



SAMHSA-HRSA Center for Integrated Health Solutions

Building Integrated Behavioral Health in a Primary Care Setting Introductory Webinar

Pam Pietruszewski

Dec 16, 2014



SAMHSA-HRSA Center for Integrated Health Solutions

**Slides for today's webinar are
available on the CIHS website at:**

www.Integration.samhsa.gov

under About Us/Innovation Communities

Setting the Stage:
Today's Facilitator



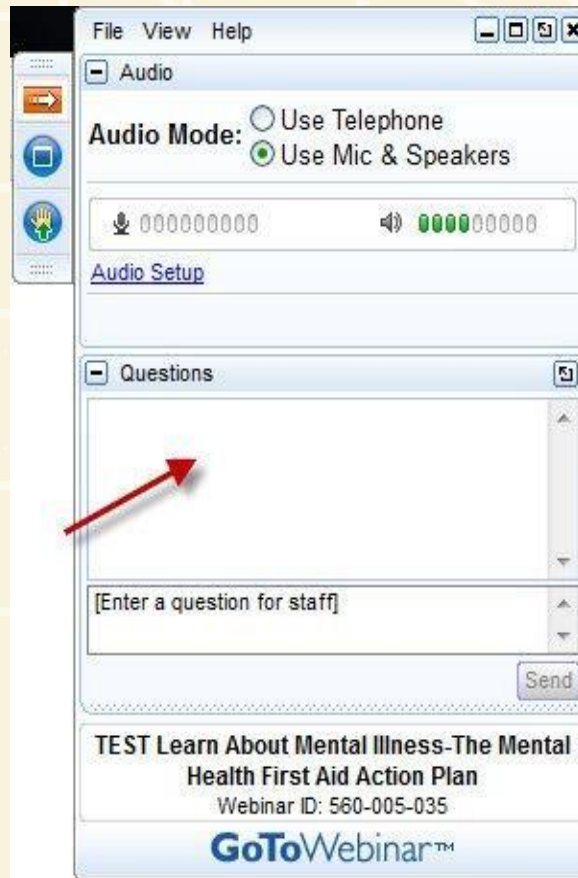
Pam Pietruszewski, MA
Integrated Health Consultant
SAMHSA-HRSA Center for Integrated Health Solutions

**Setting the Stage:
Today's Moderator**



Aaron Surma, MA
Quality Assurance Associate
SAMHSA-HRSA Center for Integrated Health Solutions

Our format...



Structure

Short comments from experts
Specifics from their point of view

Polling You

Every 20-minutes
Finding the “temperature” of the group

Asking Questions

Watching for your written questions

Follow-up and Evaluation

Ask for what YOU want or expect
Ideas and examples added to the
AOS Resource Center

How to ask a question during the webinar



If you dialed in to this webinar on your phone please use the “raise your hand” button and we will open up your lines for you to ask your question to the group. **(left)**



If you are listening to this webinar from your computer speakers, please type your questions into the question box and we will address your questions. **(right)**

Today's Purpose

- Welcome
- Overall Goal for the Innovation Communities
- Goal for Integrated Behavioral Health Innovation Community
- What to Expect
- Participant Key Tasks
- Next Steps



Poll Question #1

Of the following, which is your favorite board game?

- a. Yahtzee
- b. Monopoly
- c. Scrabble
- d. Uno

Innovation Communities

- Chronic Disease Self Management in Behavioral Health Settings
- Population Health Management in Behavioral Health Providers
- Who is Responsible for Care Coordination
- Developing High Functioning Primary Care Teams
- Building Integrated Behavioral Health in a Primary Care Setting

Overall Goal for the Innovation Communities

To address three key components:

