Tuesday, June 11; 11:00 AM PT

BHI Workflows - Barrier Busting

CalHIVE BHI Commons

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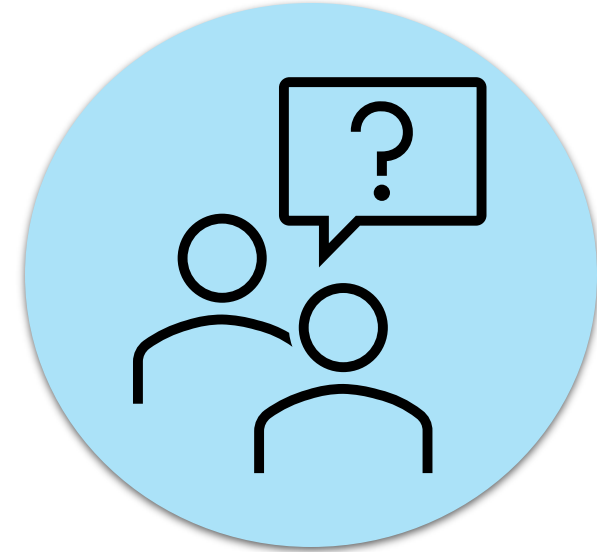
Tech Tips

Welcome!

Add your organization to your name
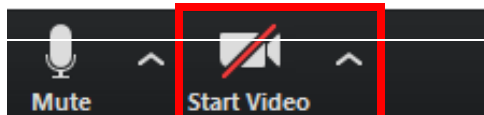
Turn on video if possible

Engaging Today

- Share questions in the chat or come off mute

- Participate in breakout rooms

Need help?

Direct message Anna Baer if you have any technical issues
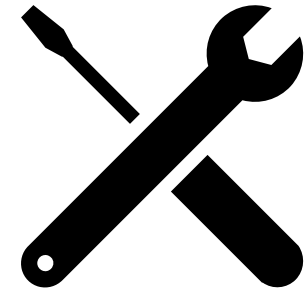
Our Agenda

Today, we'll:

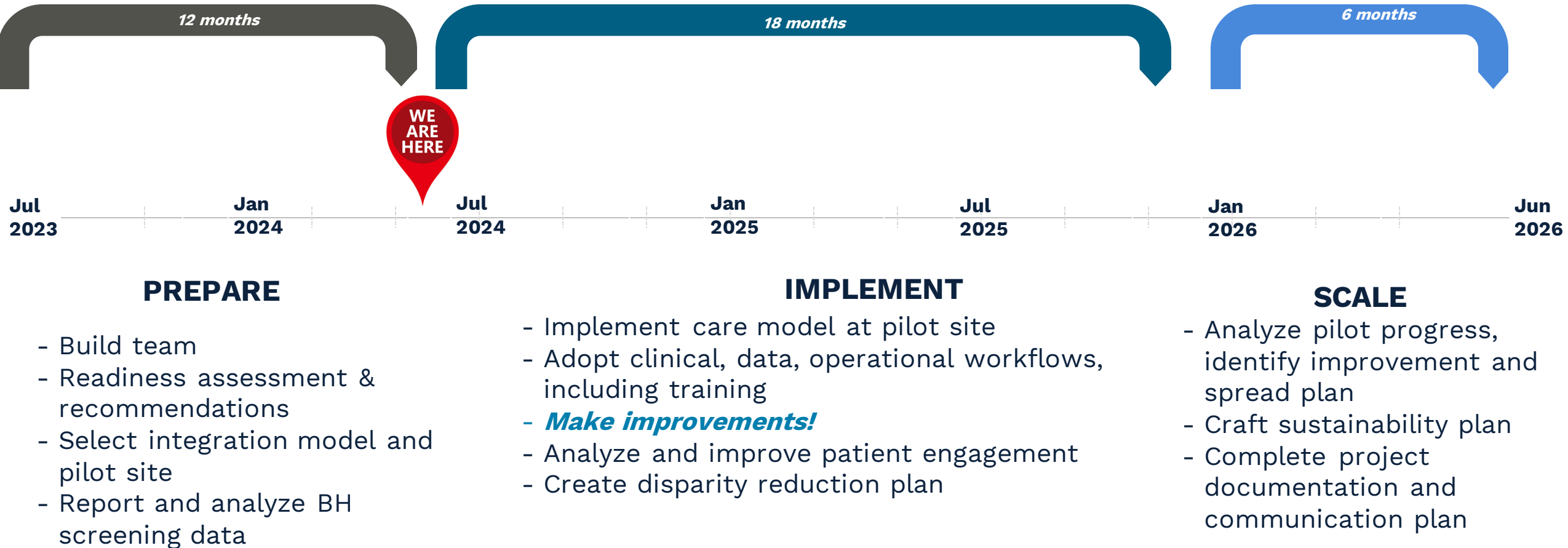**Articulate your "why" for BHI and practice your elevator pitch**

