CARE TRANSFORMATION COLLABORATIVE RHODE ISLAND

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ADVANCING INTEGRATED HEALTHCARE

IBH Learning Collaborative– with a Focus on NCQA BH Distinction and Virtual IBH

LEARNING COLLABORATIVE MEETING: SEPT 9TH, 2021

7:30-9:00AM

Housekeeping

Please…

- Mute yourself when not speaking
- If possible, turn your video on, especially when speaking
- Feel free to put questions in the chat

Note: This meeting will be recorded and posted on the CTC-RI IBH webpage: https://www.ctc-ri.org/integrated-behavioral-health/tele-ibh-and-ncqa-bh-learning-collaborative

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Agenda

7:30 am	Welcome	Dr Nelly Burdette
7:35 am	Introductions	Dr Kristin David
7:45 am	Practice sharing and discussion	Facilitated by Drs. Kristin David and Liz Cantor
8:55 am	Next Steps, Wrap Up	Dr Liz Cantor

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Meeting will be recorded; Please keep your microphone on mute

CTC-RI Team

Nelly Burdette, PsyD
Senior Program Director

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Liz Cantor, PhD
Practice Facilitator

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Susanne Campbell, RN, MS, PCMH CCE
Senior Program Director

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IBH Learning Collaborative Practices

Practice	Cohort	Practice Facilitator
Associates In Primary Care Medicine	Cohort 1	Liz Cantor
Brown Medicine - Internal Medicine	Cohort 1	Kristin David
Anchor Medical - Lincoln Adult Medicine	Cohort 2	Kristin David
Anchor Medical - Providence	Cohort 1	Kristin David
Anchor Medical - Warwick	Cohort 2	Kristin David
Anchor Pediatrics	Cohort 2	Liz Cantor
CNEMG Family Care Center	Cohort 2	Kristin David
Providence Community Health Centers - Capitol	Cohort 2	Kristin David
Providence Community Health Centers - Central	Cohort 2	Kristin David
Providence Community Health Centers - Olneyville	Cohort 2	Kristin David
Providence Community Health Centers - Prairie	Cohort 2	Kristin David

Practice Sharing & Discussion

Focus On:

What challenges have you had with each topic?

What successes or ideas can you share with other practices?

We'll have 70 minutes to discuss six topic groups that cover the work being done in the collaborative:

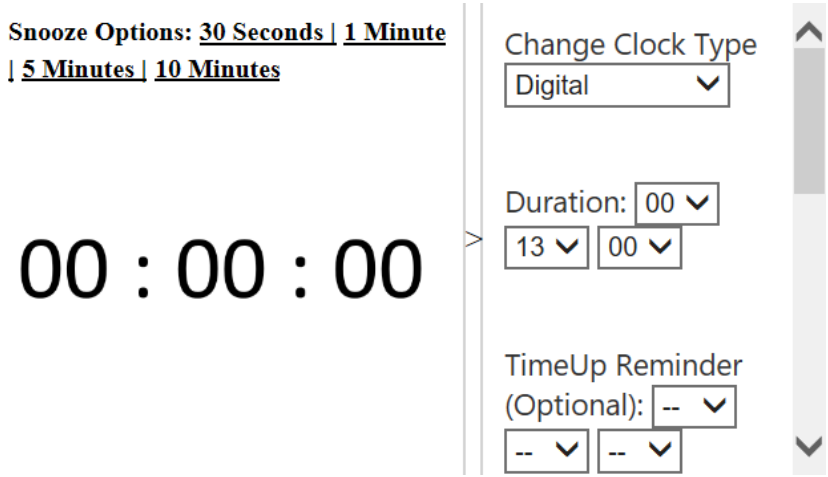
1. Telehealth Patient Engagement
2. Telehealth Groups
3. Virtual Delivery of IBH Tools
4. Screening and Workflow
5. Specialty BH Tracking
6. Clinical Decision Support

We will be displaying 'Aims' from the PDSAs that relate to each topic. Each practice will take a minute or two to explain their Aim and challenges, and then we'll have time for discussion on each topic.

