

Successful Steps for Holistic Integration of Mental & Behavioral Health in Primary Care

Session 4: Using Quality Improvement Techniques to Support Integrated Care Implementation-November, 30, 2023

The image shows a YouTube video player interface. On the left is a circular logo with a red cross and the text 'AT THE CORE OF CARE' in white and red. Below the logo is a small 'ACTION COALITION' logo. The main video area has a dark background with a play button icon, the title 'At the Core of Care: Healing the Community: How Health C...', a description 'In this episode, we have a conversation with two community health professionals about the role...', and a duration of '00:00:00'. Below the description is a white waveform. At the bottom, there are buttons for 'SHARE', 'SUBSCRIBE', and 'DESCRIPTION', and a volume icon on the right.



The logo for the Health Center Resource Clearinghouse. It features a stylized geometric icon on the left composed of overlapping red and blue shapes. To the right of the icon, the text 'HEALTH CENTER RESOURCE CLEARINGHOUSE' is written in a bold, blue, sans-serif font.



Housekeeping

1 Captions

To adjust or remove captions, click the "Live Transcript" button at the bottom of your Zoom window and select "Hide Subtitle" or "Show Subtitle."

The icon consists of the letters "CC" in a bold, black, sans-serif font, centered within a light gray rounded rectangle.

Live Transcript

2 Questions

Please add your questions for the speaker and comments for the group into the Chat box.

The icon is a light gray speech bubble with a tail pointing downwards and to the left, representing a chat message.

Chat

3 Technical Issues

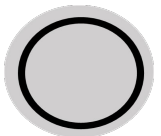
Please raise your hand to let us know or message us in the chat.



Raise Hand

4 Recording

This session will be recorded and available to view on Vimeo



Recording



NNCC/ANCC Disclosures

Accreditation Statement: The National Nurse-Led Care Consortium is accredited as a provider of nursing continuing professional development by the American Nurses Credentialing Center's Commission on Accreditation.

Success Completion Requirements: Nurses completing the entire activity and the evaluation tool may be awarded a maximum of **1.0 contact hours** of nursing continuing professional development (NCPD). **To obtain nursing continuing professional development contact hours, you must participate in the entire activity, participate in audience polling and/or Q&A sessions, and complete the evaluation.**

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We do this through

- training and technical assistance**
- public health programing**
- consultation**
- direct care**

<https://nurseledcare.phmc.org/>

NNCC NTTAP Team



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Program Intern

Introduction/Welcome

- 5 minutes

Didactic

- 30-40 minutes

Questions & Wrap-Up

- 10-15 Minutes



Today's Agenda

Meet our speaker:



Julie Schilz, MBA

**Senior Director, Integrated Care
Primary Care Development Corporation**



NNCC NTTAP Successful Steps for Holistic Integration of Mental & BH in Primary Care Learning Collaborative

Using Quality Improvement Techniques to Support Integrated Care Implementation

Julie Schilz, BSN MBA
Primary Care Development Corporation

Learning Outcomes



Understand change management and its impact on improvement strategies



Examine quality improvement techniques in healthcare



Apply the Plan-Do-Study-Act (PDSA) cycle for evidence-based changes for Integrated Care

Acronyms

Acronym	Meaning
AAHC	The Accreditation Association for Ambulatory Health Care
AHRQ	Agency for Healthcare Quality and Research
AMA	American Medical Association
CHQR	Community Health Quality Recognition
HRSA	Health Resources & Services Administration
IHI	Institute for Healthcare Improvement
MCO	Managed Care Organization
MFI	Model for Improvement
MSSP/SP	Medicare Shared Savings Program/Shared Savings Program
NCQA	National Committee for Quality Assurance
PDSA	Plan-Do-Study-Act Cycle
QI	Quality Improvement

Setting the Stage

Integrated Care

Level One Coordinated

- Primary Care and Behavioral Health work across healthcare settings to share information about a patient, facilitate access to care, and support care coordination.

Level Two Co-Located

- Behavioral health and primary care providers may share space in the same facility, but not necessarily the same practice space. Practice separately but collaborate for care delivery.

Level Three Fully Integrated

- Whole-person integrated care with Behavioral Health, Mental Health, and/or Substance Use Disorder providers and Primary Care integrated into one setting. Care is coordinated as one team using a systematic method and care delivery approach.