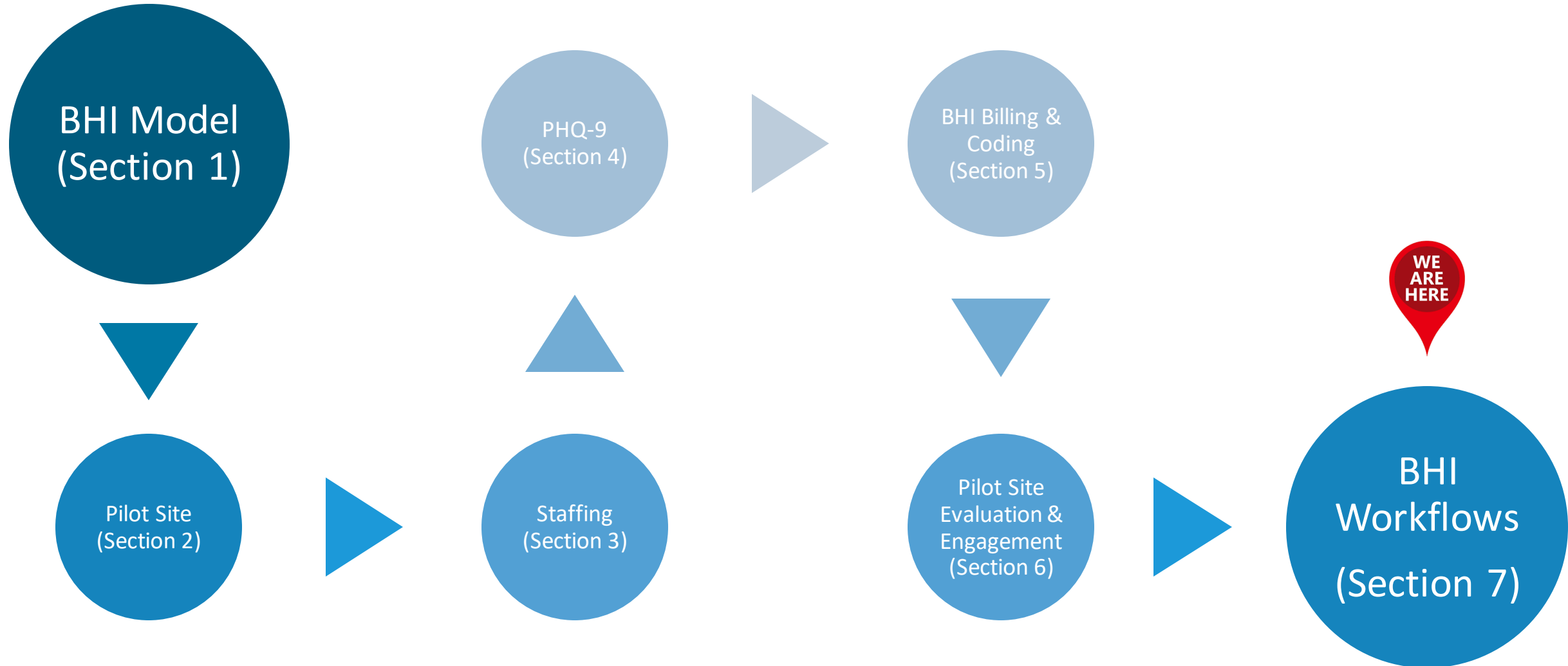**Clarify staffing needs and define roles within the workflow**

Nuts and Bolts – Gain practical strategies for managing BHI workflow

CalHIVE BHI Program
Timing & Implementation "Launch"

