Introduction to Behavioral Health Integration

Guilford Prickette, Senior Learning and Development Clinical Advisor

65,000 voices
Objectives

- Define behavioral health integration
- Explore existing models of integration
- Describe behavioral health integration at SCF and where it is implemented in our system
- Explain brief intervention
- Explore the common clinical issues addressed, and the standard screening tools used
What are your expectations during this session?
What is Behavioral Health Integration?
<table>
<thead>
<tr>
<th>General Health</th>
<th>Mental Health Professional</th>
<th>Human Services Organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alternative Options</td>
<td>Internet</td>
<td>No Services</td>
</tr>
</tbody>
</table>
Mental Health Disorders

Top Diagnoses

- Major Depressive Disorder
- PTSD
- Alcohol Dependence
- Anxiety Disorders
- Personality Disorders
Collaborative Care

Shared goals and vision, but no financial or operational infrastructure
Integrated Care

Operational

Clinical

Structural

Financial
Why Integrate Behavioral Health?

- Relationships
- Greater Awareness
- Physical-Behavioral Connection
- Increased Access
Behavioral Health Integration

Key Elements

- Flexible communication
- Recruiting and training
- Orientation and training of primary care providers
- Medical and behavioral charting
- Proximity
- Maintaining strong connection between behavioral and medical health
- Level of consultation and referral
- Operational
# Levels of Integrated Care Care

<table>
<thead>
<tr>
<th>Level</th>
<th>Collaboration</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Minimal</td>
</tr>
<tr>
<td>2</td>
<td>At a distance</td>
</tr>
<tr>
<td>3</td>
<td>Basic – onsite</td>
</tr>
<tr>
<td>4</td>
<td>Close – onsite with some system integration</td>
</tr>
<tr>
<td>5</td>
<td>Close – approaching an integrated practice</td>
</tr>
<tr>
<td>6</td>
<td>Full – transformed/merged into integrated practice</td>
</tr>
</tbody>
</table>

*SAMSHA-HRSA Center for Integrated Care Solutions*
What is your organization’s current level of integrated care?
Models of Integration

- Diversification/Primary Care Behavioral Health
- Co-Location
- Referral
- Enhancement
- Chronic Care
- Reverse Integration
Behavioral Health Integration at Southcentral Foundation
Traditional Behavioral Health System

Scheduled Individual Therapy

Primary Treatment Pathways

Behavioral Urgent Response Team

Medication Management
History of Behavioral Health Integration at SCF

- **Goal**
  - Meet the behavioral health needs of customer-owners

- **Actions**
  - Mental health clinicians hired as Behavioral Health Consultants and integrated into primary care clinics 13 years ago
  - Started small with two Behavioral Health Consultants
  - With success, demand increased
  - Number of Behavioral Health Consultants increased to meet demand
Integrated Care

A Framework

Early Integration

- EHR
- Medical
- Behavioral

Present Integration

- EHR
- Medical
- Behavioral
## Integration Across SCF

<table>
<thead>
<tr>
<th>Clinic</th>
<th>Number of Behavioral Health Consultants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Care Clinics-Anchorage, AK</td>
<td>16</td>
</tr>
<tr>
<td>Primary Care Clinic-Mat-Su Valley - Wasilla</td>
<td>5</td>
</tr>
<tr>
<td>Primary Care Clinic-Pediatrics</td>
<td>5</td>
</tr>
<tr>
<td>Behavioral Health Clinics</td>
<td>4</td>
</tr>
<tr>
<td>Hospital</td>
<td>2</td>
</tr>
<tr>
<td>Rural Community Health Centers (CHC)</td>
<td>4</td>
</tr>
</tbody>
</table>
Behavioral Health Integration

- Social Work
- Acute Care
- Screening Psych-Ed Brief Intervention
- Motivational Interviewing
Scope of Integration

Primary Care Team

- Registered Nurse
- Registered Dietician
- Medical Assistant
- Provider
- Behavioral Health Consultant
- Case Manager
Clinical Levels of Integrated Care

**Level 1**
- Consultation
- Brief targeted interventions in primary care setting

**Level 2**
- Time-limited focused interventions in primary care

**Level 3**
- Referral for longer-term therapeutic interventions in collaboration with primary care
### Two Approaches to Clinical Work

<table>
<thead>
<tr>
<th>Not Targeted</th>
<th>Targeted</th>
</tr>
</thead>
<tbody>
<tr>
<td>▪ Customers present with a range of concerns</td>
<td>▪ Work with specific subpopulations</td>
</tr>
<tr>
<td>▪ Meet customers where they are at</td>
<td>▪ Targeted interventions for these populations</td>
</tr>
<tr>
<td>▪ Help to improve customer’s overall health</td>
<td>▪ Define treatment protocols and clinical guidelines</td>
</tr>
<tr>
<td>▪ Example: customer presents with chest pain, medical rule out, focus on</td>
<td>▪ Example: depression screening and follow-up</td>
</tr>
<tr>
<td>stress, grief, situational stress, etc.</td>
<td></td>
</tr>
</tbody>
</table>
Phases of a Brief Intervention

- Referral from provider
- Introductions & negotiate work
- Assessment
- Intervention

Follow-Up with Customer-Owner

Feedback goes to Integrated Care Team
Integrated Primary Care Setting Clinical Topics

- Depression
- Anxiety
- PTSD/Acute Stress
- Childhood Behavioral Concerns
- Parent Coaching
- Substance Abuse
- Grief
- Sleep Hygiene
- Traumatic Brain Injury
- Psychosocial Stressors
- Family and Relational Stress
- Specific Age or Gender Related Concerns
  - Women
  - Children
  - Elders
What are the most common issues in your organization?
<table>
<thead>
<tr>
<th>Category</th>
<th>Assessments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depression</td>
<td>PrimeMD</td>
</tr>
<tr>
<td>Substance Use</td>
<td>AUDIT, CRAFFT</td>
</tr>
<tr>
<td>Cognition</td>
<td>MMSE</td>
</tr>
<tr>
<td>Development</td>
<td>ASQ, SE, M/CHAT, SDQ, Vanderbilt</td>
</tr>
<tr>
<td>Chronic Pain</td>
<td>PPP, MBMD, SCL-90, P-3</td>
</tr>
</tbody>
</table>
Chronic Disease Management

- Motivation for lifestyle change
- Breaking down the goals into manageable steps
- Addressing co-occurring conditions such as anxiety, depression, or sleep disorders
- Providing support for providers
- Managing provider expectations regarding realities of behavior change
Advanced Behavioral Health Integration

Primary Care Clinics

- Pain consultant
- Structured behavioral health referral process
- Wellness care plans
- Primary care provider coaching
- Integrated psychiatry
Other Behavioral Health Consultant Frameworks at SCF

- Brief intervention in traditional behavioral health clinic
- Brief intervention in hospital clinics
- Brief Intervention and combination therapy/integrated substance abuse assessment in rural clinics
Questions?
Thank You!

Qağaasakung
Aleut

Quyanaa
Alutiiq

Quyanaq
Inupiaq

Awa'ahdah
Eyak

Mahsi'
Gwich'in Athabascan

Igamsiqanaghalek
Siberian Yupik

Háw'aa
Haida

Quyana
Yup'ik

T’oyaxsm
Tsimshian

Gunalchéesh
Tlingít

Tsin'aen
Ahtna Athabascan

Chin’an
Dena’ina Athabascan