

# Integrated Model of Care: Expanding Beyond the Behavioral Health Consultant

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In partnership with the Family & Practice & Counseling Network

## Original Study vs 11<sup>th</sup> St Results

Number of Adverse Childhood Experiences (ACE Score)	Total	
	11th Street Patients	Original Study
0	6.3%	36.1%
1	12.0%	26.0%
2	17.8%	15.9%
3	14.9%	9.5%
4 or more	49.0%	12.5%



## Core Beliefs

- Whole person, mind/body approach
- Behavioral health is a primary component of care
- Normalize integrated services
- Trauma-informed practices serve as the basis for care delivery and organizational functioning



## Sanctuary Model

- Theory based
- Trauma informed
- Evidence supported
- Whole culture approach
- Clear and structured methodology for creating or changing organizational culture



## Sanctuary Model

- Trauma informed model of care that shapes practice and policy
- Engages staff in prolonged discussions that surfaces major strengths, vulnerabilities, and conflicts within organization
- Living the principles
  - Safety Plans
  - Community Meeting
  - Universal Precautions



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## Redesign of Primary Care

- System Redesign, not simply “adding” a service
- Design new workflows that promote a shift in thinking and practice
- Develop a mutual understanding of roles
- Negotiate a shared language
- Create a new culture, transforming patient experience and expectations

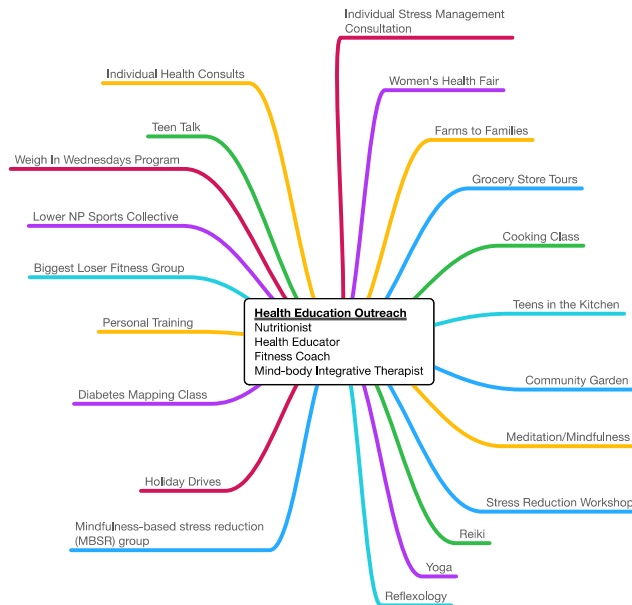


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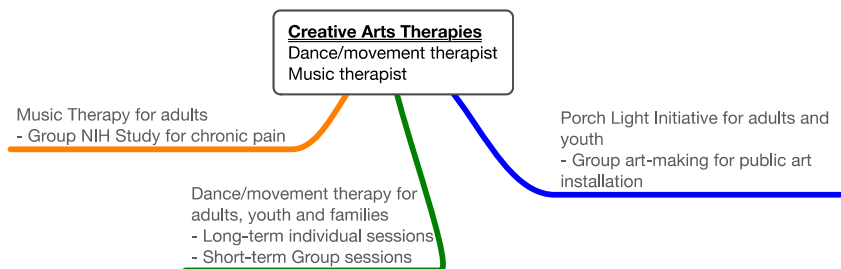
## Keys to Successful Integration

- Well defined team roles
- Open and frequent communication
- Joint treatment planning/shared care planning
- Highly collaborative and participatory