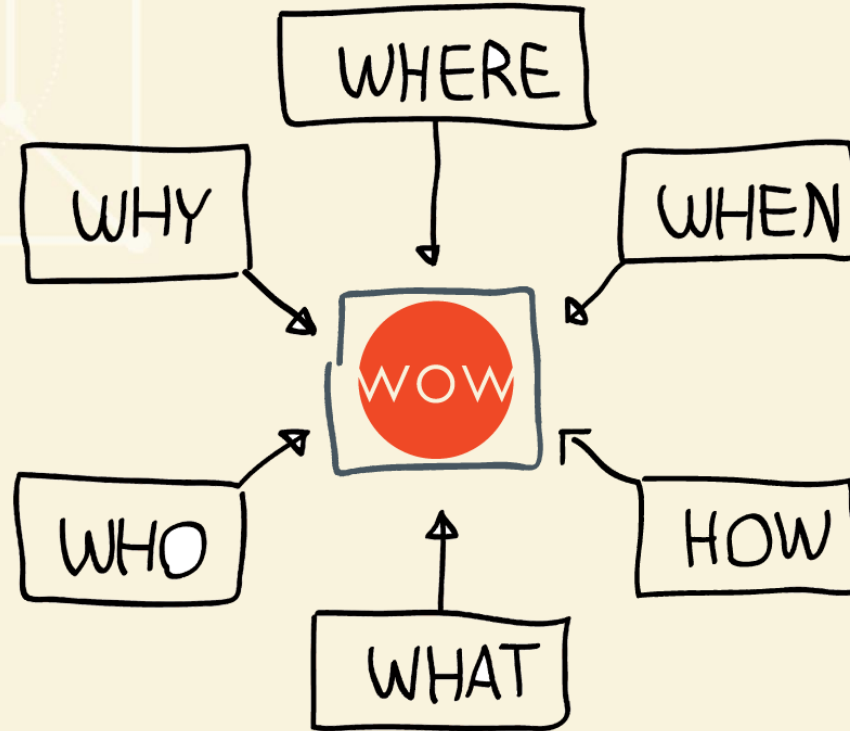
1. Topic-specific foundational information, knowledge and best practices
2. Innovation implementation planning
3. Adoption of the innovation and sustainability

Goals for “Building Integrated Behavioral Health in a Primary Care Setting”

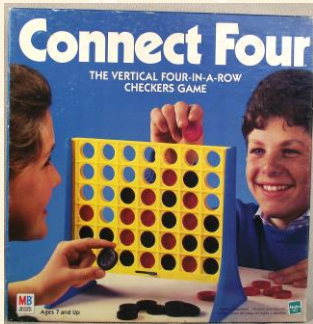
Address the core components for systems change including:

- Staffing
- Clinical services delivery design
- Billing/sustainability
- Quality metrics & improvement processes
- Health IT
- Staff/pt communication
- Services network agreements.

What to Expect



Connecting 4 Core Competencies



1. Screening & Assessment
2. Intervention
3. Cultural Competence and Adaptation
4. Practice-Based Learning and Quality Improvement

<http://www.integration.samhsa.gov/workforce/core-competencies-for-integrated-care>

1. Screening & Assessment

- Systematized
- Whole-person care
- Optimized team roles
- Hand-offs and coordination
- Key tools



2. Intervention

- Treat-to-target
- Self-management support
- MAT
- Prioritized treatment goals
- Team accountability to care plan



3. Cultural Competence & Adaptation

- Disparities
- Stigma
- Norms and preferences
- Workforce
- Fidelity vs local adaptations



4. Practice-Based Learning and Quality Improvement

- Workflows, small tests of change
- Process and outcome metrics
- Billing
- Embedded changes into policies & procedures
- Sustainability



Poll Question #2

The Core Component that will be most useful to me toward meeting the goals of this Innovation Community is:

- a. Screening & Assessment
- b. Intervention
- c. Cultural Competence and Adaptation
- d. Practice-Based Learning and Quality Improvement

Questions so far?



Levels of Integration

Coordinated		Co-located		Integrated	
1	2	3	4	5	6
Minimal Collaboration	Basic Collaboration at a Distance	Basic Collaboration Onsite	Close Collaboration Onsite with some System Integration	Close Collaboration Approaching an Integrated Practice	Full Collaboration in a Transformed / Merged Integrated Practice

- **Integration is** a process that occurs over time in the *entire* organization.
- **More than** having a good referral partner, care capacity, or a co-located site.
- **More than** a particular tool (e.g., PHQ 9), diagnostic combination (e.g., depression and diabetes), process (e.g., SBIRT), or evidence-based program (e.g., IMPACT).
- **Never ending!** Always new populations, partners, challenges, opportunities.