Quality Programs

Health Resources & Services Administration (HRSA) HRSA

- Community Health Quality Recognition (CHQR) Badges
- Accreditation and Patient-Centered Medical Home Recognition Initiative
 - The National Committee for Quality Assurance (NCQA)
 - The Joint Commission
 - The Accreditation Association for Ambulatory Health Care (AAAHC)

Medicare-Medicare Shared Savings Program (MSSP/SSP) Medicare SSP

- State/Local Programs
- Payers-Commercial, Medicaid, Medicaid MCO, Medicare Advantage

Reflecting on Equity

Equality

- Everyone gets the same treatment, regardless of whether it is needed or right for them

Equity

- Everyone gets the treatment that is right for them
- Allows people to attain the highest level of health, regardless of cultural, demographic, or socio-economic status



Source: [Robert Wood Johnson Foundation](#), 2022

“

**“The Only Constant in Life
Is Change.”
- Heraclitus**

Change Management and Quality Improvement

**Bring people
into the
process**

**People get
“humany”
with change**

**Use QI
projects to
learn more
about staff**

**Create a safe
environment
for everyone
to contribute**

**Find your
Champions!**

Quality Improvement (QI) Techniques

Entering a Jargon Zone



Quality Improvement Models



Cambridge Toolkit Image

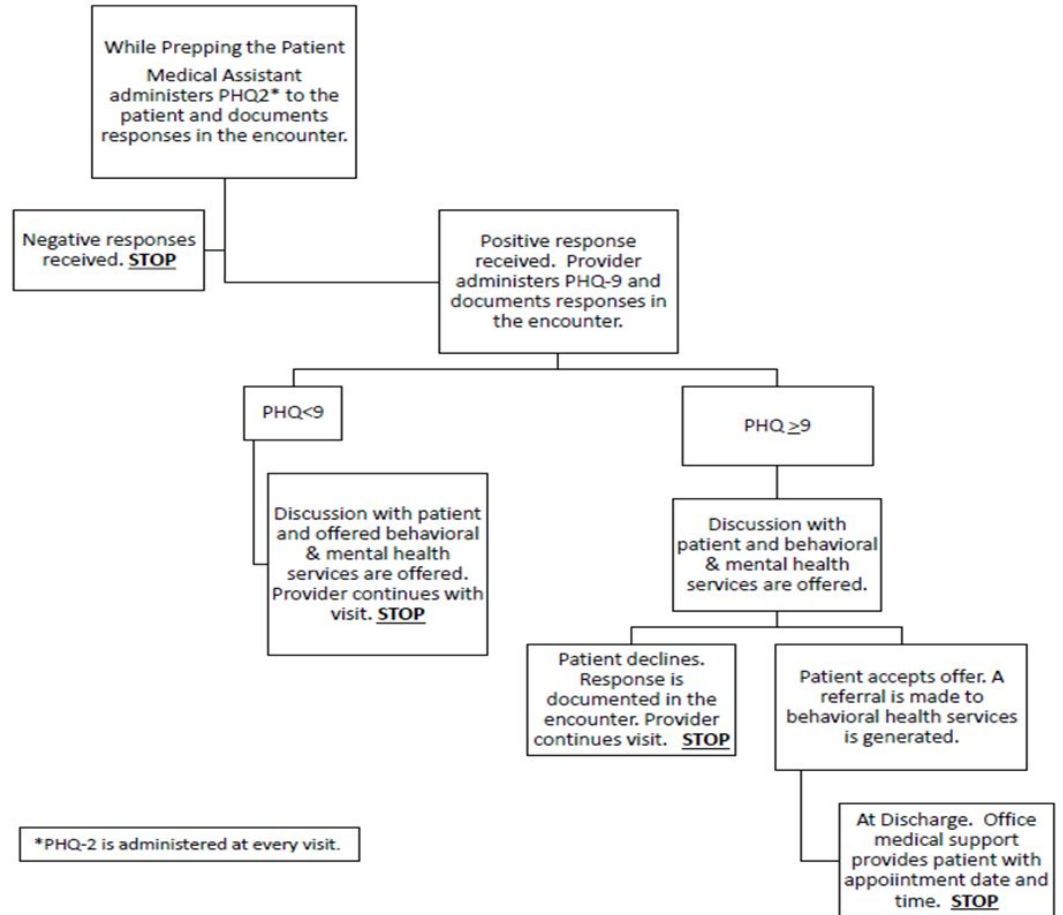
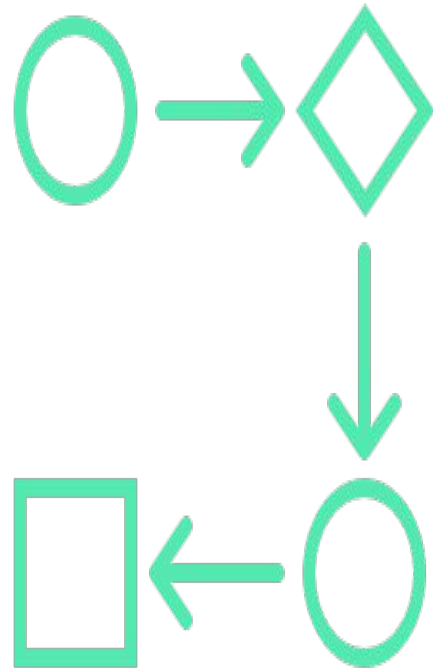


