

NEW HAMPSHIRE UNION LEADER

Mental health centers remain open and add remote services, brace for growing need

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New Hampshire's 10 community mental health centers, still open for business after rapidly ramping up new telehealth platforms, expect to soon see increased demand and additional strain on their already understaffed support systems.

Steve Arnault, vice president of clinical services at the Center for Life Management in Derry and Salem, said patient numbers already are climbing over fear and uncertainty, financial hardship and social isolation prompted by COVID-19.

Those factors have "really pushed people's symptoms," he said. "We've actually had some suicides in the state related to COVID-19, and they weren't positive (for the disease)."

National mental health helplines report a surge in calls and texts, according to the Center for Public Integrity and Columbia Journalism Investigations. The Center noted an eight-fold increase in calls and messages to the Substance Abuse and Mental Health Services Administration and the nonprofit Vibrant Emotional Health in March.

Similarly, the National Alliance on Mental Illness (NAMI) Helpline is seeing more than 150 calls daily, far exceeding its norm.

Ken Norton, with NAMI New Hampshire, said that though he expects the need for mental health services to grow significantly, it's been his experience that many people try to hold it together at first and seek help after the crisis has passed.

"People need to call for help. Don't do this alone. If you're feeling stressed and things aren't going well, please reach out," Norton said.

Private providers are getting a lot of cancellations for appointments, often because people have lost their jobs and insurance benefits.

For many, "it's an economic thing," Norton said. "That's a major concern."

Stressing the workforce

Staffing remains a challenge. Statewide, community mental health centers have 200 clinical openings, said Craig Amoth, president and CEO of Greater Nashua Mental Health.

"We already had a workforce concern before this," Amoth said. "It's certainly stressing the workforce even more."

NAMI's Norton said some mental health centers are seeing workers call out and take time off for a number of reasons, including fear for their safety or chronic conditions that put them at risk.

Amoth said one to two percent of their staff of about 240 have elected to take voluntary furloughs or are using earned time off.

"I am hearing different centers having different experiences," Amoth said.

Keeping personal protective equipment in stock is another issue for mental health centers, which are still seeing patients in person as necessary.

"We're struggling. We have kind of a trickle of masks and other items," Arnault said.

He said the center has received some donations and has a source that is 3D-printing some masks and face shields.

Open for business

"The main point that we're trying to make is that we are open for business," said John Barthelmes, interim CEO at Riverbend Community Mental Health in Concord.

Riverbend, like other community mental health centers, is keeping its doors open for required in-person services like medication injections or for people who don't have phones. They are now offering most of their direct services, such as medication review, prescriber appointments, psychotherapy, case management and functional support services, over the phone.

"In really broad terms, there's no service that we're not offering," said Chris Mumford, chief operations officer at Riverbend.

Mumford said that became possible after an executive order by Gov. Chris Sununu that temporarily suspended many of the regulations restricting telehealth.

Amoth said the state Department of Health and Human Services and the federal Centers for Medicare and Medicaid have been "extremely responsive" by clearing up red tape and working overtime to create billing codes for the new remote services.

Community mental health centers set up telehealth systems virtually from scratch in a very short period.

Mumford said Riverbend operated almost entirely face-to-face, except for some nominal pilot programs, before the pandemic hit home. In just the past couple weeks, they moved 50% to 70% of their programs to over-the-phone and then added video services.

Arnault said CLM previously had one Advanced Practice Registered Nurse offering telepsychiatry. Now, he estimates, about 90% of the 235 staff are working remotely, and 170 to 180 of those are direct-service providers.

Arnault said the direct service staff already had laptops or tablets, and already had remote access to electronic medical records, which made the transition easier.

"We've done an incredible amount of work in just over two weeks. Completely transformed how we interact with ourselves, our clients and our community," Arnault said.

"It's been a whirlwind," Amoth said.

Amoth said the caseload went from an estimated 5% telehealth to about 90%. About 200 Greater Nashua Mental Health employees now work remotely either all or most of the time, occasionally coming in for rotating in-office work.

"Most people have taken to it and adapted to it remarkably well," Amoth said.

Meanwhile, Norton said NAMI is continuing its direct family support, education and advocacy programs remotely. Even some volunteer-led support groups have begun to meet virtually, he said.

They're looking for other ways to help promote connectedness and a sense of community to stave off the negative effects of isolation. One idea is to host a mental-health-themed movie night through the new Netflix Party platform, followed by a discussion.

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