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SAMHSA

Substance Abuse and Mental Health
Services Administration

Starting Down the Pediatric Integrated Care Road and How the Mid-America MHTTC Can Help

Joseph Evans, PhD
Mid-America MHTTC



MUNROE-MEYER
INSTITUTE



I, Dr. Joseph Evans, have no financial, personal, or professional conflicts of interest in this training titled “*Starting Down the Pediatric Integrated Care Road and How the Mid-America MHTTC Can Help*”



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Mid-America Mental Health Technology Transfer Center: Who Are We & What Do We Do?

(Our Advertisement!!!)



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What is the Mid-America MHTTC?



- Funded by the Substance Abuse and Mental Health Services Administration
- 5-year grant awarded to Dr. Joseph Evans at the University of Nebraska Medical Center
- Aligns mental health systems and professional competencies with evidence-based practices
- Primary target states: Missouri, Iowa, Nebraska, and Kansas - but available to any provider(s).
- Provides free/low cost training and technical assistance on topics leading to effective behavioral health practice



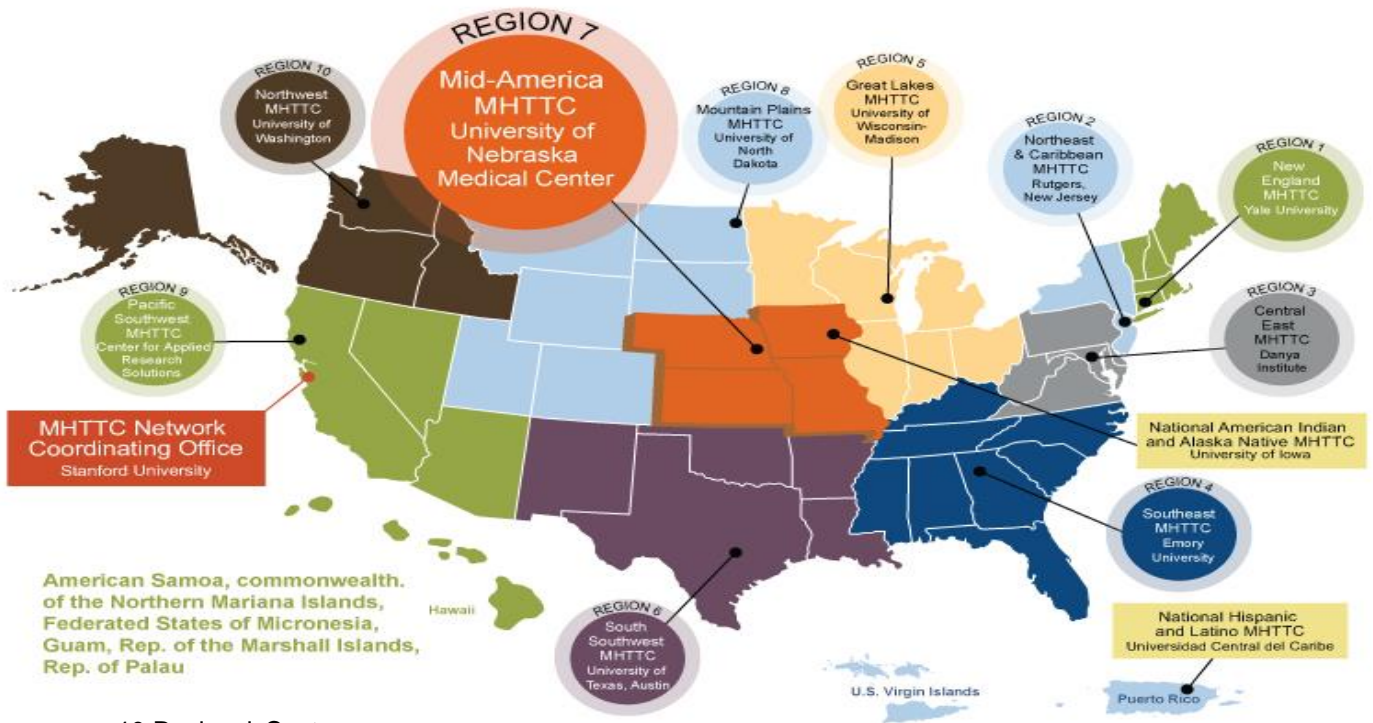
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- 10 Regional Centers
- National Hispanic & Latino Center
- National American Indian and Alaska Native Center
- Network Coordinating Office