12 months

18 months

6 months

WE ARE HERE

Jul 2023 — Jan 2024 — Jul 2024 — Jan 2025 — Jul 2025 — Jan 2026 — Jun 2026

PREPARE

- Build team
- Readiness assessment & recommendations
- Select integration model and pilot site
- Report and analyze BH screening data

IMPLEMENT

- Implement care model at pilot site
- Adopt clinical, data, operational workflows, including training
- *Make improvements!*
- Analyze and improve patient engagement
- Create disparity reduction plan

SCALE

- Analyze pilot progress, identify improvement and spread plan
- Craft sustainability plan
- Complete project documentation and communication plan

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Implementation Plan

BHI Model (Section 1)

Pilot Site (Section 2)

Staffing (Section 3)

PHQ-9 (Section 4)

BHI Billing & Coding (Section 5)

Pilot Site Evaluation & Engagement (Section 6)

WE ARE HERE

BHI Workflows (Section 7)
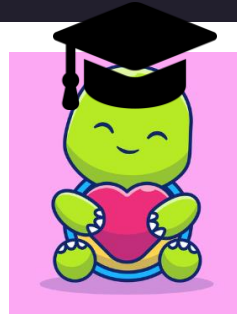
How are you feeling about your BHI Workflows?

Drop an emoji in the chat and let us know how you are feeling!

Busting BHI Workflow Barriers

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"We don't need this. Why are you giving me something else to do?"

Shifting the Organizational Culture

Understanding the Why... Sarah's Story

- The clinic is now introducing a new behavioral health integration (BHI) program. This change means adopting a new workflow, which Sarah sees as yet another burden added to her already overflowing plate. As she listens to the presentation about BHI, she feels a wave of frustration and resistance. "This won't work," she thinks. "We're already stretched too thin."

Turning Point

- Through open dialogue, Sarah begins to see the bigger picture. She learns that integrating behavioral health can streamline some of her tasks by providing more comprehensive care during a single visit, reducing follow-ups and fragmented care. With time, training, and support, Sarah starts to understand why this change is crucial for both patients and staff.

Reflection: Does Sarah's story sound familiar? How do we help them understand why this is important?

Make it personal. Patient stories.

Current workflow is actually more time intensive and doesn't provide the appropriate care/follow-up

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Definition of Change Management

Definition: "Change management is the application of a structured process and set of tools for leading the people side of change to achieve a desired outcome. We apply change management by helping individuals impacted by a change make the successful personal transitions that enable them to engage, adopt, and use a change."

5 Certainties During Change

❑ People are the Heart of Change

❑ Resistance is Expected

❑ Reframing Reality is Required

❑ Engagement is Essential

❑ Communication is Critical

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Workflow Development – Why?

- As you build your workflows, you must know and remember the "why" behind what you are doing
  - Buy-in for the workflows requires buy-in for the model
    - Do the staff and providers buy-in to the model?
    - Address objections to BHI strategy before the workflow process

- (Co) Develop, then test, then feedback, then iterate
  - Understand the struggles for each role
  - Creating buy-in, adapting well, and executing effectively, will solidify adoption

What is your WHY?

Plan

Do

Study

Act

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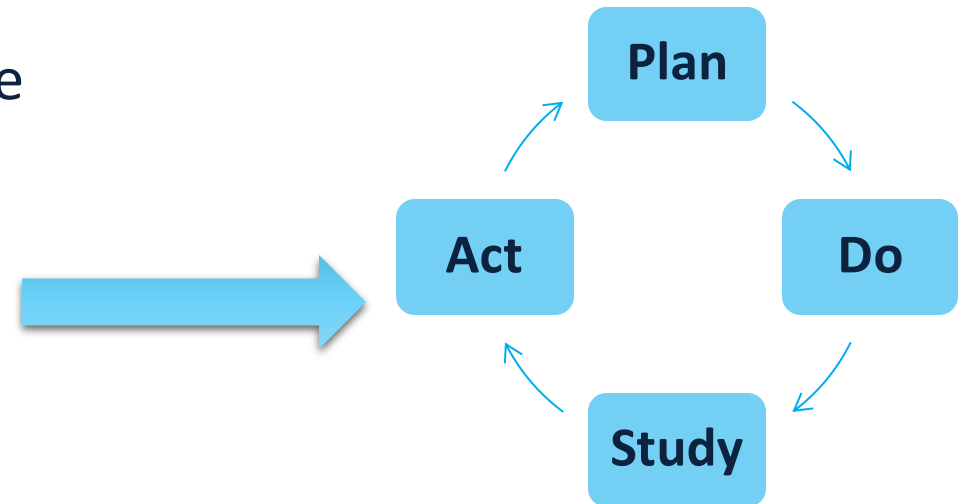
BHI Workflows: Align & Combine

What needs to get done for BHI?