SQT Training Image

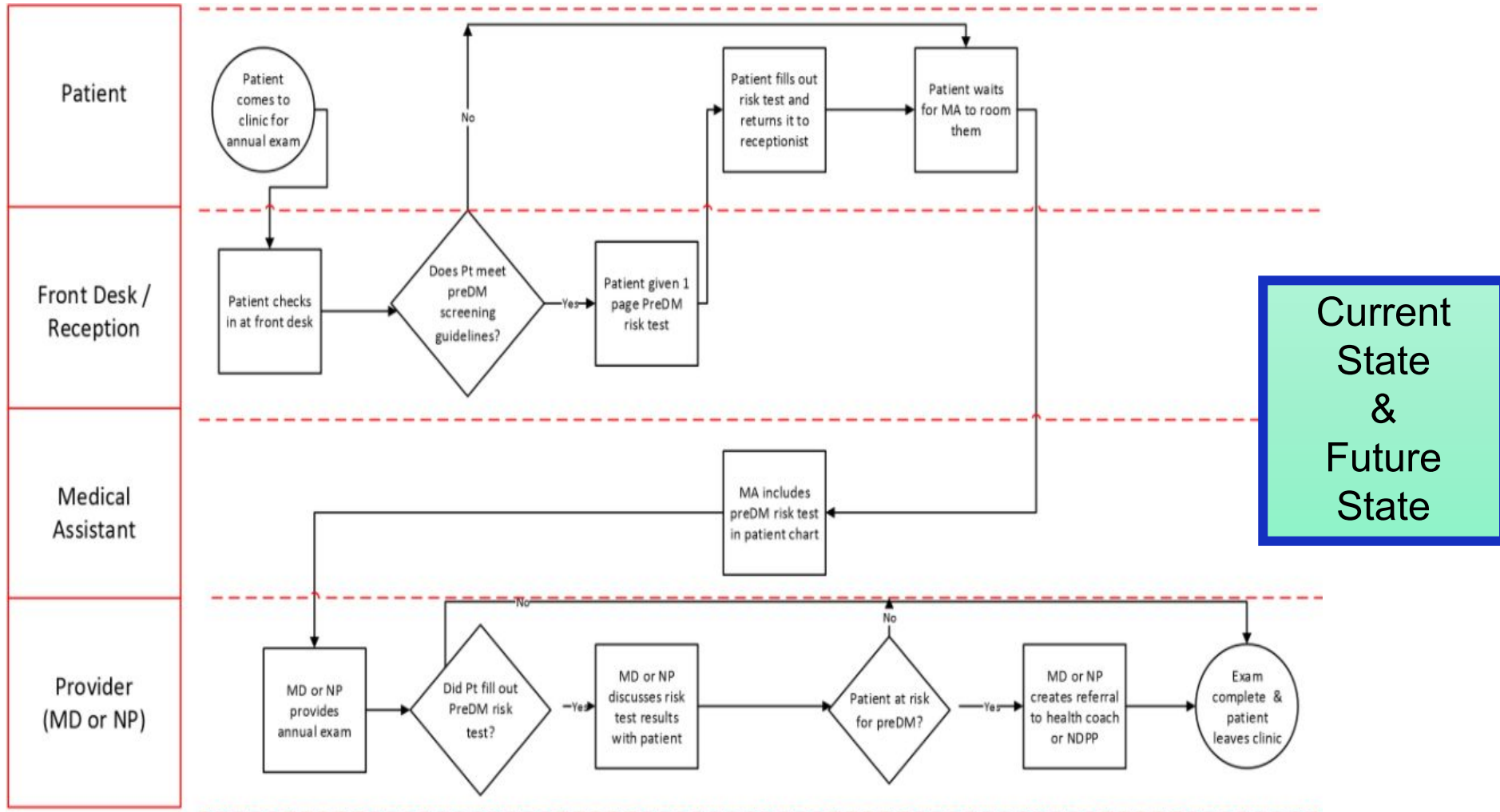
QI Tools-Process Map



Health Services Screening for Depression and Follow-Up Workflow (revised August 2019)



QI Tools-Swim Lane Process Map



Current State & Future State

Model for Improvement

Plan Do Study Act (PDSA)