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Specialized Training Topics



Integrated behavioral health in primary care



School mental health ***



Serious mental illness



Behavioral health workforce development



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Integrated Behavioral Health in Primary Care



Our MHTTC staff have 20+ years of experience integrating behavioral health into primary care in 40+ rural, suburban, and urban sites



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MHTTC: Providing Training and TA in Integrated Care



QUALITY INDICATORS
OF INTEGRATED
BEHAVIORAL HEALTH
IN PRIMARY CARE



EVIDENCE-BASED
BEHAVIORAL HEALTH
INTERVENTIONS FOR
CHILDREN AND
ADULTS APPLIED IN
INTEGRATED CARE
SETTINGS



TECHNICAL
ASSISTANCE ON
IMPLEMENTATION OF
INTEGRATED CARE



ONLINE AND IN-
PERSON COURSES
FOCUSED ON
INTEGRATED CARE
AND SPECIAL TOPICS
IN PEDIATRIC AND
ADULT SERVICES (IN
DEVELOPMENT)



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Integrated Behavioral Health in Pediatric Primary Care



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Why Integrated Care?

Integration of behavioral health into primary care represents a worthwhile investment because it:

- Increases access to behavioral health care.
- Improves health experience and outcomes for patients with behavioral disorders and/or substance use disorders.
- Improves health behaviors such as compliance with treatment recommendations, exercise, and diet.
- Reduces overall health care costs, thus representing the opportunity for shared savings for primary care practices.



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Why Focus on Pediatrics?

1 in 5 children
experience
behavioral
health concerns

One half of all
lifetime cases of
mental health
concerns begin
by age 14

75% of children
with mental
health concerns
are seen in
primary care

Primary care
providers are
managing these
children in their
practices

Why Pediatric Integrated Care?

- In pediatric practices, BH integration focuses on screening, prevention, and early intervention.
- Early identification and tx of trauma, social, emotional, and behavioral problems in children can lead to better quality of life and better health outcomes.
- Integrated care for children involves the child, adolescent and her/his family.

Source: <https://www.samhsa.gov/capt/practicing-effective-prevention/prevention-behavioral-health/adverse-childhood-experiences>



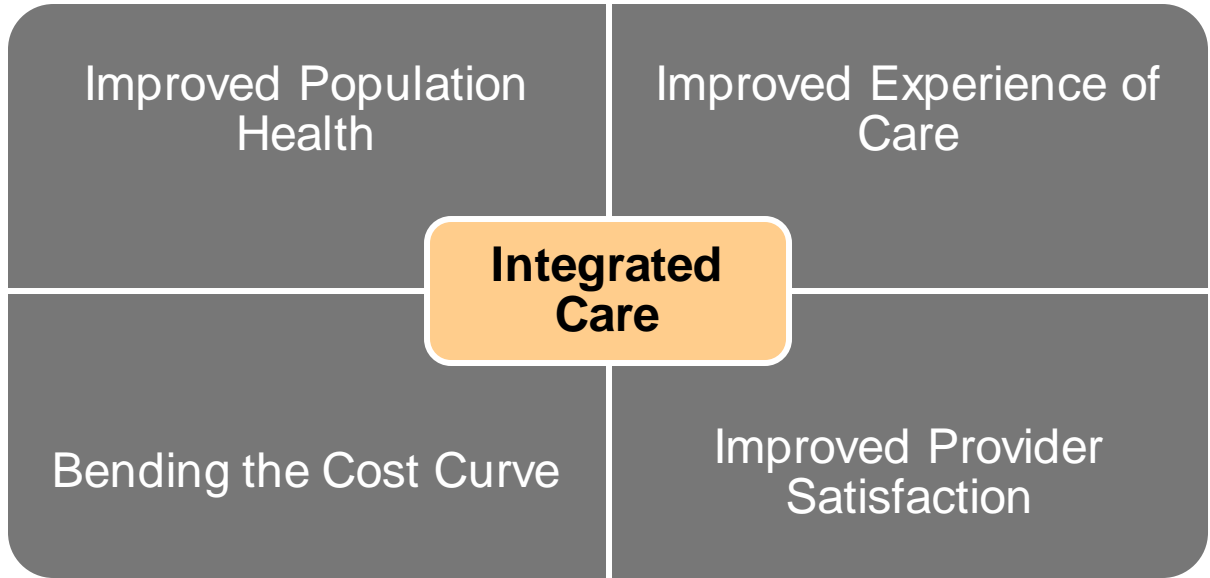
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The Quadruple Aim



