

# BEHAVIORAL HEALTH AND RETAIN:

## *Wraparound Service or Collaborative Care?*



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Stonegate Strategies

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**RETAIN**

Retaining Employment and Talent  
After Injury/Illness Network

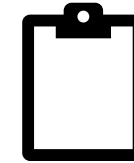
 **AIR**<sup>®</sup>

  
**ODEP**  
Office of Disability  
Employment Policy

# Today's Agenda

- Welcome and Introductions
- Terms
- SAW/RTW and BH
- Wraparound Supports
- Collaborative Care
- OH RETAIN and BH
- Group Discussion

*Get ready for a few  
polls as we solicit  
your experience and  
input*



# BEHAVIORAL HEALTH AND RETAIN

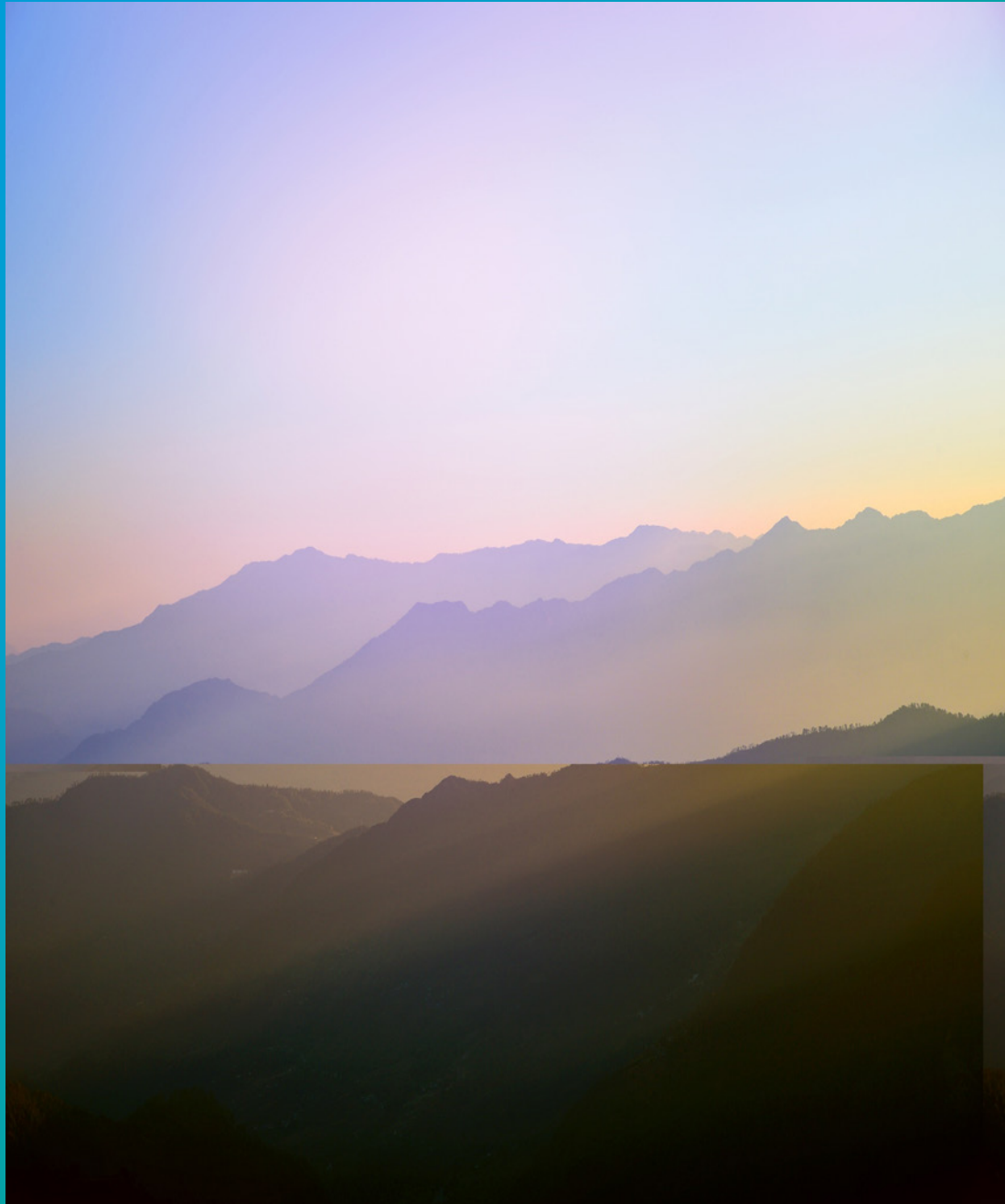
Terms

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# Definitions

Behavioral Health = Mental Health + Substance Use Disorder

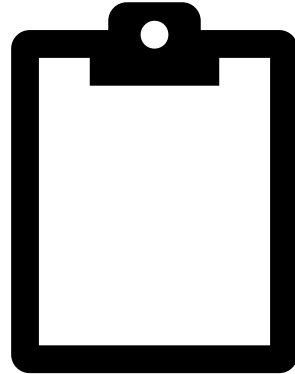
For purposes of this session, I will use the term “behavioral health” to encompass both forms of support and intervention.