- Create alignment with what exists AND works!

- Integration becomes what you're already doing

- Which of your current workflows are being leveraged?

Share in the chat:

After identifying strengths or gaps, what are your next steps for your BHI workflows?

Continue with the new steps we have put in place to increase WHO numbers.

We are working with the MA and Front desk staff to understand the workflow. We are working with the providers who are starting to send referrals in a new way.

Gaps: established workflows can be hard to find and/or quite outdated.

Make adjustments to the workflows that already exist to reflect the BHI work
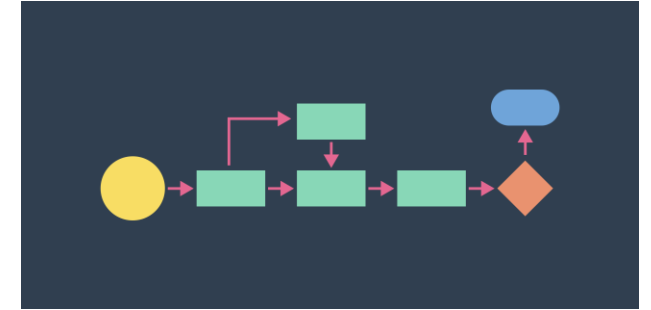
The Elevator Pitch

Identify Your Goal and Make Them Care

Explain What You Do

Communicate what is Unique

Engage With a Question

Call to Action

Put it all Together

Practice

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Breakout Activity: Practice your BHI pitch

Think about a resistance point to behavioral health integration at your organization. Maybe it is:

- Leadership, Providers, MAs, Front Desk Staff, Billing, etc.

How would you pitch the importance of BHI to them? What points would you emphasize?

As a large group, we will take 2 minutes to write down a few thoughts before going to breakout rooms of 3-4 participants.

Share your pitch and get feedback from your breakout room.

Take 2 minutes each to share

Fine Tuning

Implementation is a process

- Your BHI pitch will be replayed

- Check your lexicon

- Be consistent

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"Who does what and when?"

Staffing & Workflows

BHI Workflows

Screening → Warm-Handoff and Initiation of Care → Initial Assessment → Follow-Up Care → Patient Re-engagement

Developing BHI Workflows Checklist

- ❑ Could this be absorbed in the current workflow? (Y/N)

If no…

- ❑ Who owns the workflow?

- ❑ What is the target patient population for this workflow?

- ❑ How will BHI workflows align with other workflows?

- ❑ Who is implementing the workflow?

    - ❑ What clinical staff are involved in each step?

    - ❑ Is each step clear to everyone based on roles?

- ❑ What are the steps needed for this workflow?

- ❑ How does the patient experience the workflow?

    - ❑ Are there considerations around specific patient needs (e.g. language, literacy, digital access)?

- ❑ Technology

    - ❑ What technology changes are needed?

    - ❑ What are documentation templates to be developed?

- ❑ Finance

    - ❑ Does the finance team need to be involved?

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Staffing & Education

Remember your WHY

Workflow Changes

- What needs to be updated?
  - Leverage Implementation Plan work
  - Consider: workflows vs SOPs