Source: Berwick, Nolan, & Whittington (2008). The Triple Aim: Care, Health, And Cost. *Health Affairs*. vol. 27 no.3, 759-769



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Definition: What is Integrated Behavioral Health Care

- “The care that results from a practice team of primary care and behavioral health clinicians, working together with patients and families, using a systematic and cost-effective approach to provide patient-centered care for a defined population.”
- Team can include physicians, PA’s, NP’s, nurses, medical assistants, licensed behavioral health providers (psychologists, social workers, MFTs and counselors)



Primary Care TEAM Experience



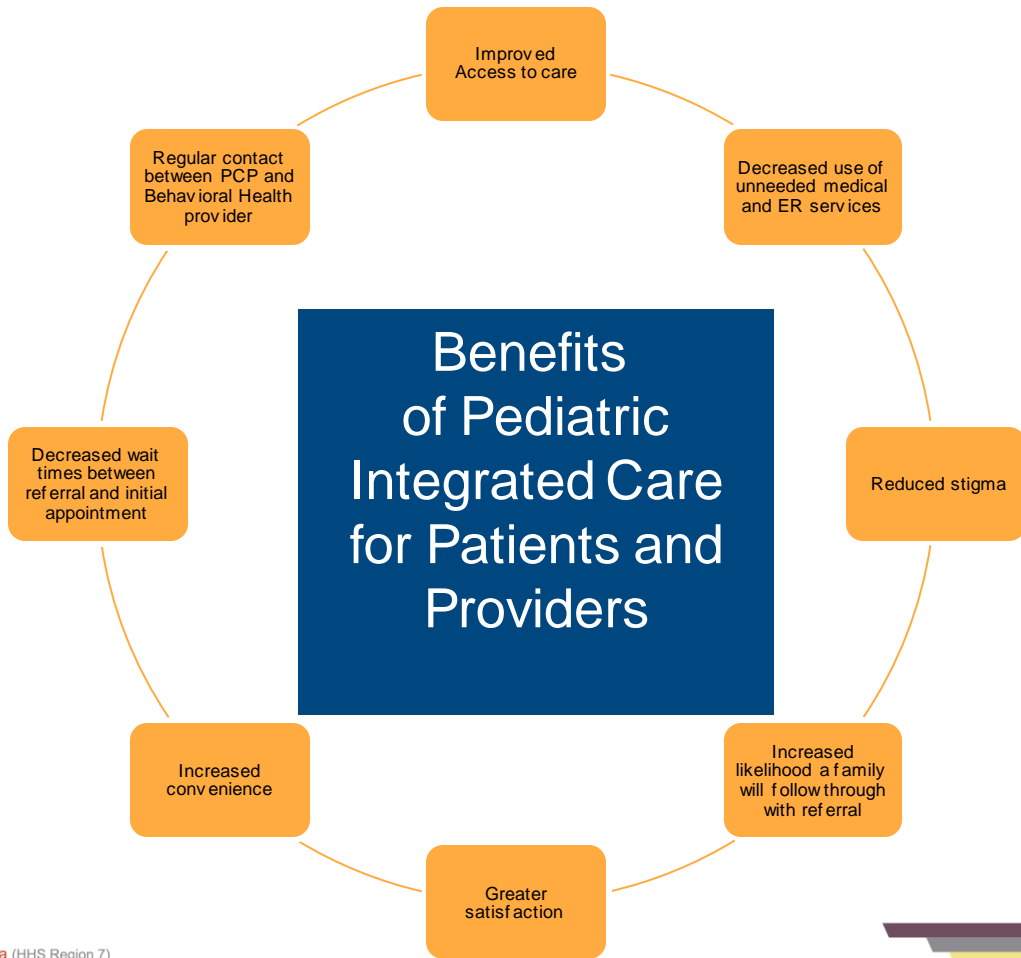
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Integrated Behavioral Health in Pediatric Primary Care