***Wraparound supports* are services or offerings from an employer that aim to stabilize the personal lives of staff through unconventional benefits.**

*Leading Age*

# POLLS 1 and 2



# BEHAVIORAL HEALTH AND RETAIN

SAW/RTW and BH

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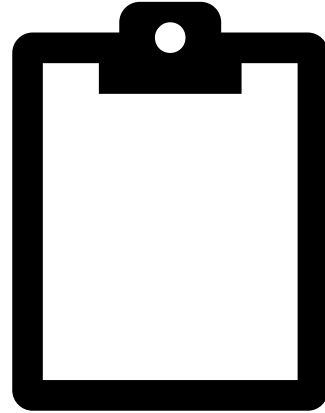
# SAW/RTW and BH

- Response and recovery from event/trauma
- Treatment for existing diagnosis
- New medication impact on possible SUD
- Employment “mindset?”
- And . . . ?





# POLL 3:



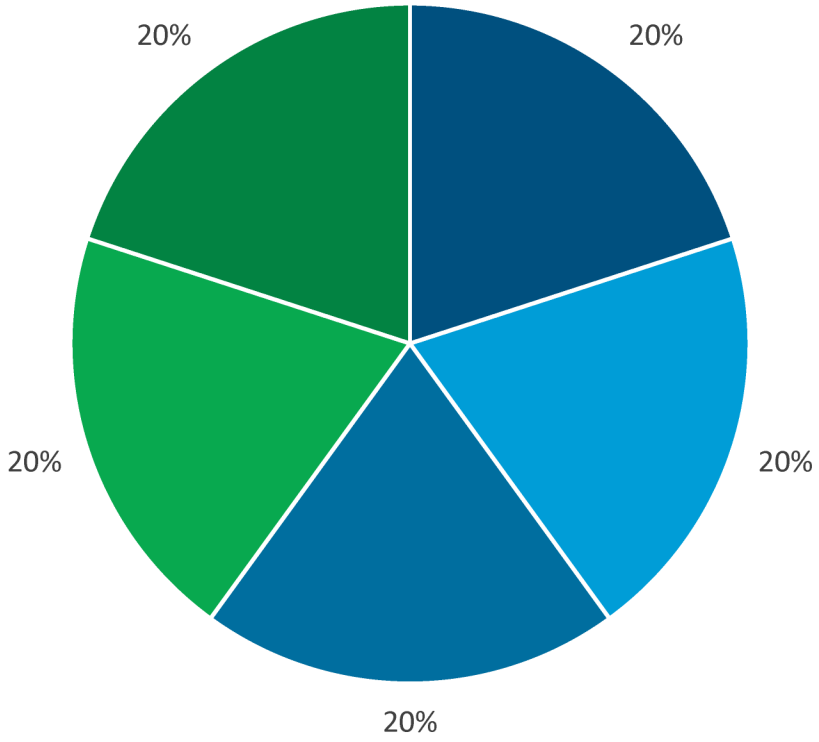
## BH and RETAIN Outcomes

# BEHAVIORAL HEALTH AND RETAIN

Wraparound Supports

# Wraparound Supports

■ BH ■ Transportation ■ Child Care ■ Food Assistance ■ Broadband



# Populations and Wraparound

- Direct Caregiving Workforce
  - ✓ Leading Age
- Black Workers
  - ✓ Jobs for the Future (JFF)
- Public Workforce System Customers
  - ✓ *Towards Employment*
- All share interest in equity, improving employment rates and outcomes

# BEHAVIORAL HEALTH AND RETAIN

Collaborative Care

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# SAW/RTW Intervention Pathways

- Health Care
- Public Assistance
- Unemployment Insurance
- Workers Compensation
- Private Disability Insurance
- Job Training

# BH Screening Options SAW/RTW

- Depression
- Anxiety
- Bi-polar
- PTSD
- SUD

*Screening, Brief Intervention and Referral to Treatment (SBIRT) is an evidence-based approach to identify individuals who use alcohol and other drugs (substances) at risky levels.*