- How will you educate those who are doing the work (implementers)?
  - Preceptorship model of resident training ("See one, do one, teach one")
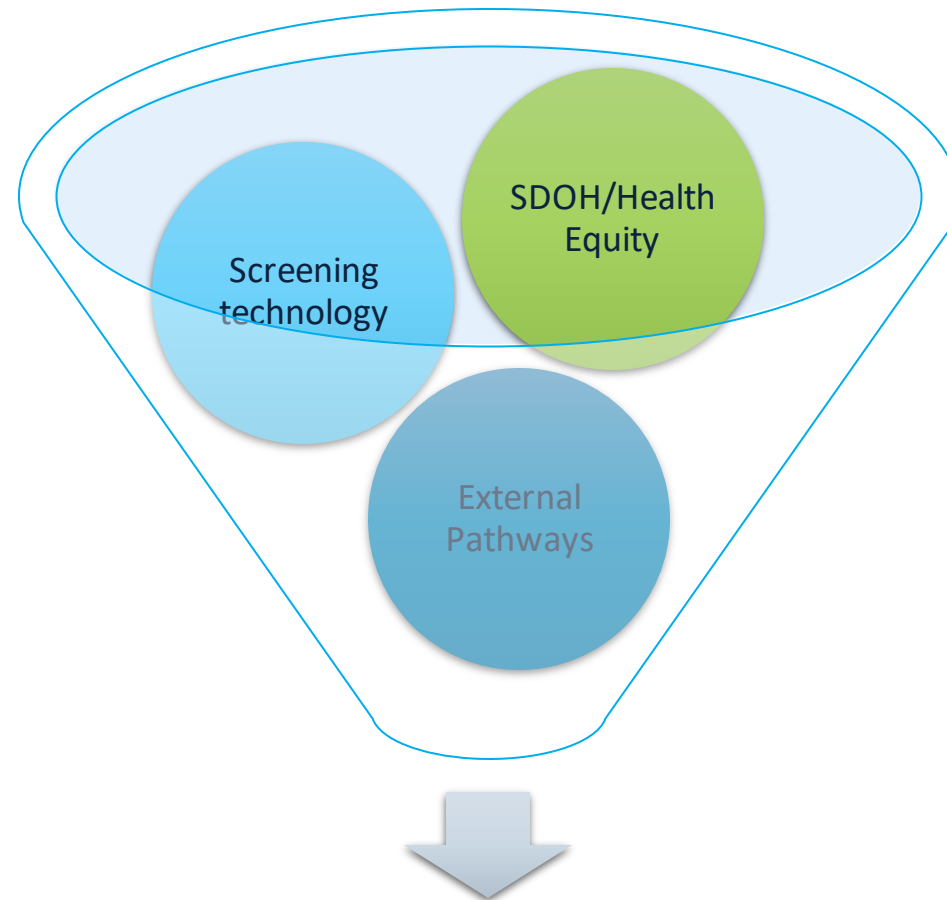 - Approach may differ by role

Training/Education (Ongoing)

- Weaving it into the organizational culture

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# Prioritize and Aligning

Clarify and align your work

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"But how will that look at our clinic?"

The Nuts and Bolts

Making it work for you

- Address the initial skepticism
    - Acknowledge the common concerns and hesitations clinics might have about implementing new strategies or changes.

- Leverage what works and the staff that you have

- Focus on recognizing and utilizing the existing strengths within the clinic, including effective processes and skilled staff members.

- Encourage leveraging current resources to their fullest potential before seeking external solutions.

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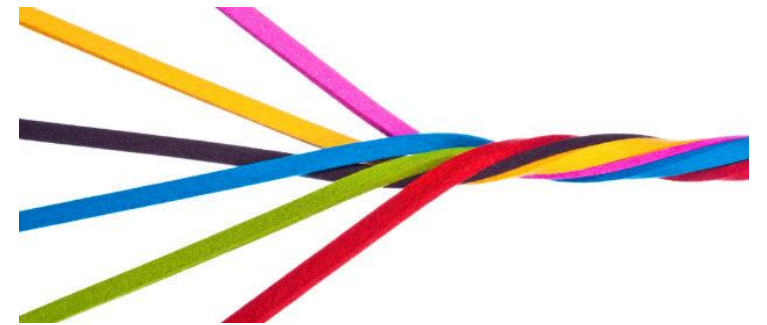
Scenario: Maximizing BHI visits

The BHC is swamped. She just left an exam room with a patient and two providers are requesting her support for a warm hand off. The next step in the workflow is to consult with the provider prior to the warm hand off.

What could she do to maximize her time and patient visits?

Come off mute or let us know if the chat!

