



SAMHSA-HRSA Center for Integrated Health Solutions

Integrating Behavioral Health into Primary Care Innovation Community

Webinar #8

July 22, 2015

Today's Agenda

1. Updates, Reminders
2. Squirrel Hill Health Center
3. Resources & Next Steps

Welcome Nick Szubiak, Integrated Health Consultant



In June



- **Andrea Auxier, PhD**
Integrated Practice Assessment Tool
<http://ipat.valueoptions.com/IPAT/>

Deadline: Wed July 29

IPAT
 INTEGRATED PRACTICE ASSESSMENT TOOL

Authors: Wiscumsky, Ph.D.,
 Andrea Auxier, Ph.D.,
 Pam Wise Romero, Ph.D.,
 Bern Heath, Ph.D.

In April 2013 the SAMHSA-HRSA Center for Integrated Health Solutions released *A Standard Framework for Levels of Integrated Healthcare* authored by Bern Heath, Pam Wise Romero and Kathy Reynolds. This issue brief expanded, updated and re-conceptualized the initial work of Doherty, McDaniel, and Baird (1996) to produce a national standard with six levels of collaboration/integration that run from Minimal Collaboration to Full Collaboration in a Transformed/Merged Integrated Practice. In presenting this framework, the authors developed three tables. The first table provides Core Descriptions of each level, the second table introduces the Key Differentiators for each level (categorized as Clinical Delivery, Patient Experience, Practice/Organization and Business Model), and the third table discusses the Advantages and Weaknesses of each level. Despite the degree of detail provided in these tables, the subjective placement of practices on the continuum of the six levels has been inconsistent between practices and has fallen short of establishing an objective and reliable categorization of practices by level.

COORDINATED KEY ELEMENT: COMMUNICATION		CO-LOCATED KEY ELEMENT: PHYSICAL PROXIMITY		INTEGRATED KEY ELEMENT: PRACTICE CHANGE	
LEVEL 1 Minimal Collaboration	LEVEL 2 Basic Collaboration at a Distance	LEVEL 3 Basic Collaboration Onsite	LEVEL 4 Close Collaboration Onsite with Some Systems Integration	LEVEL 5 Close Collaboration Approaching an Integrated Practice	LEVEL 6 Full Collaboration in a Transformed/Merged Integrated Practice

Description of the Instrument

The authors of the Integrated Practice Assessment Tool (IPAT) have devised this tool to place practices on the level of collaboration/integration defined by *A Standard Framework for Levels of Integrated Healthcare* issue brief. The IPAT uses a decision tree model rather than a metric model. This more accurately mirrors the issue brief tables, and avoids the need to weigh responses to questions, which may result in an in-between assessment score (e.g., a 3.75 co-location). The decision tree model uses a series of yes/no questions that cascade to a specific Level of Integrated Healthcare determination.

© 2013 SAMHSA. Source: SAMHSA/HRSA. All Rights Reserved.

Poll Question

Has your organization submitted their online IPAT?

Yes

No

SQUIRREL HILL



A Federally
Qualified
Health Center



Meet Your Presenter:

- Dr. Kenneth Thompson, MD –Psychiatrist



- *BH team members that may be present:*

- *Heather L. Howard MSW, LSW-Behavioral Health Coordinator*
- *Elisa Lucke-Director of Operations*
- *Kathleen Fitzsimmons, MSW-Care Navigator*
- *Dr. Andrea Fox-Chief Medical Officer*
- *Sarah Guyer-Behavioral Health Receptionist*
- *Therapists- Julanne Bibro-Ruch MSW, LCSW*

Overview:



- Founded in 2006.
- We are a Federally Qualified Healthcare Center (FQHC)
- Our Mission description.
- Our populations served
- How our BH integration came into fruition
- Behavioral health services initially vs. expansion
- Our grant for Behavioral Health integration
- Describing all pieces of the operations from day today: describing all BH staff and roles.
- How the BH and medical side integrate-how hand offs happen.
- Struggles, and goals for the future.

Our History and Mission

- The **Squirrel Hill Health Center** is a comprehensive primary healthcare center established in 2006. SHHC provides the highest quality care to everyone in our community, regardless of their income level or insurance status. We serve everyone seeking the best care available with a special concern for their religious beliefs, ethnic and cultural background, language spoken, age, sex, and disability status. Our multi-lingual staff provides primary and preventive medical care for patients of all ages, mental and behavioral health services, dental care, and case management. We also have on-site lab services and for uninsured patients provide access to low cost medications.
- We are a Federally Qualified Healthcare Center (FQHC).

