulatory psychiatric consultative services in an Attleboro hospital. 

Due to McLean’s highly specialized mission and services, we rely on community, regional and state-wide public health and community needs assessments as well as feedback from CHNA 17 and Middleborough town officials. Across these community needs assessments, common themes related to mental health, behavioral health and substance abuse include:

- Mental health as a top health concern with specific foci on depression, anxiety, trauma, and suicide
- Concerns about substance abuse, including use of alcohol, prescription drugs and heroin, and the link between substance abuse and mental health issues
- Urgent need to address the opioid epidemic
- Significant waiting lists for adult mental health services
- Inpatient beds in freestanding psychiatric facilities and psychiatric units at general hospitals operating at or above full capacity, resulting in long stays and boarding in hospital emergency departments by people requiring inpatient levels of psychiatric care.
- Patient access to optimal continuum of mental health and substance abuse care seriously reduced by limited residential and community care capacity
- Inadequate services for children, adolescents and elders
- Complex flow of patients through the behavioral health care system in Massachusetts, with fragmentation and limited coordination of services across provider organizations
- Need for greater integration of mental health, substance abuse and primary care services
- Concerns about shortages of mental health professionals across the state
- Need for more public education and dialogue about mental health and substance abuse
McLean’s implementation strategy will be informed by these prioritized needs that have been identified in this community health needs assessment. The implementation strategy, focusing on people and families affected by psychiatric illness and substance use disorders within CHNA 17 service areas and Middleborough, will include:

- Expanding psychiatric services to meet community needs and decrease lengths of stay in hospital emergency departments for patients with mental/behavioral health needs
- Improving community mental health through innovative programs
- Caring for uninsured and underinsured
- Strengthening behavioral health workforce to address access and quality
- Expanding public education and engagement to reduce stigma
- Providing community support and contributions

This community health needs assessment was approved by the McLean Hospital Board of Trustees on September 19, 2019 and is prominently posted on the McLean website. (www.mcleanhospital.org). Partners HealthCare’s filing of Form 990 on McLean’s behalf includes the URL to this needs assessment on the McLean website.

McLean’s implementation strategy will be updated to address the prioritized needs identified in this assessment. It will be reviewed by the McLean Hospital Board of Trustees and made publicly available by January 31, 2020.

The following document includes more detail about McLean’s 2019 community health needs assessment.
I. Introduction

McLean Hospital has been meeting the needs of individuals and families with psychiatric illness since its founding in 1811. McLean offers a full spectrum of care spanning inpatient, acute and longer-term residential, partial hospitalization and outpatient services. McLean also offers an expanded array of specialized academic and clinical programs for children and adolescents, as well as dedicated services for older adults with Alzheimer’s disease, other dementias and late onset mental illness.

As the largest psychiatric clinical care, teaching, and research affiliate of Harvard Medical School, McLean Hospital’s mission is as follows:

McLean Hospital is dedicated to improving the lives of people and families affected by psychiatric illness.

McLean pursues this mission by:

• Providing the highest quality compassionate, specialized and effective clinical care, in partnership with those whom we serve;
• Conducting state-of-the art scientific investigation to maximize discovery and accelerate translation of findings towards achieving prevention and cures;
• Training the next generation of leaders in psychiatry, mental health and neuroscience;
• Providing public education to facilitate enlightened policy and eliminate stigma.

McLean’s values are as follows:

We dedicate ourselves each and every day to McLean’s mission of clinical care, scientific discovery, professional training and public education in order to improve the lives of people with psychiatric illness and their families.

In all of our work, we strive to:

• Conduct ourselves with unwavering integrity;
• Demonstrate compassion and respect for our patients, their families and our colleagues;
• Foster an environment that embraces diversity and promotes teamwork;
• Achieve excellence and ever-better effectiveness and efficiency through innovation.
II. Definition of communities served

For nearly two decades, McLean has expanded its clinical reach beyond Belmont to communities throughout Massachusetts. McLean operates satellite programs in Boston, Cambridge, Lincoln, Middleborough, Petersham, Princeton, and Waltham, while providing emergency psychiatric coverage to hospitals in Attleboro and Plymouth and inpatient and ambulatory psychiatric consultative services in an Attleboro hospital.

In Fiscal Year (FY) 2018*, McLean discharged 6,180 inpatients and provided 71,044 inpatient days of care, 63,902 residential days, 14,598 partial hospital days and 43,907 outpatient/ambulatory visits.

49% of inpatients came from the metropolitan Boston area and 18% came from southeastern Massachusetts. >88% of McLean’s patients used insurance, with managed care as the largest category of payers, followed by government payers.

See more detail in the three charts included below.