*The PHQ-9 is a validated screening tool focusing on symptoms of depression.*

*GAD-7: The GAD-7 is a validated screening tool and symptom severity measure focusing on the four most common anxiety disorders.*

*Alcohol Use Screening (AUDIT-C): The AUDIT-C is a validated screening tool focusing on symptoms of alcohol dependence.*

*Substance Abuse Screening (ASSIST): ASSIST is a brief screening tool that focuses on dependency related to alcohol, tobacco products and other drugs.*

# Populations and Collaborative Care

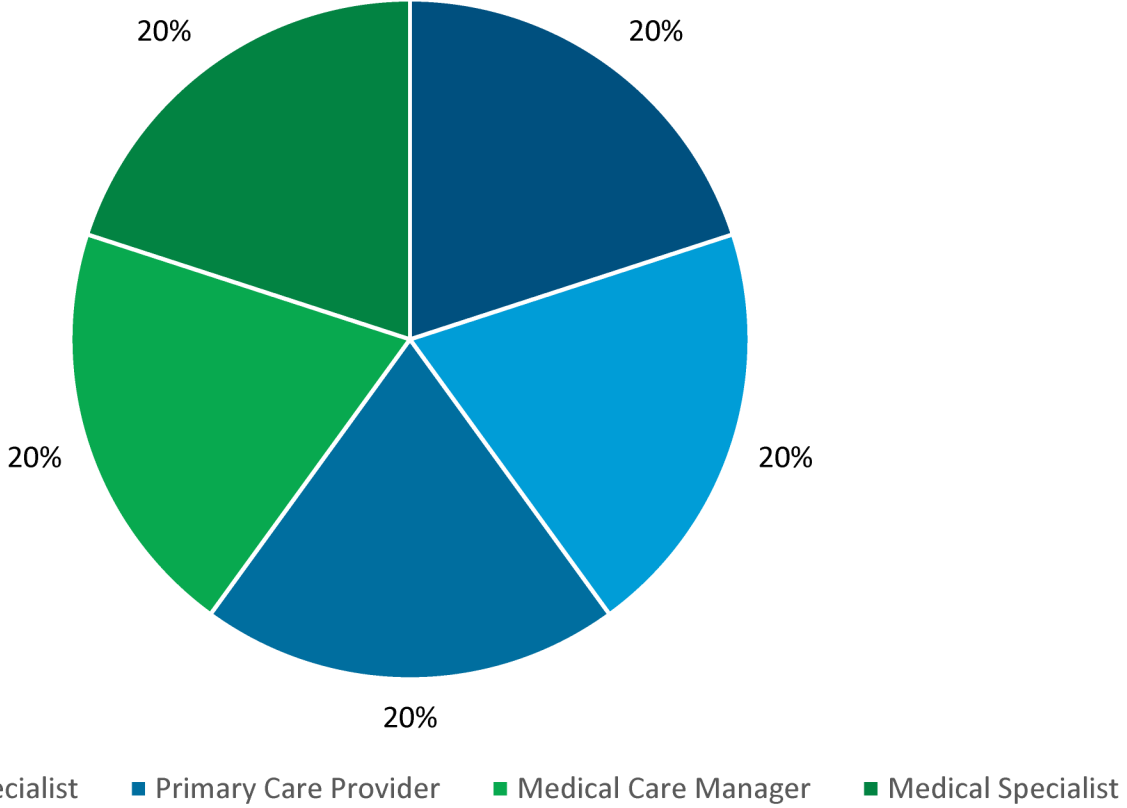
- University students
- Postpartum mothers
- Older adults
- SUD
- All these populations demonstrated evidence-based improvements through use of CoCM:

*“Current data suggests that Collaborative Care may significantly improve patient outcomes and time-to-treatment in all reviewed settings, and successfully adapts to special patient populations.”*