Maximizing BHI visits

Pop in to say hi

Provider goes in if medical running late

Leverage labs/other visits that need to get done

Understand where patient is coming from (how long can they stay)

Virtual warm hand off

Leaving room for adaptation

Judgment to prioritize clinically

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Scenario: Increasing Warm Handoffs

The BHC does not have a lot scheduled for her day. Prior to the morning huddle she scrubs the schedule for her assigned providers. Several patients are identified that could benefit from a BHI touchpoint.

At her morning huddle, she shares her list of patients with providers and MAs.

What are some strategies she can use when talking to the team?

Come off mute or let us know if the chat!

Increasing Warm Handoffs

Moving from therapy cadence to medical model	Identifying concrete interventions	Providing feedback to provider after meeting with patient
Asking MAs if there is a patient that needs more support	Sharing scheduling privileges with team	Taking ownership of the process

Remember

- Use the Workflow Checklist

- BHI needs to be woven into the daily routine

- Workflows are not static, they will evolve

- Everyone shares the same lexicon

Be Consistent!

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Q&A

Take Aways

What is your biggest takeaway about BHI workflows today?

What barrier got busted for you today?

Implementation Plan Section 7 – BHI Workflows

Due to your IA by Friday, June 28

Q2 2024 Sprint: Implement, Improve, Impact

APRIL

Improvement Advising
- Conduct IMAT 2 of 4
- Collaborate on and finalize Aim statement & Convening Pre-Work

Thurs. 4/4 (12-1) – Data Office Hours

Fri. 4/12– Baseline Data due

Tues. 4/16 (11-12)
CalHIVE BHI Commons – Person Centered Equitable BHI
- Review health equity opportunities in BHI care
- Understand opportunities to reduce stigma in patient populations

Tues. 4/30 (11-12)
[OPT] Webinar – Model for Improvement Fundamentals (Webinar 2 of 2)
- Plan how to incorporate quality improvement and data-driven decisions

By Tues. 4/30
Aim Statement & Convening Pre-Work Due
- Create goal with measurable objectives for end of program (including a disparity analysis)
- Finalize pre-work for May in-person convening

MAY

Improvement Advising
- Review baseline data trends
- Conduct IMAT 2 of 4

Tues. 5/7 (11-11:30)
[OPT] CalHIVE BHI Webinar – Convening Prep
- Prepare for annual in person meeting

Tues. 5/21- Wed. 5/22
CalHIVE BHI Convening 2024: Implement, Improve, Impact
- Day 1: BHI workflows
- Day 2: Reflect on pilot site integration progress and capture improvements; analyze individual and cohort data trends and Aim Statements; identify patient engagement opportunities

By Fri. 5/31
Implementation Milestone Tool (#2 of 4)
Final scores documented

Improvement Advising
Webinars
In Person Events
Data / Reporting
Assignments

JUNE

Improvement Advising
- Review baseline data trends
- Complete BHI Implementation plan

Tues. 6/11 (11-12)
CalHIVE BHI Commons – BHI Workflows: Barrier Busting
- Reflect on BHI workflow development: challenges, real-life progress and solutions

Thurs. 6/13 (12-1) – Data Webinar: Cycle 1

Tues. 6/25 (11-12)
[OPT] Pilot Site Evaluation & Engagement Office Hours
- Review themes, recommendations & resources

Thurs. 6/27 (11-12) – Data Office Hours

By Fri. 6/28
BHI Implementation Plan: Section 7 – BHI Workflows
- Due to IA

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Feedback please!

1. Today's webinar was useful for me and my work *[select one]*
   - Strongly agree
   - Agree
   - Neither agree nor disagree
   - Disagree
   - Strongly disagree

2. Of the topics we covered today, what was especially helpful? *[select multiple]*

   - Articulate your "why" for BHI and practice your elevator pitch
   - Clarify staffing needs and define roles within the workflow
   - Nuts and Bolts – Gain practical strategies for managing BHI workflow

Thank you!

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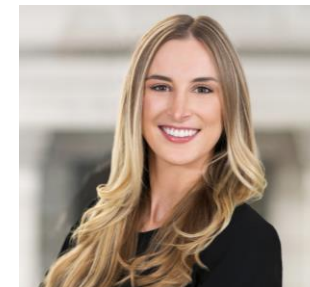mnickelnguy@pbgh.org

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