Collegial and Collaborative Relationship

Primary Care
Providers

Behavioral
Health
Providers



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Table 1. Six Levels of Collaboration/Integration (Core Descriptions)

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 System Integration	LEVEL 5 Close Collaboration Approaching an Integrated Practice	LEVEL 6 Full Collaboration in a Transformed/ Merged Integrated Practice
Behavioral health, primary care and other healthcare providers work:					
In separate facilities, where they:	In separate facilities, where they:	In same facility not necessarily same offices, where they:	In same space within the same facility, where they:	In same space within the same facility (some shared space), where they:	In same space within the same facility, sharing all practice space, where they:
<ul style="list-style-type: none"> » Have separate systems » Communicate about cases only rarely and under compelling circumstances » Communicate, driven by provider need » May never meet in person » Have limited understanding of each other's roles 	<ul style="list-style-type: none"> » Have separate systems » Communicate periodically about shared patients » Communicate, driven by specific patient issues » May meet as part of larger community » Appreciate each other's roles as resources 	<ul style="list-style-type: none"> » Have separate systems » Communicate regularly about shared patients, by phone or e-mail » Collaborate, driven by need for each other's services and more reliable referral » Meet occasionally to discuss cases due to close proximity » Feel part of a larger yet ill-defined team 	<ul style="list-style-type: none"> » Share some systems, like scheduling or medical records » Communicate in person as needed » Collaborate, driven by need for consultation and coordinated plans for difficult patients » Have regular face-to-face interactions about some patients » Have a basic understanding of roles and culture 	<ul style="list-style-type: none"> » Actively seek system solutions together or develop work-a-rounds » Communicate frequently in person » Collaborate, driven by desire to be a member of the care team » Have regular team meetings to discuss overall patient care and specific patient issues » Have an in-depth understanding of roles and culture 	<ul style="list-style-type: none"> » Have resolved most or all system issues, functioning as one integrated system » Communicate consistently at the system, team and individual levels » Collaborate, driven by shared concept of team care » Have formal and informal meetings to support integrated model of care » Have roles and cultures that blur or blend

Heath B, Wise Romero P, and Reynolds K. A Review and Proposed Standard Framework for Levels of Integrated Healthcare. Washington, D.C. SAMHSA-HRSA Center for Integrated Health Solutions. March 2013



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Competencies in Pediatric Integrated Care



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Behavioral Health Clinician Approach: **GATHER** Acronym

- **G**- Generalist Approach
- **A**- Accessibility
- **T**- Team-Based
- **H**- High Productivity
- **E**- Educator
- **R**- Routine



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Competencies in Integrated Care

Interpersonal
Communication

Collaboration and
Teamwork

Screening and
Assessment

Care Planning and Care
Coordination

Informatics (EHR)

Cultural Competence
and Adaptation

Systems Oriented
Practice

Practice-based Learning
and Quality
Improvement

Tx and Intervention***

(SAMHSA-HRSA Center for Integrated Solutions)

https://www.integration.samhsa.gov/workforce/Integration_Competencies_Final.pdf



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Child and Adolescent Protocols

Attention Deficit Hyperactivity Disorder	Depressive Disorders
Learning Disabilities	Oppositional Disorders
Sleep Disorders	Abuse and Neglect
Eating/Feeding Disorders	Pain Management
Elimination Disorders	Developmental Disabilities & Autism
Anxiety Disorders	Substance Use/Abuse
Parent Training	School Problem Behaviors



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Ready to Integrate?

Steps to Integration



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"There is no single, right way to integrate services and supports."

