

Behavioral Health Task Force: Primary Care (including Urgent Care) and Behavioral Health Work Group

Notes: December 9, 2014 Meeting

Attendance:

Lisa Lomas	Steve Snelgrove
Joy Stephens	Vickie Miles
Becky Bell	Leah Blaine
David Leichtling	Danilsa Marcinak
Mark Donovan	Tammy Spengler
Beverley Francis-Gibson	

Possible meeting dates: December 18, 30 and January 6 in the morning. Doodle will go out to everyone and Leah has offered meeting space at Chase Brexton as well as Mark Donovan offered space at his office.

The HCGH is having an asset map of medical providers completed by John Hopkins School of Public Health Science. Steve asked the group to create a list of characteristics/variables we would like to know and to email that information to him since he had to leave.

Through introductions each person identified why they chose this work group and issues of interest to them:

Gaps in services as well as the quality and effectiveness of providers should be identified

Better, cost-effective resources that could be offered to patients by private practitioners is needed

The impact of state changes and their impact locally (no one is doing anything about this): practitioners are going out of business (i.e. billing and reimbursements)

Transition Aged Youth Services: what is available in the community; establish a survey that can be done to identify early and/or at risk youth

The school system's home/hospital students are forgotten and they are typically the most serious kids

Support primary care physicians to do more screenings for behavioral health

Diversity is challenging: translators needed, but organizations cannot afford this service or lack bi-lingual staff

Resource list and directories should indicate specialized services which are typically hard to find and should be available online with searchable options

Services in the community and through the schools should be available evenings/weekends to allow access

High insurance cost and restrictions are frequent barriers

Urgent care for those needing immediate care due to long wait times to see provider

Notes prepared by Beverley Francis-Gibson