

Interdisciplinary Community-based Care: Successful Integration of Behavioral and Physical Health Care

Engaging Pediatricians in the Integration Process

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Dr. Hagan has no conflicts to disclose



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Session Goals:

- Identify barriers to physician engagement
- Develop strategies to overcome barriers to engagement
- Discuss examples (MH/BH surveillance /screening or ideas from session participants)



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Barriers to engagement

The docs' perception of the landscape:

In a word:

“Daunting”



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Barriers to engagement

- Practices are varied
- The landscape is complex
- A bewildering array of potential models for integration
- The necessary skills and systems are new



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The Range of “Intramural” Practice Activities:

- Surveillance/screening:
 - Post Partum Depression
 - Developmental Delays and Autism Spectrum Disorders,
 - Behavioral problems, Family stressors, Social and Economic stressors
 - Lead screening
- Psychiatric Diagnosis
- Referrals and referral coordination
- Treatment



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Potential “Extramural” Community Partners:

Age 0-3:

- Early Intervention Program
- Evidence-based home visiting programs
- Department of Children and Families and potentially other state agencies



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Potential “Extramural” Community Partners:

Age 4-5:

- Transition from EIP to special education services through local schools
- Early Education and child care programs
- Head Start and Early Head Start



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Potential “Extramural” Community Partners:

School Age Children and Adolescents:

- Schools
- Outside therapists and community mental health agencies
- Residential placements
- Department of Children and Families
- Department of Youth Services
- Department of Mental Health
- Juvenile justice system



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Potential “Extramural” Community Partners:

Any Age:

- Medical subspecialists and hospitals
- Federation for children with special needs www.fcsn.org
- Family Voices www.familyvoices.org
- Other Parent/Family support organizations (Including condition-specific resources such as CHADD)
- Community multi-service organizations, respite care providers, PCAs (personal care assistants), etc
- Faith-based supports
- Substance abuse programs
- Food Pantries, Legal Aid
- Immigration services



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Potential Tools for the Docs:

- Specific tools, with appropriate background information
- Information about billing (critical for sustainability)
- Registries/patient lists
- External databases like “Help Me Grow” or MA 2-1-1
- Care coordination and Team-based approach



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So how to engage the docs?

- Most pediatricians understand the need for integration and would actually like to find ways to do a better job.
- Find a “Physician Champion” (Or better, several.)
 - State Chapters of the AAP
 - Academic medical centers
 - National AAP Committee on Child Abuse and Neglect



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So how to engage the docs?

- Use your “Physician Champions” for help identifying practice settings to pilot initiatives.
- Specific practice characteristics are probably less important than “attitude”.



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So how to engage the docs?

Making the case for Project Launch Initiatives:



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So how to engage the docs?

Making the case for Project Launch Initiatives:

- Place emphasis on quality.



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So how to engage the docs?

Making the case for Project Launch Initiatives:

- Place emphasis on quality.
- Use data to make the case.



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So how to engage the docs?

Making the case for Project Launch Initiatives:

- Place emphasis on quality.
- Use data to make the case.
- Make the “business case” for change.



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What!!??

There's a business case for Behavioral Health Integration?



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Making the case for Project Launch Initiatives

Alignment with emerging payment systems:

While the specifics of new payment models are still not clear, there is a broad consensus that *emerging payment models will increasingly reward **value** over **volume** and that this will require improved coordination of services.*

Value** will be defined in terms of **cost, outcomes and patient (family) satisfaction.



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Implementing Project Launch Initiatives with Pediatric Partners:



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Implementing Project Launch Initiatives with Pediatric Partners:

- Engagement is key



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Implementing Project Launch Initiatives with Pediatric Partners:

- Engagement is key
- Remember: Various practices will achieve different degrees of integration, via different paths, in different timeframes and with varied degrees of success



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Implementing Project Launch Initiatives with Pediatric Partners:

- Engagement is key
- Remember: Various practices will achieve different degrees of integration, via different paths, in different timeframes and with varied degrees of success
- Start small and build on success



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Discussion/Examples. Possible topic:

Implementation of Behavioral and developmental screening into routine pediatric practice.

•Barriers:

- “Takes too much time.”
- “What do I do with the children who screen positive?”

•Engagement

- Emphasis on quality.
- Use data to make the case.
- The “business case” for change.

•Implementation support:

- Systems, billing (Pediatric Councils)
- “Help Me Grow”



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