-National Alliance on Mental Illness (NAMI)



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Integrated Care: First Steps

- Assessment of organizational readiness for Integrated Care
- Identifying Champions
- Selecting a Business Model of Integrated Care
- Building and Training a Workforce
- Evaluating Integration Efforts



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Readiness Elements for Integrated Care

Leadership & Organizational Commitment

- Leaders that are willing to allocate resources to the developmental process, including the time needed for cultural shifts, changes to practice, and team process

Team Development

- Providers are given clear expectations regarding team-based care, roles, and responsibilities

Team Process

- The team continuously reexamines team functioning and dynamics as the team grows

Team Outcomes

- Integrated teams track and monitor patients' treatment through objective measures

Lardieri, M, Lasky, G, and Raney, L. Essential Elements of Effective Integrated Primary and Behavioral Health Teams. Washington, D.C. SAMHSA-HRSA Center for Integrated Health Solutions. March, 2014.



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Business Options in Integrated Care

- Employed by Clinic
- Independent Practice
- Contractual Practice
- Partnership



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Evaluation of Integration Programs

These will be program specific but include:

- Use of behavioral health screenings (PHQ-9, PSC, SUDS, etc)
- Cost and utilization data - Reduced E.D. usage and/or hospitalizations plus improved physician time and revenues
- Improved care coordination between Physical and BH providers
- Increased follow-up and completion rates
- Increased patient & provider satisfaction



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Regional Exemplar: UNMC Munroe-Meyer Institute Integrated Care Program

- MMI has been developing a network of integrated behavioral health clinics (BHCs) for over 20 years
 - First introduced in 1997 in Columbus, NE
 - Faculty and students would travel for 1 ½ hours from Omaha to Columbus to provide mental health services 2-3 days per week
- Current network of integrated clinics established or supported by MMI (n=43)



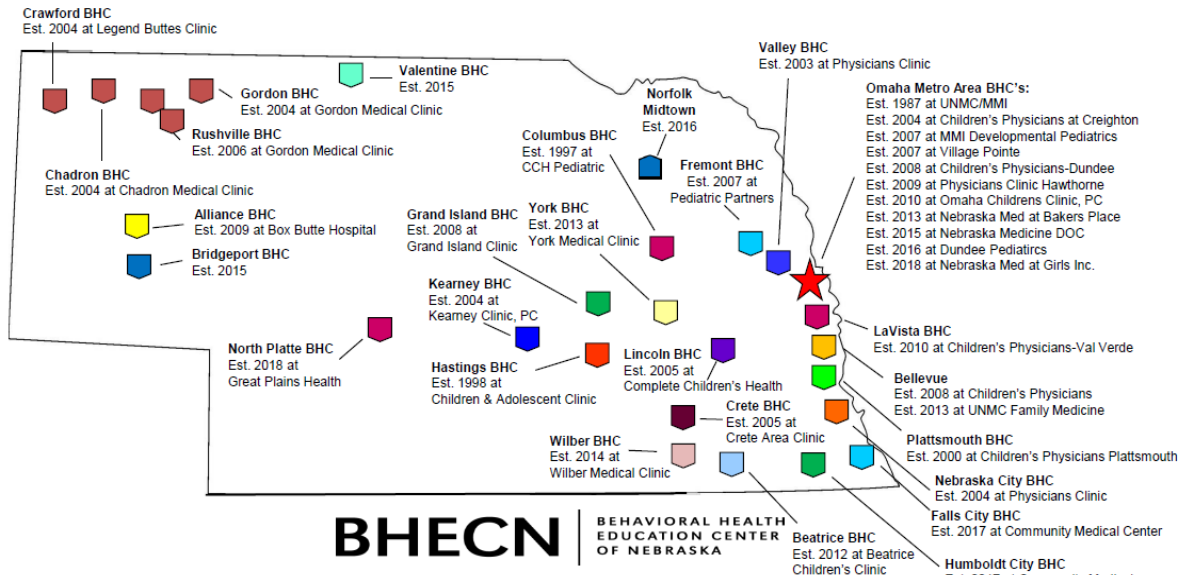
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Munroe-Meyer Institute Department of Psychology Behavioral Health Clinics



BHECN

BEHAVIORAL HEALTH
EDUCATION CENTER
OF NEBRASKA



UNIVERSITY OF NEBRASKA MEDICAL CENTER™
MUNROE-MEYER INSTITUTE

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Regional Exemplar: MMI Integrated Care PCBH Model Program

