**COVID-19 Survey on Client Access and Wellbeing**

**Problems Identified and Actions Taken**

**January 2020**

<table>
<thead>
<tr>
<th>Problem Area</th>
<th>BHA Action Taken</th>
<th>Additional Actions to be Taken</th>
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| Social Isolation, anxiety and depression identified as major concerns | 1. Developed Resource Guide of on-line support groups  
2. Developed Resource Guide of trainings and other activities that give information on how to manage during this crisis – for public and professionals  
3. Guidance to Wellness and Recovery Centers to remaining open and safe  
4. Sought and received MA approval for audio only approval  
5. Sought and received Board of Professional Counselors waiver for Trainees to bill for audio only services  
6. Provide MD Mind Health Texts | Push out reminders to LBHAs and providers about wellness resources available for patients |
| Lack of new referrals to service due to concerns about COVID exposure - referrals sources closed or limited (schools, criminal justice system) | 1. Created an “Open for Business” graphic for State and local distribution – programs open and prepared to provide treatment safely  
2. PPE support/guidance to enhance protections for staff and those served | Refresh and re-send Open for Business graphic to LBHAs and support/advocacy groups for further distribution and posting on their media  
Send to treatment providers to post |
| Telehealth barriers | Telehealth guidance to providers via webinar | Identify telehealth best practices  
Have follow up telehealth webinar for providers  
Purchase telehealth equipment for providers to distribute to patients |
| Return of symptoms/relapse | Developed Resource Guide of on-line support groups  
Collaborate with Office of Harm Reduction for naloxone distribution expansion  
Assisted with OTP medication protocol changes | Refresh and ensure accuracy of on-line support group guide |
|----------------------------|-------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| Communications with Stakeholders | Monthly letter to providers | Continue Monthly letter  
Release general guidance to providers on best practices to assist patients during this time (see below)  
Discuss challenges in residential settings particularly around taking medications as prescribed |

**Guidance for Providers**

Based upon the COVID-19 survey results of providers regarding individuals receiving behavioral health services in Maryland, there are actions that treatment providers should consider:

- Increase use of mail-order for medications
- Communicate program safety protocols for in-person visits
- Explain to patients what telehealth is and how it works
- Make sure PPE is available for patient visits
- Consider increased accommodations for patients with child care responsibilities (e.g., evening and weekend telehealth appointments) and prioritize these patients for telehealth pilots
- Increase use of medications (buprenorphine, long acting naltrexone) for the treatment of opioid use disorder in non-OTP programs
- Increase harm reduction messaging to patients, especially those at risk of relapse
- Send messages to patients between appointments to remind them of upcoming appointments, to take medications as prescribed
- Remind patients of their next appointment at the end of the current appointment
- Remind patients to increase their appointment schedule during difficult times
- If available, use peers for outreach to patients struggling to keep appointments or staying stable
- Be clear on when patients need to have more frequent appointments, and let patients know those warning signs
- Push mental health resources to patients, including MD Mind Health text messages and online virtual recovery groups
- Ensure you’re screening regularly for symptoms that may not have been present at intake, especially substance use, depression, anxiety