Telehealth Patient Engagement

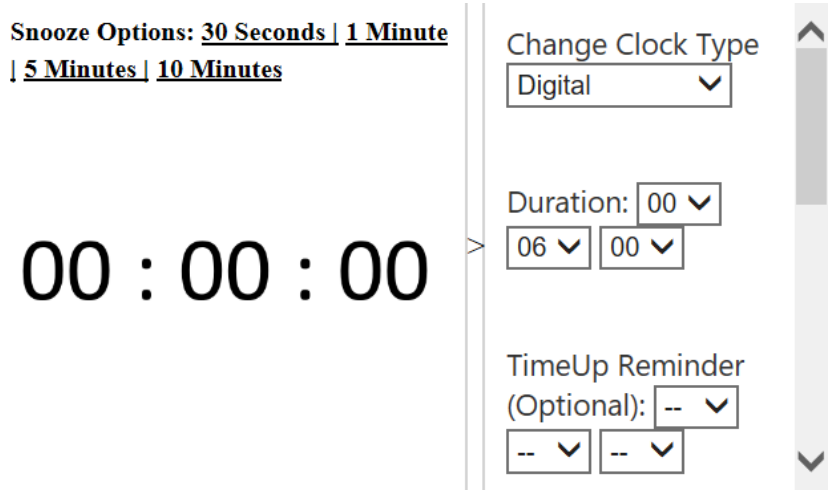
PCHC Olneyville: By January 2021, the Olneyville IBH team will increase patient confidence/competence in TH use, across patients who report hesitancy around TH technology to increase access to care.

PCHC Capitol Hill: To obtain patients' feedback on experience and access of IBH-TH sessions.



Telehealth Groups

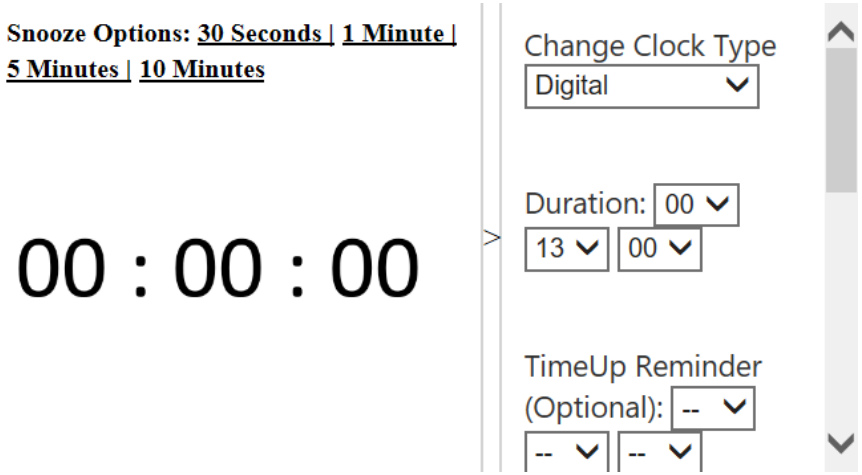
Brown Medicine Internal Medicine: pilot a stress management virtual group to increase the availability of Integrated Behavioral Health. The purpose of this pilot group will be to ensure feasibility and sustainability for future groups.



Virtual Delivery of IBH Tools

PCHC Central: By January of 2022, 10 patients will participate in a structured activity each time the IBH provider or advocate needs to leave the virtual exam room for a warm handoff.

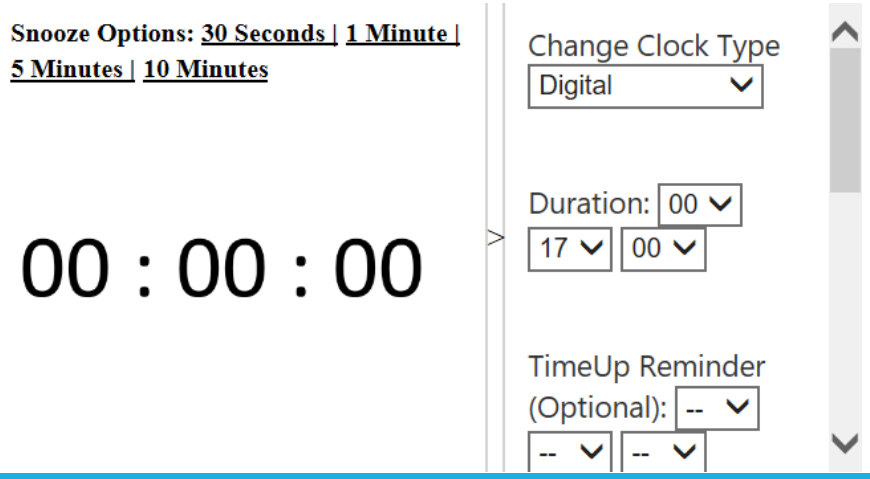
PCHC Prairie: Implement the use of Bluestream chat feature, whiteboard, and email address to share handouts. Use these methods with at least eight telehealth patients and measure their satisfaction with the use of visuals in the context of their telehealth experience.