Developed by Associates in Process Improvement, The Model for Improvement has two parts:

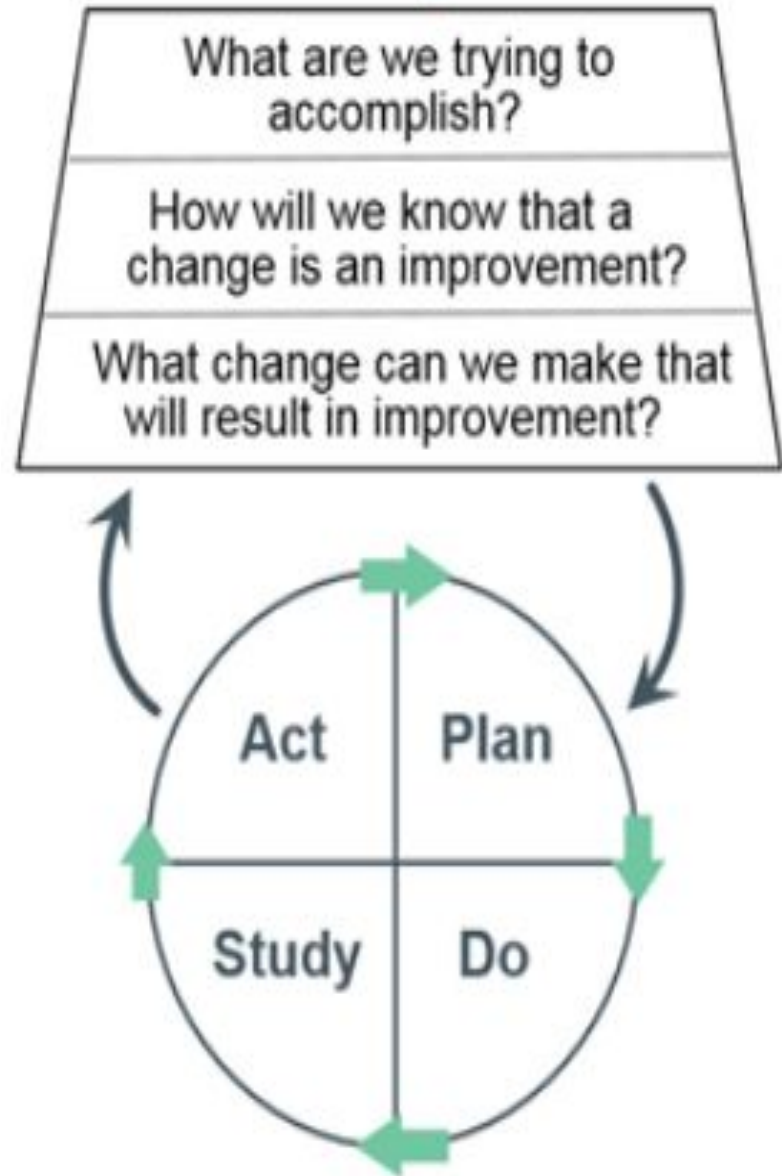
- Three questions to support developing your improvement idea
- The Plan-Do-Study-Act (PDSA) cycle

Langley GL, Moen R, Nolan KM, Nolan TW, Norman CL, Provost LP.