Data based on discharged inpatients, FY2018
### Demographics FY2018 %

<table>
<thead>
<tr>
<th>Age</th>
<th>FY2018</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>less than 13</td>
<td>-</td>
<td>0%</td>
</tr>
<tr>
<td>13 to 17</td>
<td>8</td>
<td>0%</td>
</tr>
<tr>
<td>18 to 34</td>
<td>2,845</td>
<td>46%</td>
</tr>
<tr>
<td>35 to 64</td>
<td>2,647</td>
<td>43%</td>
</tr>
<tr>
<td>65 to 75</td>
<td>412</td>
<td>7%</td>
</tr>
<tr>
<td>75 and older</td>
<td>268</td>
<td>4%</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td>6,180</td>
<td>100%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gender</th>
<th>FY2018</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>2,978</td>
<td>48%</td>
</tr>
<tr>
<td>Female</td>
<td>3,202</td>
<td>52%</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td>6,180</td>
<td>100%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Race</th>
<th>FY2018</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caucasian</td>
<td>5,073</td>
<td>82%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>40</td>
<td>1%</td>
</tr>
<tr>
<td>Black</td>
<td>352</td>
<td>6%</td>
</tr>
<tr>
<td>Asian</td>
<td>173</td>
<td>3%</td>
</tr>
<tr>
<td>Native American</td>
<td>5</td>
<td>0%</td>
</tr>
<tr>
<td>No data</td>
<td>537</td>
<td>9%</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td>6,180</td>
<td>100%</td>
</tr>
</tbody>
</table>

*FY18 Discharged Inpatients*
Data based on gross revenue for all patients, FY2018.

Payer mix chart includes patients with primary insurance plan code of free care.
FY2018 total free care (gross revenue): $2,163,001.

* FY2018 data has been provided as this report was compiled prior to the completion of FY2019 in September 2019.
III. Assessment of community mental health needs

Due to McLean’s highly specialized mission and services, we rely primarily on community, regional and state-wide public health and community needs data and assessments as well as feedback from CHNA 17 and Middleborough town officials. Needs assessments that were reviewed can be found in the appendix (pages 19-21).

IV. Key statistics

- >20% of adults in Massachusetts experienced mental illness in 2016-2017. >10% of adults in Massachusetts experienced a substance use disorder over the same time period.¹

- In 2016, ~7% of adults with co-occurring disorders received mental health care and substance use disorder treatment, 38% received only mental health care, and <3% received only specialty substance use treatment.²

- 40% of patients admitted to acute care hospitals in 2014 were diagnosed with a behavioral health condition. Of those, 24% had a co-occurring mental health condition and substance use disorder.³

¹ The Massachusetts Behavioral Health Care System: Strengths, Gaps and Opportunities for Improvement (January 2019)

² Co-occurring Disorders Care in Massachusetts, a Report on the Statewide Availability of Health Care Providers Serving Patients with Co-Occurring Substance Use Disorder and Mental Illness, Commonwealth of Massachusetts Health Policy Commission (May 2019) page 1

³ The Massachusetts Behavioral Health Care System: Strengths, Gaps and Opportunities for Improvement (January 2019)
• Emergency department (ED) utilization in Massachusetts increased substantially for all behavioral health conditions between 2011-2016, particularly for patients with substance use disorders.\(^4\)
  
  o There was >50% increase in ED visits for non-alcohol substance use disorders from 2011-2016 (e.g. opioids, hallucinogenic substances, cannabis)
  
  o >22% of patients with a behavioral health condition admitted to a hospital emergency department in 2015 had a length of stay of >12 hours.

• >33% of adults 19-64 years old who sought behavioral health care in 2018 reported unmet treatment needs. The number did not meaningfully change for those insured for the entire year.\(^5\)

• ~59% of Massachusetts youth who experienced a major depressive episode received no mental health services.\(^6\)

• There were 1,617 confirmed opioid-related overdose deaths in 2018 with Department of Public Health estimates of an additional 320-394 deaths. Overall, there was an estimated 2% decrease in the number of opioid-related overdose deaths in 2017 compared with 2016, followed by another 4% estimated decrease in 2018 compared with 2017. The count for 2018 represents an estimated 6% decrease from 2016.\(^7\)

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\(^4\) The Massachusetts Behavioral Health Care System: Strengths, Gaps and Opportunities for Improvement pages 9-10 (January 2019)

\(^5\) The Massachusetts Behavioral Health Care System: Strengths, Gaps and Opportunities for Improvement page 7 (January 2019)

\(^6\) Access to Behavioral Health Care in Massachusetts: The Basics, page 6 (July 2017)

• Behavioral health conditions carry considerable human cost for affected individuals and families, including a decline in health status and life expectancy.  
  o 10 years is the median reduction in life expectancy for individuals with mental illness;  
  o 9-17 years is the average reduction in life expectancy for individuals with substance use disorders.  
  o Individuals with behavioral health conditions lose more years to disability than those with other conditions.