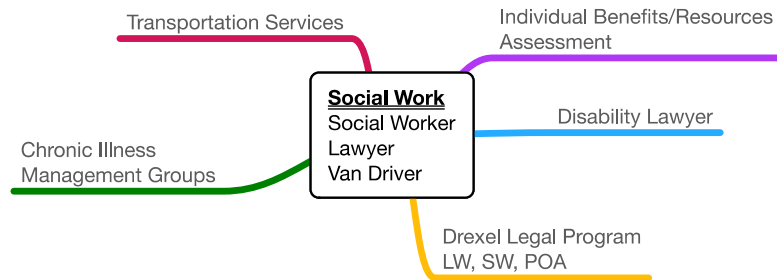
# Health Education and Outreach



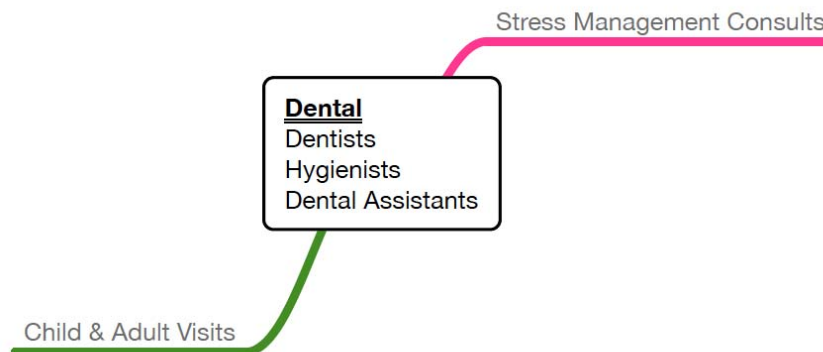
# Creative Arts Therapies



# Social Work



# Dental



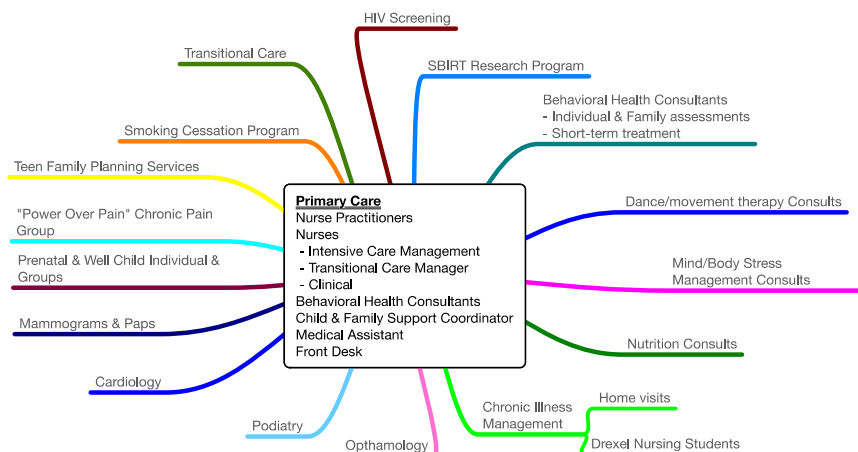
# Traditional OP Behavioral Health

## Behavioral Health Outpatient

Psychologists  
Psychiatrists  
Social Workers

Individual & Family long-term  
psychotherapy

# Integrated Primary Care



## Integration in Action



## Integrated Group Care

- Growing Together: Prenatal and Well Baby Care
- Relationship based care model that includes time for support, assessment and education
- Life Course perspective - focuses on key periods in the individual and families lives
- 2 or 3 core facilitators
- Incorporates additional team members based on the discussion topic



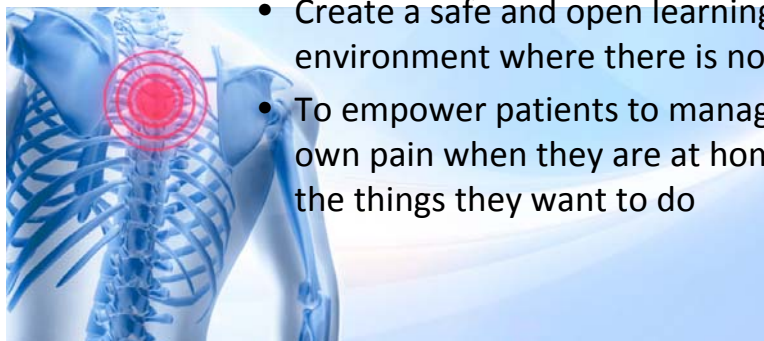
## Group Care in Action



## Power Over Pain



- Learn how to live with chronic pain
- Managing the different aspects of pain experience
- Create a safe and open learning environment where there is no judgment
- To empower patients to manage their own pain when they are at home doing the things they want to do



### Patient's Reflections



## Self Care for Staff

- Staff models healthy behaviors
- Staff Satisfaction Team
- Use of self, personal narratives
- Leadership values and supports staff wellness
  - Nutrition, Fitness, Complimentary Therapies



## Implication for Education

- CNHP proves access to a variety of disciplines and experts in their field
- Interdisciplinary and experiential training opportunities
- Care is focused on understanding the patient and the reality of their lives, not just the illness
- Provides primary care experience



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## Implications for Policy

- Team approach shows better outcomes, but is not yet reimbursable
- Dance Movement Therapy not yet reimbursable in PA, but Art & Music are
- LCSW cannot use Health & Behavior Codes in PA
- Carve out model for reimbursement of behavioral health services



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## Future

- Changing the landscape and language of health care
- Patient engagement rooms
- Complimentary Integrated therapists
- Health Campus