[The Improvement Guide: A Practical Approach to Enhancing Organizational Performance](#) (2nd edition).

San Francisco: Jossey-Bass Publishers; 2009

Model for Improvement



Model for Improvement: Fundamental Questions

**What are we
trying to
improve?**

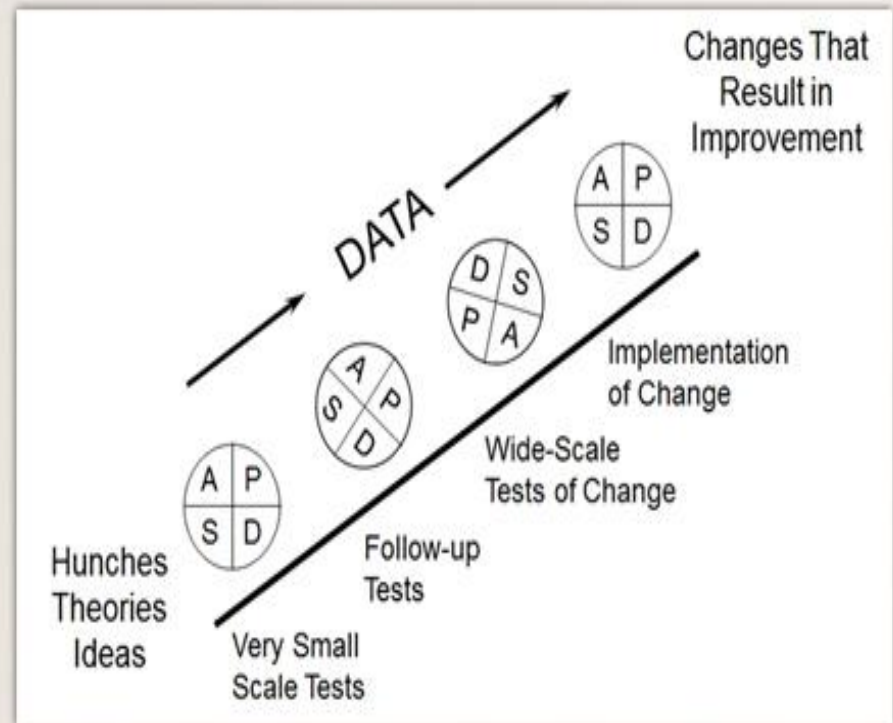
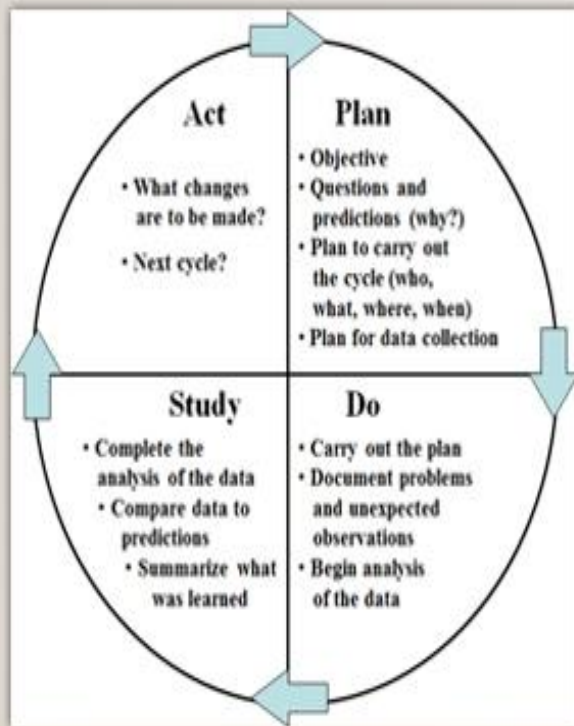
**How will we
know if we are
making an
improvement?**

