Implementation –Next Steps

Next Step Actions to Consider

Establish the work as a priority not just a project	→ 1 →	A foundation for care delivery	→ 2 →	Workflow development

— 3 ↓

Communication	→ 4 →	Suicide protocol	→ 5 →	Plan for future clinical skill development

— 6 ↓

Develop templates (assessments and systematic case review / documentation)	— 7 →	Future training and implementation support
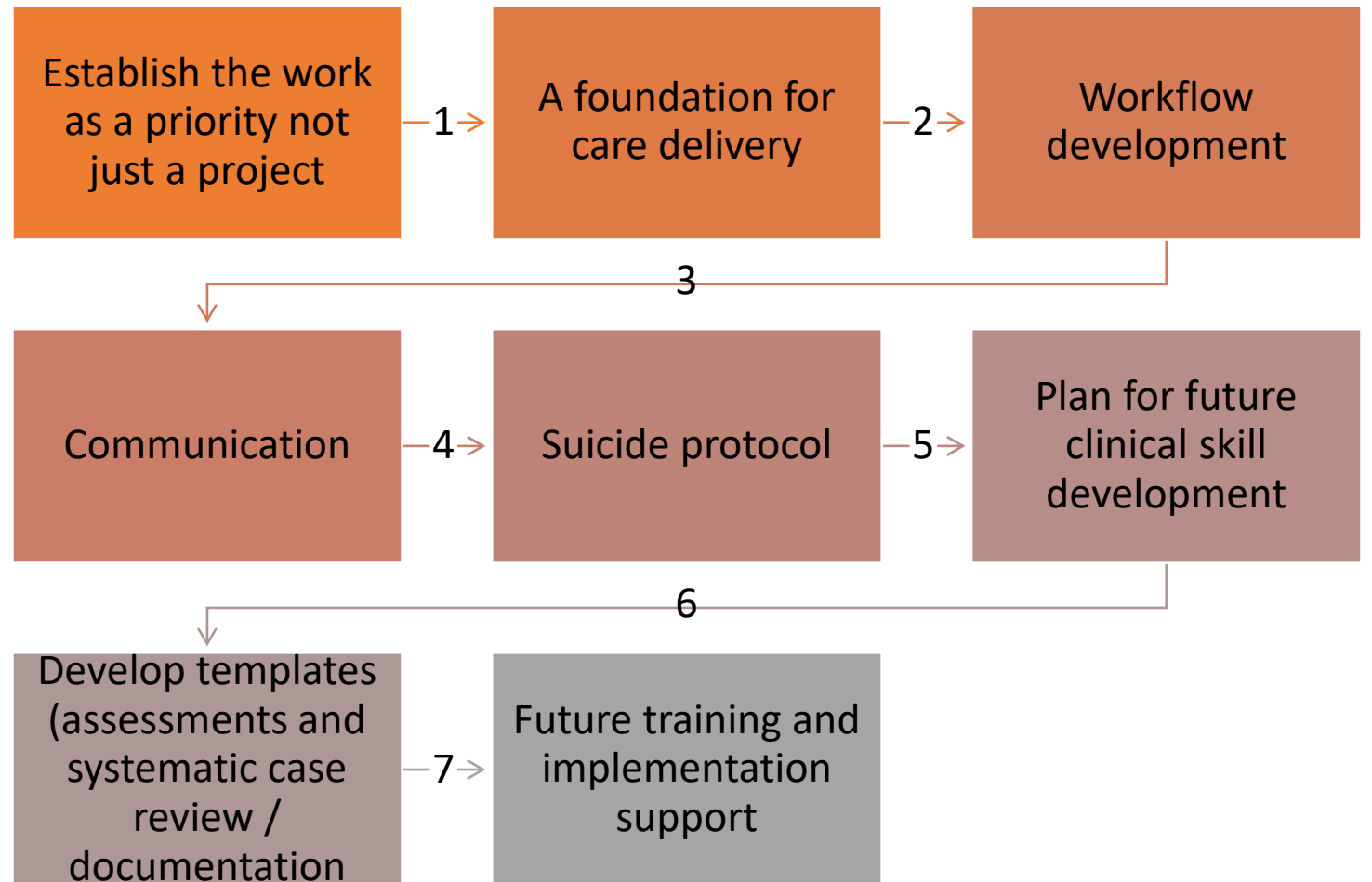
Lessons Learned