V. Identification and prioritization of community mental health needs based on community assessments
Across these community and state-wide needs assessments, common themes related to mental health, behavioral health and substance abuse include:
• Mental health as a top health concern with specific foci on depression, anxiety, trauma, and suicide
• Concerns about substance abuse, including use of alcohol, prescription drugs and heroin, and the link between substance abuse and mental health issues
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• Concerns about shortages of mental health professionals across the state
• Need for more public education and dialogue about mental health and substance abuse

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8 The Massachusetts Behavioral Health Care System: Strengths, Gaps and Opportunities for Improvement page 8 (January 2019)  
Sources: https://www.healthsystemtracker.org/chart-collection/current-costs-outcomes-related-mental-health-substance-abuse-disorders/?_sf_s=mental#item-30-percent-adults-serious-mental-illness-not-receiving-mental-health-treatment;  
https://jamanetwork.com/journals/jamapsychiatry/fullarticle/2110027;  
VI. Follow-up

- This community health needs assessment was approved by the McLean Hospital Board of Trustees on September 19, 2019. It is prominently posted on the McLean website. (www.mcleanhospital.org). Partners HealthCare’s filing of Form 990 on McLean’s behalf includes the URL to this needs assessment on the McLean website.

- McLean’s implementation strategy will be updated to address the prioritized needs identified in this assessment. It will be reviewed by the McLean Hospital Board of Trustees and made publicly available by January 31, 2020.

McLean’s updated implementation strategy will focus on people and families affected by psychiatric illness and substance use disorders within CHNA 17 service areas and Middleborough and include:

- Expanding psychiatric services to meet community needs and decrease lengths of stay in hospital emergency departments for patients with mental/behavioral health needs
- Improving community mental health through innovative programs
- Caring for uninsured and underinsured
- Strengthening behavioral health workforce to address access and quality
- Expanding public education and engagement to reduce stigma
- Providing community support and contributions
Community Mental Health Needs Assessments

Community, regional and state-wide public health and community needs data and assessments reviewed during the planning process included:

Community / Regional

- Mount Auburn Hospital Community Health Needs Assessment (2018)

- Newton-Wellesley Hospital Community Health Needs Assessment (August 2018)
  https://www.nwh.org/media/file/chna.pdf

- Community Health and Racial Equity in Community Health Network Area 17 (September 2017)
  https://drive.google.com/file/d/1i9m1gZmKJ3--KKiCUlcykHVrsC44gALw/view; https://drive.google.com/file/d/1M84WJm3qID6ErBLf_PXIG55mk8gdXpDU/view

State

- Co-occurring Disorders Care in Massachusetts, a Report on the Statewide Availability of Health Care Providers Serving Patients with Co-Occurring Substance Use Disorder and Mental Illness, Commonwealth of Massachusetts Health Policy Commission (May 2019)

- Faces of MassHealth: Portrait of a Diverse Population, Blue Cross Blue Shield of Massachusetts Foundation, Massachusetts Medicaid Policy Institute, Manatt Health and Health Care For All (May 2019)

- Data Brief: Opioid-Related Overdose Deaths among Massachusetts Residents, Massachusetts Department of Public Health (data through December 2018; posted February 2019)
- The Massachusetts Behavioral Health Care System: Strengths, Gaps, and Opportunities for Improvement -and- Ready for Reform: Behavioral Health Care in Massachusetts, Blue Cross Blue Shield of Massachusetts Foundation and Manatt Health (January 2019)
  https://bluecrossmafoundation.org/sites/default/files/download/publication/MA_Behavioral_Health_System_Chartpack_Jan2019_FINAL.pdf -and-

- Licensed beds, Massachusetts Association of Behavioral Health Systems (January/February 2019)

- Massachusetts FY2018/2019 State Behavioral Health Assessment and Plan by Center for Mental Health Services, Division of State and Community Systems Development (September 2017; expires September 30, 2020).

- Access to Outpatient Mental Health Services in Massachusetts, Blue Cross Blue Shield of Massachusetts Foundation and Abt Associates (October 2017)
  https://bluecrossmafoundation.org/publication/access-outpatient-mental-health-services-massachusetts

- Access to Behavioral Health Care in Massachusetts: The Basics (July 2017)
  Prepared for the Blue Cross Blue Shield of Massachusetts Foundation by Abt Associates

- Behavioral Health & Readmissions in Massachusetts Acute Care Hospitals, Center for Health Information and Analysis (CHIA) (August 2016)

- Commonwealth of Massachusetts Action Plan to Address the Opioid Epidemic in the Commonwealth (June 2015); update (January 2016)
• Task Force on Behavioral Health Data Policies and Long Term Stays: Final Report to the Health Policy Commission, the Joint Committee on Mental Health and Substance Abuse and the Joint Committee on Health Care Financing (June 2015)
  www.chiamass.gov/assets/Uploads/bhtf-final-report-2015-6-29.docx

• Behavioral Health Integration Task Force Report to the Legislature and Health Policy Commission (July 2013)