Our Populations Served, and area Demographics

- Overview of who we serve:
 - 60% of our patients speak a language other than English. Of that 60% the languages spoken are : 30% Nepali, 10 % Spanish, 6% Arabic, and many others. Over 50 languages are spoken by our patients. Many nationalities, ethnicities, and refugee groups make up our patient base.
- Multi-lingual Staff: languages spoken, including signing. Access to language line.
- Description of the area we are located in and locale of our patients in relation.

Integrated Care:

- Medical
- Dental
- Behavioral and Mental Health
 - Peer Support Program
- OBGYN
- Vision Clinic & Dermatology
- Mobile Unit
 - Stops at Milestone –we have a relationship with
 - Power-D&A halfway house for Women
 - Prospect Park-houses many in refugee community
 - Other sites/Future sites



Our Behavioral Health Integration process

- Received SAHMSA Behavioral Health Integration Grant
- Existing services included 1 therapist and psychiatrist with limited hours
- Per the grant our agency was able to hire an additional therapist, increase our psychiatrists hours. Hire a Behavioral Health Receptionist, and a Behavioral Health Coordinator full time.

Our Behavioral Health Integration process, Cont.

- Both our medical and behavioral health staff have access to and document in patient charts.
- We use the Electronic Health Record NextGen.
- Weekly Behavioral Health team meetings and monthly all staff mental health all staff meetings help congruity of care.
- Warm-handoffs are also utilized from BH to Medical and vice versa.



Thank you for
your time !
From the
SHHC.





***SAMHSA-HRSA
Center for Integrated
Health Solutions***

**Leading
Adaptive vs Technical
Change**

**Ronald Heifetz, MD, Harvard Medical School
Founder, Center for Public Leadership**

Technical Change

- Problem is well defined
- Answer can be found within present structure
- Implementation is clear
- Mechanic = Fix



Adaptive Change

- Challenge is complex
- Need to address deeply held beliefs & values
- Loss is inherent part of the process
- Organic = Grow



***The most
common cause
of leadership
failure***

**EHR, tools,
staff memos,
process & workflow**

***is treating an
adaptive
problem with a
technical fix.***

**Leadership support &
clinical champions**

Staff engagement, values, beliefs

**Allowing staff to work up to training
capabilities & testing expanded roles**

Shared vision & accountability

Clinical Example

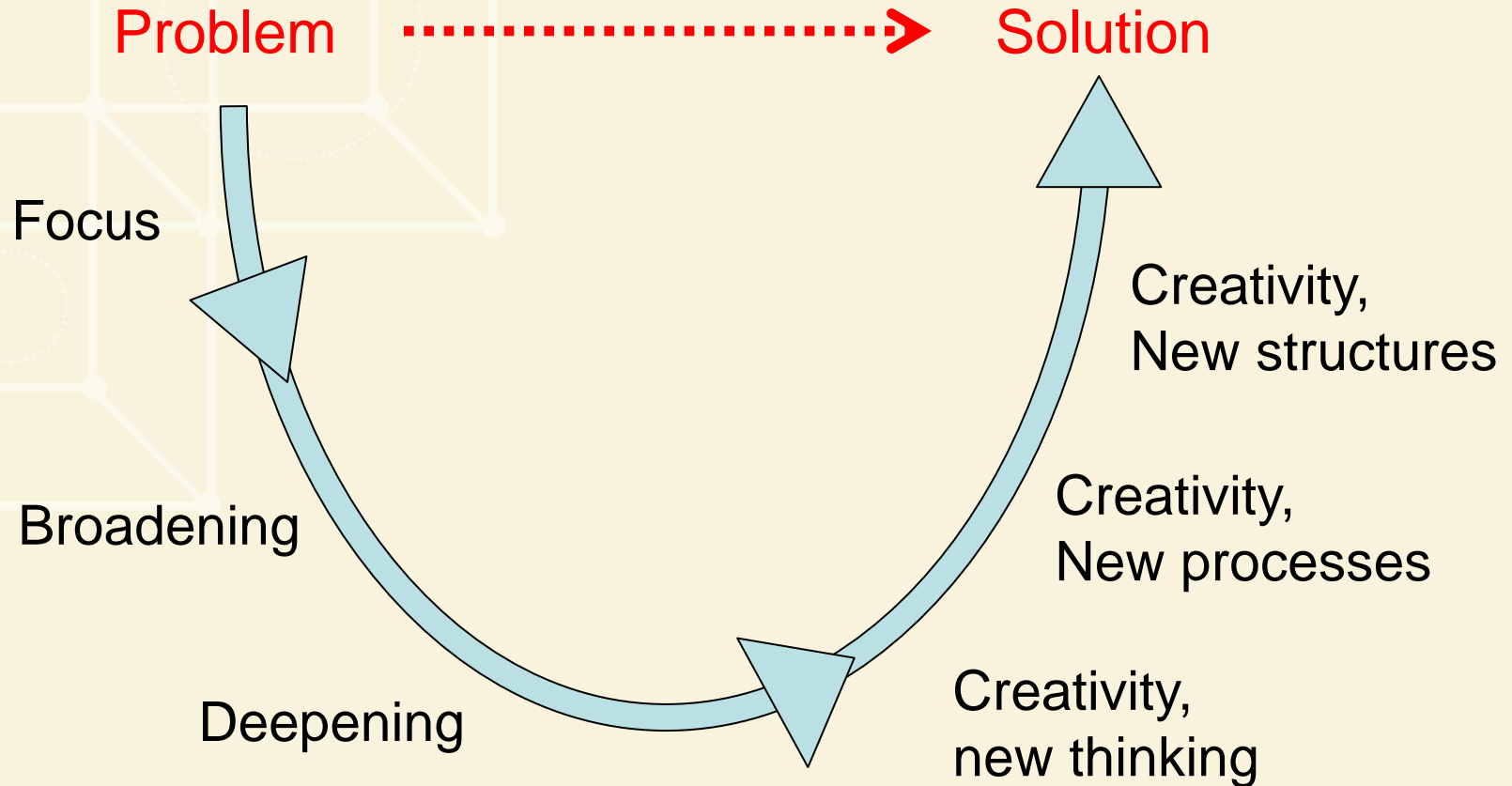
- Technical: Diabetes diagnosis, medication prescription
- Adaptive: Identifying as someone with diabetes, loss of “the way things were before”, how to fit medication into daily routine.