Screening and Workflow

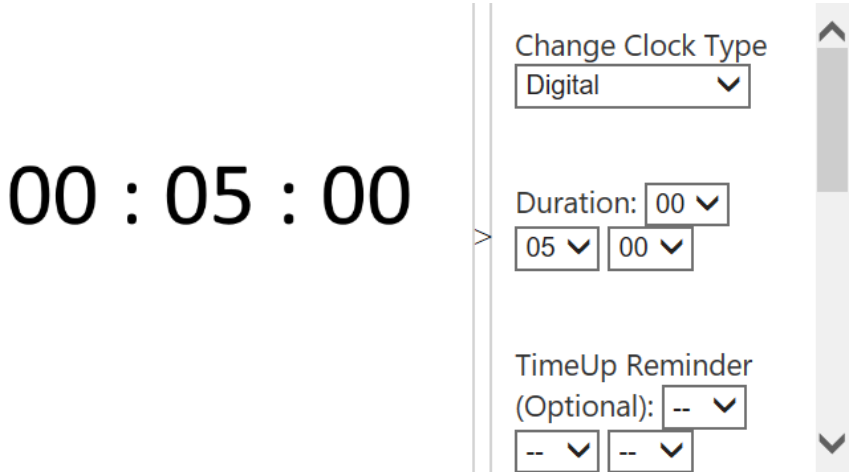
Anchor Lincoln Adult and Anchor Warwick: Develop a process for managing clinically significant depression screens and their follow up screening to assist patients who have not improved in accessing appropriate treatment.

Anchor Providence: Improve the identification of patients dealing with anxiety using the GAD-2/GAD-7. Deliver subsequent intervention in the form of a WHO, IBH referral, or same day sick visits to 10 patients by the end of January 2022.



Specialty BH Tracking

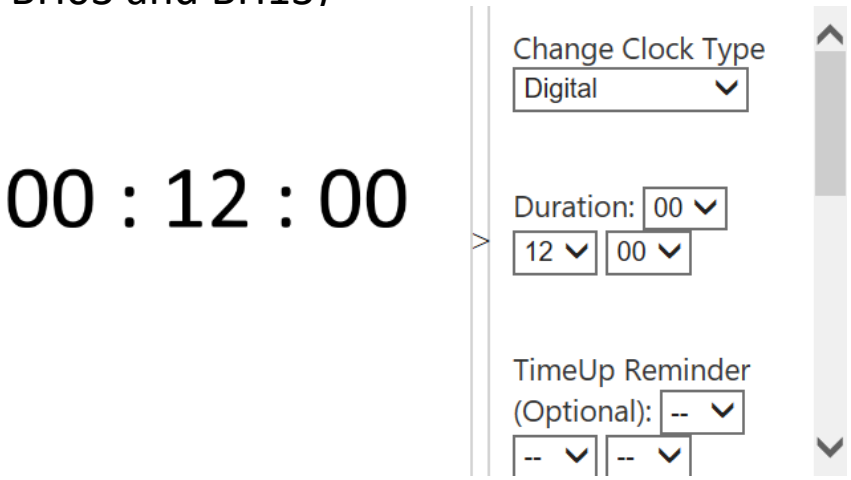
CNEMG, Family Care Center, Pawtucket: Improve the tracking of outpatient mental health referrals to increase collaborative communication with outside specialty mental health providers and assist patients in receiving outpatient care.



Clinical Decision Support

Anchor Lincoln Pediatric: To establish evidence-based Clinical Decision Support guidelines for patients who admit to smoking marijuana (supporting NCQA BH Distinction criteria BH14).

Associates in Primary Care Medicine: Establish a standardized workflow, including Clinical Decision Support, for patients with a potential for suicide (supporting NCQA BH Distinction criteria BH03 and BH13)



Upcoming Deliverables

Deliverable	Cohort 1 due date	Cohort 2 due date
Tele-IBH Post Assessment	Mar 1, 2022	May 1, 2022
NCQA BH Distinction Self-Assessment– final	Mar 1, 2022	May 1, 2022
Updated PDSA	Mar 1, 2022	May 1, 2022
NCQA BH Distinction Application/Renewal (or action plan)	Mar 1, 2022	May 1, 2022

REMINDER:

OHIC IBH Reporting Survey due **Oct. 15**

All IBH practices must complete this survey in order to continue being recognized as an IBH practice by OHIC.

The survey and guidelines for completion can be found on OHIC's website: http://www.ohic.ri.gov/documents/2021/August/16/2021%20OHIC%20PCMH%20Quality%20Measures%20and%20Integrated%20Behavioral%20Health%20Reporting.pdf

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Questions & Answers

Additional Questions: CTCIBH@CTC-RI.ORG

Webpage: www.ctc-ri.org/integrated-behavioral-health/tele-ibh-and-ncqa-bh-learning-collaborative