- Provision of BH care *within* a primary health care setting
- Aligns closely with Levels 4-5 Collaboration/Integration (CIHS)
 - Patients are seen in same or adjacent exam rooms as PCPs
 - Patients internally referred by PCPs
 - Shared systems such as scheduling and EHR
 - Clinic-specific pathways developed to manage referrals, screening practices, collaborative treatment planning
 - Variety of business models but often separate funding and billing and clinic support from grants
 - Frequent Informal collaborations with PCPs and “warm hand offs”
 - Established community referral sources for patients needing long-term treatment or placement



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MHTTC Integrated BH *Program Mission*

- Expand Integrated BH service provision capacity in PC practices, both regionally and nationally
- Train and Retain Behavioral Health Providers in PC Practices
- Replicate IBH training programs
- Implementation research on IBH effectiveness, costs, dissemination



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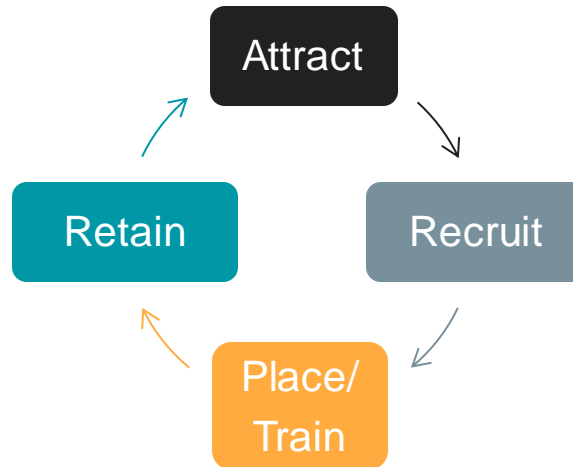
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Regional Exemplar: MMI Integrated Care Training Program

Behavioral health workforce development by training for a variety of BH students or currently licensed practitioners (masters-level practicum students, doctoral interns, post-doctoral fellows)



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Select References

- Heath B., Wise Romero, P and Reynolds, K.A. (March, 2013) Review and Proposed Standard Framework for Levels of Integrated Healthcare. Washington, D.C. SAMHSA-HRSA Center for Integrated Health Solutions.
- Hoge M.A., Morris J.A., Laraia M., Pomerantz A., & Farley, T. (2014). *Core Competencies for Integrated Behavioral Health and Primary Care*. Washington, DC: SAMHSA - HRSA Center for Integrated Health Solutions <https://www.integration.samhsa.gov/resource/standard-framework-for-levels-of-integrated-healthcare>
- Riley, A., Paternostro, J., Walker, B., & Wagner, D. (2019). The impact of behavioral health consultation on medical encounter duration in pediatric primary care: A retrospective match-controlled study. *Families, Systems, & Health*, 37, 162-166.
- Valleley, R.J., Leja, A., Clarke, B., Grennan, A., Burt, J., Menousek, K., Chadwell, M., Sjuts, T., Gathje, R., Kupzyk, K., & Hembree, K. (2019). Promoting earlier access to pediatric behavioral health services with collocated care. *Journal of Developmental and Behavioral Pediatrics*, 40, 240-248.
- A Guide to SAMHSA's Strategic Framework: <https://www.samhsa.gov/capt/practicing-effective-prevention/prevention-behavioral-health/adverse-childhood-experiences>
- National Institute of Health: <https://www.nimh.nih.gov/health/topics/integrated-care/index.shtml>
- Organizational Assessment Toolkit for Primary and Behavioral Health Care Integration. SAMHSA - HRSA Center for Integrated Health Solutions: https://www.thenationalcouncil.org/wp-content/uploads/2018/10/OATI_Overview_FINAL.pdf



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Coming Home to Primary Care

Pediatric Integrated Health Series

Last Friday of each month, 12-1pm Central Time

- August 28 – The Road to Primary Care: Several Paths to Coming Home
- September 25 - Ready to Hit the Pavement: How to Dive Into Primary Care
- Recordings will be made available

<https://mhttcnetwork.org/centers/mid-america-mhttc/coming-home-primary-care-pediatric-integrated-behavioral-health>



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