**What changes
can we test to
make the
improvement?**

Model for Improvement: PDSA Cycles

PDSA Cycle

Questions drive testing, which is at the heart of science; informed action drives improved results



Associates in Process Improvement

The Value of PDSA Cycles

- The Plan-Do-Study-Act cycle to test changes in real work settings
- The PDSA cycle guides the test of a change to determine if the change is an improvement
- Tested method for action-oriented, real-time learning and change
- Test a change – plan it, try it, observe the results, and act on what is learned in the next test
- Key principle: test on a small scale initially, use rapid cycles, scale up in a short timeframe
- PDSAs can be conducted quickly to work out unanticipated “bugs”

A Deeper Dive

PLAN DO STUDY ACT (PDSA) FORM

Start Date: End Date: Cycle #:

Project Title: Project Lead:

State: Task-related; Task:

Internal Process

Objective of this Cycle:

Develop a Change Test a Change Implement a Change

Aim Statement (WHAT YOU ARE TRYING TO ACCOMPLISH):

- Specific- targeted population:
- Measurable- what to measure and clearly stated goal:
- Achievable- brief plan to accomplish it:
- Relevant- why is it important to do now:
- Time Specific- anticipated length of cycle:

PLAN



Test/Implementation Plan (THINK ABOUT WHAT CHANGES YOU CAN MAKE THAT WILL RESULT IN IMPROVEMENT):

What change will be tested or implemented? Include how change will be conducted, who will run it, where it will be run and when it will be run unless already noted in Aim Statement above. (If needed, include specifics on tasks, responsibilities and due dates.)

Prediction:

Data Collection Plan (THINK ABOUT HOW YOU WILL KNOW THE CHANGE IS AN IMPROVEMENT):

What data/measures will be collected?

Who will collect the data?

When will the collection of data take place?

How will the data (measures or observations) be collected and displayed?

What decisions will be made based on data?

DO



Activities/Observations:

Record activities/observations that were done in addition to those listed in plan (above):

STUDY



Questions: Copy and paste Prediction from Plan above and evaluate learning. Complete analysis of the data. Insert graphic analysis whenever possible.

Prediction:

Learning (Comparison of questions, predictions, and analysis of data):

Summary (Look at your data. Did the change lead to improvement? Why or why not?):

ACT



Describe next PDSA Cycle: Based on the learning in “Study,” what is your next test?

Clinic Example-Warm Handoff

PLAN DO STUDY ACT (PDSA) FORM

Cycle #: 1

Start Date: April 11 End Date: April 18

Project Title: Warm Hand-offs

Project Lead: Maria

State: Colorado

Task-related; Task: NA

Internal Process

Objective of this Cycle:

Develop a Change

Test a Change

Implement a Change

Aim Statement (WHAT YOU ARE TRYING TO ACCOMPLISH):

- Specific- targeted population: Warm Hand-off to LCSW for all patients who test positive on PHQ-2/PHQ-9 while
- Measurable- what to measure and clearly stated goal: Patients with positive screen have visit with LCSW
- Achievable- brief plan to accomplish it: MA sends LCSW an email when a patient has a positive screening
- Relevant- why is it important to do now: Create efficient workflows and support patients in timely follow-up
- Time Specific- anticipated length of cycle: One week

PLAN



Test/Implementation Plan (THINK ABOUT WHAT CHANGES YOU CAN MAKE THAT WILL RESULT IN IMPROVEMENT):

What change will be tested or implemented? Include how change will be conducted, who will run it, where it will be run and when it will be run unless already noted in Aim Statement above. (If needed, include specifics on tasks, responsibilities and due dates.)

Start with Dr. Garcia's team. Isabella-MA and Ray LCSW. Isabella will email Ray letting him know that a patient has had a positive screening. During visit Dr. Garcia will ask patient about having an initial visit with Ray. Ray will have a visit with the patient and set follow-up plan. Isabella will document every patient with a PHQ-2/9 screening and whether a visit with Ray was done.

Prediction:

Patients with positive screening will have a visit with Ray.

Data Collection Plan (THINK ABOUT HOW YOU WILL KNOW THE CHANGE IS AN IMPROVEMENT):

What data/measures will be collected?

Patient, PHQ 2/9 Screening, positive, email to Ray, Ray having a visit

Who will collect the data?

