

## Granville-Vance District Health Department

### Lead Organization Information

Lead Applicant Organization Type	Phone	Organization Website	
Health Department	252-492-7151	www.gvph.org	
Street Address	City	State	Email
101 Hunt Drive	Oxford	NC	wsmith@gvdhd.org

### Primary Consortium Partners

Name	State	Organization Type
Cardinal Innovations (Now Vaya)	North Carolina	Mental Health Provider
Maria Parham Health	North Carolina	Hospital (non-CAH)
Warren County Health Department	North Carolina	Health Department
Community Care of North Carolina	North Carolina	Non-profit Organization
Children's Development Services Agency	North Carolina	Non-profit Organization
Department of Social Services (DSS)	North Carolina	Non-profit Organization
FVV Opportunity/FGV SmartStart	North Carolina	Non-profit Organization
Public Schools (Granville, Vance, Warren counties)	North Carolina	School District
Visions Behavioral Health	North Carolina	Mental Health Provider
Law Enforcement (city and county agencies)	North Carolina	Non-profit Organization
County Detention Ctrs (Granville, Vance, Warren)	North Carolina	Non-profit Organization
District Court/DA Offices (Granville, Vance, Warren)	North Carolina	Non-profit Organization
Daymark Recovery and Recovery Innovations	North Carolina	Non-profit Organization
NC Harm Reduction Coalition	North Carolina	Non-profit Organization
Correctional Behavioral Health	North Carolina	Mental Health Provider

### Focus Areas

Mental Health	Substance Use
Unintentional Injury	

### Target Population

Adults and adolescents in the proposed service region who struggle with access to mental health and substance use treatment (most often those with Medicaid and those with no insurance).

### Evidence-based/Promising Practice

The 2016 report of the American Psychiatric Association and the Academy of Psychosomatic Medicine on dissemination of integrated care within adult primary care settings states that there is expert consensus that all effective Collaborative Care Models share four core elements:

1. Team-driven;
2. Population-focused;
3. Measurement-guided; and
4. Evidence-based.

Moreover, the combination of these four elements provides for greater accountability and quality improvement. Collaborative Care — This model represents a combination of two evidence-based models shown to improve access to evidence-based mental health treatments for primary care patients:

1. The Collaborative Care model; and
2. Integrated core principles/elements of the evidence-based Chronic Care Model.

### Project Description

The proposed approach, called Integrated Care Outreach Network (ICON), includes providing behavioral and mental health services through primary care in the designated rural region and will be implemented within the context of the consortium’s evolving initiatives. By bringing mental health services to primary care, ICON believes behavioral health disorders can be normalized and treatment destigmatized, while simultaneously, access for patients can be increased by making evidence-based mental health services available in patients’ regular primary care clinics. The overall population of focus will be adults and adolescents residing in the proposed region, which includes Granville, Vance, and Warren counties, and struggle with access to mental health and substance use treatment (most often those with Medicaid and those with no insurance).

Project ICON will leverage the skills and insights of the consortium to bring collaborative and sustainable solutions required to stem this epidemic by integrating all stakeholders — public health, criminal justice, human services, and the private sector. This collaborative approach will galvanize the region’s stakeholders to perform as a community with the goal of incorporating multifaceted strategies, such as community education and engagement, provider training, telehealth, and multidisciplinary teamwork, which will aid the consortium in dismantling the remaining barriers to behavioral and mental health treatment and opiate use disorder prevention, treatment, and recovery.

### Project Goals

1. Expand the clinical mental health workforce at one consortium site to increase access to care for low-income and uninsured adults in the targeted three-county region.
2. Create and implement a plan for clinical practice and culture change that includes collaborative care monitoring, trauma-informed care, and behavioral health integration across programs.
3. Engage stakeholders and consortium members in advocacy for policy and systems changes that would improve the quality of and access to collaborative care.
4. Work with consortium partners to assess and identify referral opportunities for youth and adolescents who struggle to access behavioral health services in the region.

### Expected Outcomes

To enhance health care service delivery for the local rural and underserved population based on the needs of our region. To find and document viable pathways to care for both adults and youth in the region. Deliverables will include a strategic plan, assessment plan, sustainability plan, annual performance measures report, noncompeting continuation report, final program assessment, and final closeout report. At the close of the four-year period, improved access to collaborative care at Granville Vance Public Health and across the rural network will have been realized.