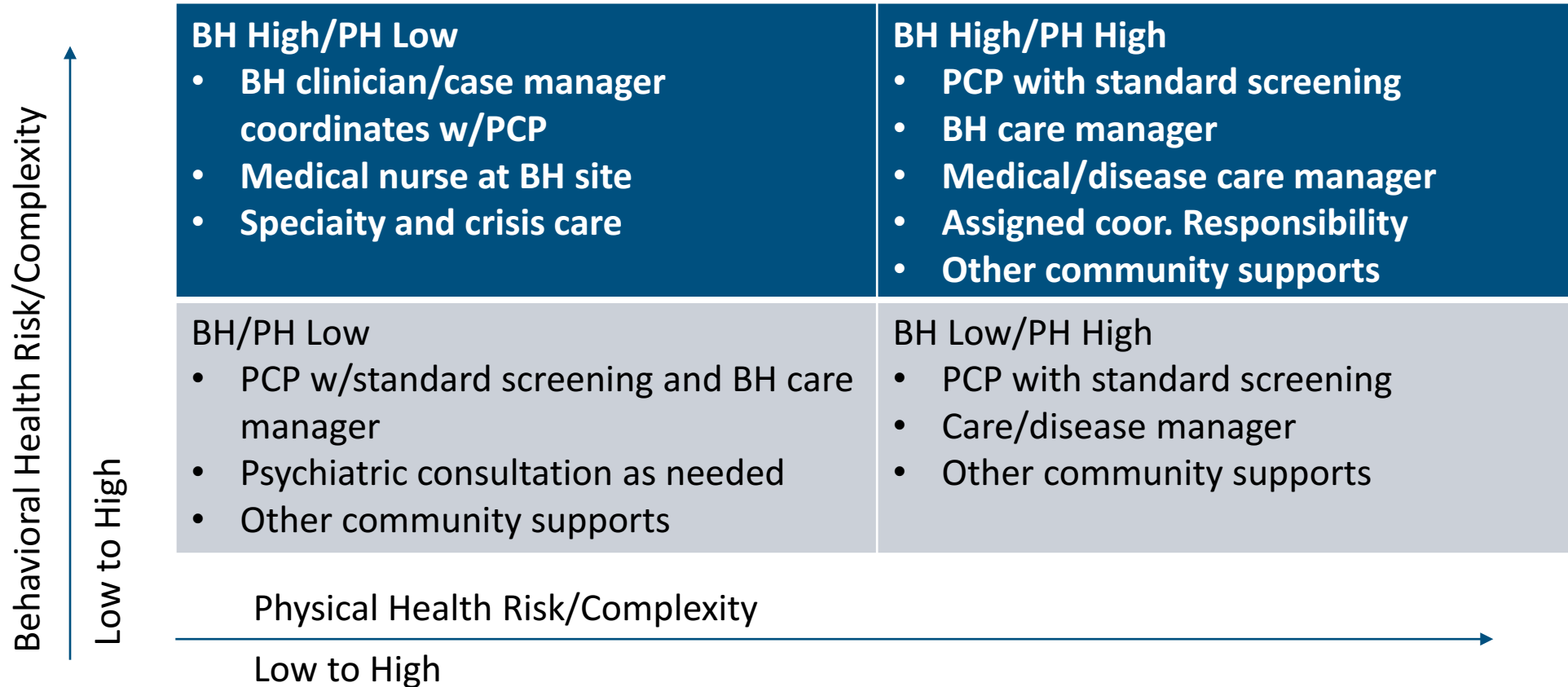
Collaborative mental health care: A narrative review, Dec 30, 2022, Christopher Reist, MD, MBA,a,b Incia Petiwala, BS,c Jennifer Latimer, LCSW, Sarah Borish Raffaelli, PhD, Maurice Chiang, MS,corresponding author,\* Daniel Eisenberg, PhD, and Scott Campbell, MD



# Collaborative Care



# Four Quadrant Clinical Integration Model



National Council for Community Behavioral Healthcare 2005

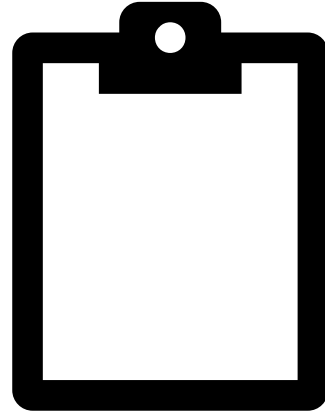
# BEHAVIORAL HEALTH AND RETAIN

Interview and Group Discussion

# Interview: Ohio RETAIN

1. Does Ohio's RETAIN program incorporate any behavioral health screenings? Supports? Please describe.
2. Does your RETAIN project serve individuals with behavioral health needs and diagnoses as a targeted population? How do you determine eligibility?
3. What have you learned thus far about BH needs of and services for RETAIN participants?
4. Do you think that BH support will be part of a post-RETAIN model, and if so, how?

# POLL 4:



## Your BH Approach

# Group Discussion Questions

- What BH services are part of your RETAIN project?
- Do you consider these services health care, wraparound, or something else?
- How might we think and act differently with regards to behavioral health and RETAIN, to better support, serve and improve outcomes?
- What's next after RETAIN for BH services and SAW/RTW?

# Thank you!

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