Isabella

When will the collection of data take place?

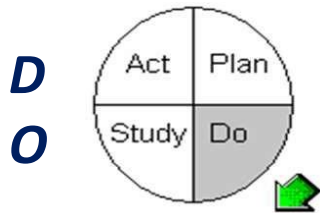
While patient is at the clinic for the visit

How will the data (measures or observations) be collected and displayed?

Excel spreadsheet

What decisions will be made based on data?

Whether the process worked.



Activities/Observations: Excel spreadsheet worked to document.

Record activities/observations that were done in addition to those listed in plan (above):

Isabella was out on Thursday so process wasn't tested. The process for screening worked well. Sometimes Ray was in another appt and was not available to see the patient. The patients stayed in the room longer so this pushed being able to room the next patient. Patients were willing to meet with Ray when Dr. Garcia had a conversation with them. One patient couldn't stay. Set up follow up.

STUDY



Questions: Copy and paste Prediction from Plan above and evaluate learning. Complete analysis of the data. Insert graphic analysis whenever possible.

Prediction:

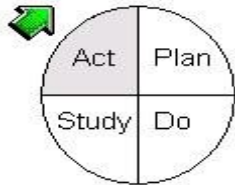
Learning (Comparison of questions, predictions, and analysis of data):

Staff availability impacted the test. Process generally worked well. Need to work on modifying rooming and inform front desk if a patient is going to see Ray.

Summary (Look at your data. Did the change lead to improvement? Why or why not?):

Learned what worked and didn't. Need to change the process.

ACT



Describe next PDSA Cycle: Based on the learning in “Study,” what is your next test?

Test the process when Ray doesn't have appts to see if it works well. Work on PDSA for when Ray has appts. Add Front Desk to the team.

The Value of PDSA Cycles

- The Plan-Do-Study-Act cycle to test changes in real work settings
- The PDSA cycle guides the test of a change to determine if the change is an improvement
- Tested method for action-oriented, real-time learning and change
- Test a change – plan it, try it, observe the results, and act on what is learned in the next test
- Key principle: test on a small scale initially, use rapid cycles, scale up in a short timeframe
- PDSAs can be conducted quickly to work out unanticipated “bugs”

Q&A

Resources

- [Agency for Healthcare Quality and Research \(AHRQ\) Fillable PDSA Tool](#)
- [Advancing Integrated Mental Health Solutions \(AIMS Center\)](#)
- [AMA \(7 Keys to an Efficient Integrated Behavioral Healthcare Workflow\)](#)
- [Bureau of Primary Health Care BH Technical Assistance](#)
- [Improving Depression Screening in Primary Care: A Quality Improvement Initiative](#)
- [Institute for Healthcare Improvement \(IHI\) Quality Improvement Toolkit \(PDSA Worksheet\)](#)
- [National Council Center of Excellence Resources](#)
- [Rural Health Information Hub Integrated Care](#)

Thank You!



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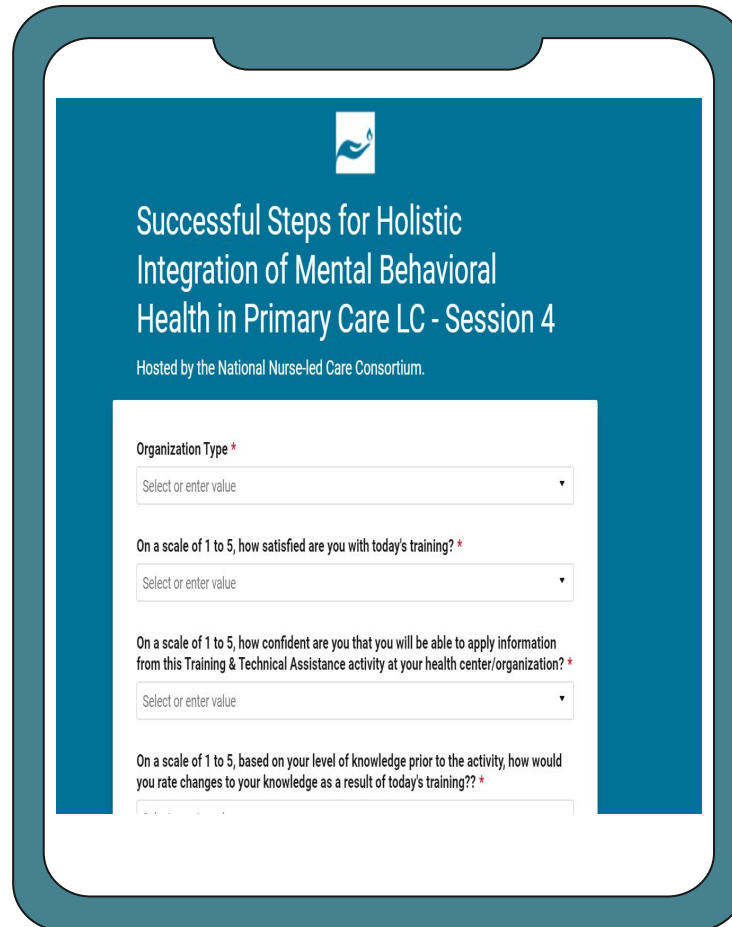