Medical assistant

Project administrator

CEO



Surgeon

Community health worker

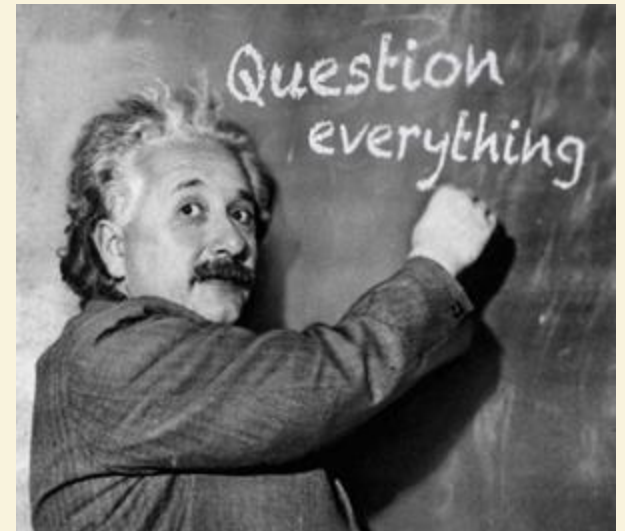
Receptionist

Integrated Practice Assessment Tool (IPAT)

- 8 question decision tree
- Collaborative completion by 2+ people with strong knowledge of organization's operational practices
- Questions: Staff physical location, involvement in care, approach to care and practice design, resources, information sharing, screening and leadership

http://www.integration.samhsa.gov/IPAT_integrated_practice_assessment_tool.pdf

- What does it mean to be at a 4?
- How do we move from a 5 to a 6?
- What if we are only a 1?
- Are there any 6's out there?
- How can we increase our integration level within the 4 core components of this Innovation Community?
- What is the meaning of life?



What to Expect

Jan – Feb

- Deeper dive into 4 Core Components
- Subject matter experts describe integration experience
- IPAT Tool
- Coaching call following January webinar

What to Expect

Jan – Feb	<ul style="list-style-type: none">• Deeper dive into 4 Core Components• Subject matter experts describe integration experience• IPAT Tool
Mar - Jun	<ul style="list-style-type: none">• Organizing your implementation plan• Identifying first PDSA cycles• Focus topics based on needs of the group• Team presentations• One hour coaching calls in March and June

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Jul - Sept	<ul style="list-style-type: none">• Subject matter experts tailored to needs of the group• Sustainability strategies & lessons from the field• IPAT Tool• Small focus group calls in August• Curated materials for dissemination in September

Participant Key Tasks

1. Complete pre & post assessment
 - IPAT
2. Develop a detailed work plan for effective behavioral health integration
 - Goals, tasks, staff leads, timelines, deliverables

About Your Support Team

Faculty - 2 CIHS staff and up to **3 subject matter experts** who will provide webinar content and coaching in collaboration with the CIHS staff.

- Faculty deliverables: Support participants with educational materials, supportive monitoring of participant progress toward achieving targets, and timely follow-up to questions raised, recorded as phone TA.
- Dedicated page on the [CIHS website](#)

Next Steps



Next scheduled webinar: January 20, 3-4pm Eastern

Homework: IPAT- submit results to Hannah Mason at hannahm@thenationalcouncil.org by Wednesday, January 14, 2015

Questions?



For More Information

Pam Pietruszewski

Integrated Health Consultant

pamp@thenationalcouncil.org

202-684-7457, ext. 253

Hannah Mason

Senior Associate

hannahm@thenationalcouncil.org

202-684-7457, ext. 255

Questions?

SAMHSA-HRSA Center for Integrated Health Solutions

integration@thenationalcouncil.org



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Thank you for joining us today.

Please take a moment to provide your feedback by completing the survey at the end of today's webinar.