Tap into experienced staff

Establish community partnerships

Take a collaborative approach

Supportive leaders

Composition of the case review team

Effective communication strategies

Work Flow Development

- Know how your team will function the moment a patient walks through the door, including protocols for suicidal patients and patients in crisis

- Planning and creating a clinical flow that shows the exact process of what happens when a patient comes to the clinic ensures that no patient falls through the cracks

- Mapping a patient's care experience -- from identifying a behavioral health care need to initiating treatment to communicating treatment adjustments -- gives a framework for knowing the next step of care

- Clinical Workflow Plan - AIMS Center

- https://aims.uw.edu/collaborative-care/implementation-guide/plan-clinical-practice-change/create-clinical-workflow

Communication

- Introducing/talking about the CoCM program with other providers and practice staff
- All practice staff having the ability to talk with patients about the program
- All practice staff aware of the target population
- Ensuring all staff are aware of how referrals are generated and the general workflow of the model
- Building the relationship between the PCP and the psychiatric consultant and BHCM

Suicide Protocol

Polling Activity

Template Development

BHCM comprehensive assessment resources
- [MCISST - clinical intake checklist](#)
- [MICCSI Assessment Tool](#)

Systematic case review presentation resources
- [MCCIST example](#)
- [SBAR Template](#)

Sample Template

@SUBJECTIVEBEGIN@

REASON FOR VISIT

Integrated Behavioral Health (IBH) Care Coordination **Enrollment**

HISTORY OF PRESENT ILLNESS

@PREFERREDNAME@ is a @age@ @sex@, with a history of *** who is referred to IBH Care Coordination for ***.

Primary symptoms of concern: ***

Current stressors: ***

The following patient reported outcomes were completed:

{IBH Reported Outcomes:71872}

Current psychiatric pharmacological interventions: ***
Current nonpharmacological interventions: ***
Current psychotherapist: ***
Current psychiatric prescribing provider: ***

Suicidal Ideations: ***
Non-suicidal self-injury: ***
Homicidal ideations: ***
Access to firearms: ***

Sleep: ***
Pain interference: ***

PAST MEDICAL HISTORY

Medical History: ***

@LASTTSH@

Mental Health History: ***

Past medication trials: ***
Mental Health Hospitalizations: ***
Mental Health ED Visits: ***

CoCM Documentation

MCISST BHCM documentation example

Ongoing

- MCCIST and MICCSI will work with each practice about individualized training plans and will remain available for consultation

- Ongoing webinars on various topics related to CoCM will be available and a part of training plans

- The BHCMs will have "homework" after Day 2 to help them begin to identify eligible patients

Activity

Breakout PO's into breakout rooms for discussion

Review the checklist and look for your areas of opportunity

Where are you most nervous about implementation

What additional training and supports are needed to get started

Large group sharing   Checklist

Top challenge

Area of most concern

Area of most confidence

Reminder - BHCM Training

Topic	Objectives
Introductions	
The Role of the BHCM and the COCM Process	• Explain the key responsibilities of the BHCM as part of the CoCM treatment team • Review the CoCM steps including introduction, screening, assessment, risk assessment, care planning, intervention, monitoring/follow-up and case closure
Tracking Patients	• Examine the BHCM role in the use of a disease registry, systematic case review tool and case presentation to the psychiatric provider as it relates to treat-to-target
Problem Solving and Behavioral Activation	• Review CoCM evidence based therapeutic interventions including BA, PST and risk assessment and safety planning in the primary care environment
Motivational Interviewing	• Discuss the SPIRIT of motivational interviewing as it applies to patient engagement • Review the skills and principles of motivational interviewing
Psychotropic Medications and Diagnosis	• Discuss general approach to evaluating patients for anti-depressant and anti-anxiety medications • Review the common anti-depressant and anti-anxiety medications and their relative advantages and disadvantages and common patient concerns
Maintenance	• Review the patient monitoring process, relapse preventions and transition to routine care
Moving Forward	• Describe the process for next steps once initial training is completed and the practice is ready for implementation.

- DAY 2
- Tomorrow
- 8-4:15pm

QUESTIONS?

Thank you for attending today's training!

Contact us: www.miccsi.org

Presentations & Handouts: https://www.miccsi.org/collaborative-care-model-training/

Reminder: Please fill out the evaluation form to receive certificate and CME/CE