Process Example

- **Technical:**
New screening tool, workflow algorithm
- **Adaptive:**
Values and beliefs about screening for X, being the new member of the team, loss of independence

Otto Sharmer, PhD, MIT, 2007

Theory U



Questions?





Promoting Physical and Behavioral Health Integration: Considerations for Aligning Federal and State Policy

Issue Brief

http://www.integration.samhsa.gov/news/Promoting_Integration.pdf

Staking a Claim in State Planning

Interview with John Kern, MD Regional Mental Health Center

http://www.integration.samhsa.gov/about-us/esolutions-newsletter/esolutions-june-2015#grantee_feature

Improving Health Through Trauma-Informed Care

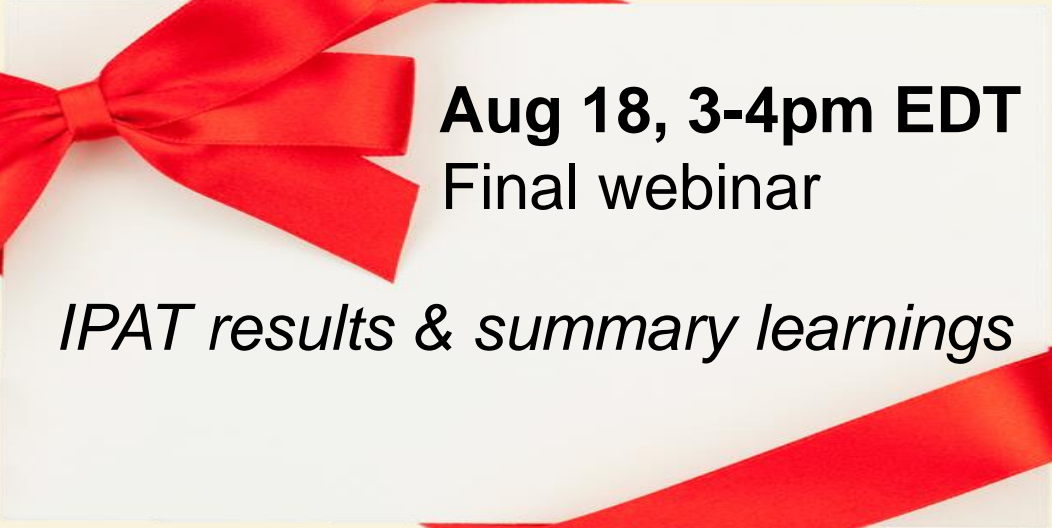
Webinar July 28 2-3:30pm est

<https://goto.webcasts.com/starthere.jsp?ei=1069399>

Next Steps

By July 29

Online IPAT: <http://ipat.valueoptions.com/IPAT/>



Aug 18, 3-4pm EDT
Final webinar

IPAT results & summary learnings



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