DISCUSSION

QUESTIONS

COMMENTS

Evaluation Survey





Successful Steps for Holistic Integration of Mental Behavioral Health in Primary Care LC - Session 4

Hosted by the National Nurse-led Care Consortium.

Organization Type *

Select or enter value

On a scale of 1 to 5, how satisfied are you with today's training? *

Select or enter value

On a scale of 1 to 5, how confident are you that you will be able to apply information from this Training & Technical Assistance activity at your health center/organization? *

Select or enter value

On a scale of 1 to 5, based on your level of knowledge prior to the activity, how would you rate changes to your knowledge as a result of today's training?? *

Select or enter value



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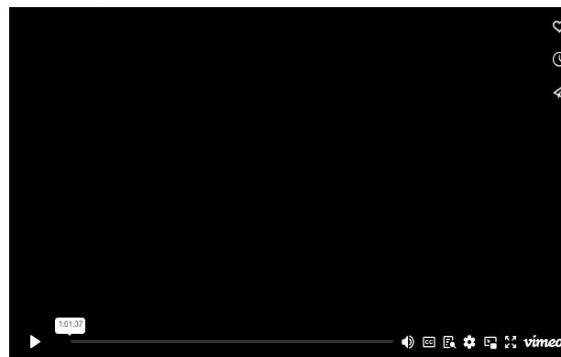
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Successful Steps for Holistic Integration of Mental and Behavioral Health in Primary Care Learning Collaborative: Part Two

Nov 09, 2023 03:00 PM EST | [Past Webinars](#) |



Session two focused on enhancing understanding of integrated care models and aspects of gaining leadership support for successful implementation. Leadership endorsement is critical for the successful implementation of integrated care methods. Participants engaged in discussions centered around strategies to gain leadership buy-in. Case analyses and group exercises empowered attendees to identify key motivators for leaders and tailor their approach to effectively communicate the benefits of integrated care, thereby securing the necessary support.

Learning Outcomes: As a result of this training, participants will be able to

1. Analyze integrated care models and leadership support strategies
2. Evaluate key motivators and tailor communication strategies for leadership buy-in
3. Synthesize and develop a comprehensive leadership support plan

Slide Deck:

[Successful Steps for Holistic Integration of Mental and Behavioral Health in Primary](#)

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Upcoming Trainings

Future Trainings

→ **Stratifying Quality Measures by Housing Status/Location-Dec 7th @ 2 PM EST**

NNCC and the Primary Care Development Corporation are partnering to conduct a webinar that will guide health centers serving public housing residents and other special groups on how to use UDS data for QI, care coordination, and care model design. Discover how to stratify UDS data by location and understand SDOH factors that impact health outcomes. We will also cover how to use PREPARE data to drive quality improvement and provide examples of successful interventions for sub-populations. Join us to explore challenges and enablers related to leveraging SDOH to inform quality improvement.

Registration: https://us02web.zoom.us/webinar/register/WN_Sa-mTgAMTYKvwm2ERUq7v2



Thank You!

If you have any further questions or concerns please reach out to Fatima Smith fasmith@phmc.org or Matt Beierschmitt at mbeierschmitt@phmc.org

