Healthforce Center at UCSF

# Improving Access to Behavioral Health Services: Care When You Need It



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# Project Description

wanted to address poor access to behavioral health services while helping to improve the experience of patients and Primary Care Providers (PCPs). I believed I could do this by creating an E-Consult Service and providing Educational Support to help PCPs better manage their patients mild to moderate behavioral health symptoms. Partnering with PCPs and using standardized screening tools for behavioral health would help to make available more Same Week Appointments with a Behavioral Health Provider for patients with moderate to severe behavioral health symptoms.

### **Problem Statement:**

Limited access to behavioral health services at Palo Alto Medical Foundation leads to frustration for PCPs, delays in care for patients with moderate to severe mental health symptoms, and a poor patient experience.

### Discovery:

62 Interviews with administrators, providers, and patients across Sutter and PAMF within each of the five divisions.



### Interviews:

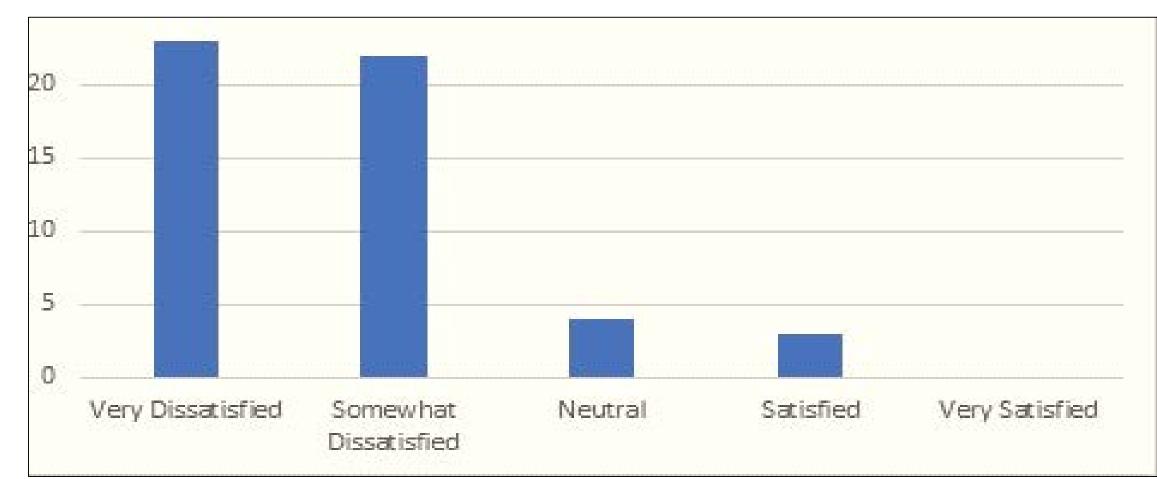
"These patients take up a lot of our time."

"Long wait times require that we stand in."

"We have a lack of resources to help these patients."

# **Survey Question:**

How satisfied are Primary Care Providers with current access to Behavioral Health Services at PAMF?



### Goal:

Improve access to Behavioral Health Services by providing educational outreach to primary care teams and implementing consistent use of screening tools.

# **Outcome-oriented Objective:**

Improve 3NA for follow up appointments for existing patients to one week or less. Provide appointments for new patients within two weeks of referral.

# Results

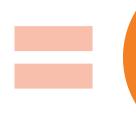
## Implementation Plan:











### **Testimonials:**

I have had the most helpful curbside consults. We reviewed history, discussed cases, and the BHP gave very specific and actionable advice. This was extremely helpful and the patients did much better.

**Primary Care** Provider

I was so thankful to be able to get an appointment with a psychiatrist within a week from when I first

**Patient** 

I am extremely grateful for the help I received from my care team. You made my weekend.

**Patient** 

The parents and patients are so happy with the treatment they received. I have never had such a positive response to a psychiatrist before.

**Primary Care** Provider

# Lessons Learned

- Problem solved ways to improve access to Behavioral Health Services.
- Keep asking what is the problem you are trying to solve and who is the beneficiary.
- Key insights: 1. You can ask for help. 2. You do not have to solve every problem. 3. You can look for solution to a part of the problem.
- Implementation at other organizations share resources, don't reinvent the wheel.

## **Next Steps:**

- E-Consults started July 1<sup>st</sup>, 2019 in Palo Alto Division for both Adult and Child & Adolescent support. E-consultations will spread to all divisions September 2019.
- Collaborate with Primary Care Teams and Sutter Health to develop Introduction to Behavioral Health 101 -December 2019.
- Standard use of PHQ9, PHQ9A and GAD 7 in Primary Care by January 2020.
- E-Consults + online based CBT for PHQ9 <10, GAD 7<10 (mild-</li> moderate), Appointment same week PHQ9 >10, GAD 7 > 10.

# Mission Model Canvas

### **Key Partners**

- Sutter Health: Collaboration with Sutter Health is in line with their mission to improve access
- **Primary Care**: Collaboration can help us to identify resources and standardize workflows to improve access to behavioral health services throughout the organization

### **Key Activities**

- Develop Behavioral Health 101 Educational Orientation & Quarterly Updates.
- Develop workflow for E-**Consult Service for Primary** Care providers

### Key Resources

- Behavioral Health Team to develop & provide **Behavioral Health 101**
- Platform to develop workflow for triage of referrals to E-Consults, Same Week **Appointments**

### Value Propositions

- Patients: Behavioral Health Promotion/Prevention. Reduce the amount of time patients wait for care for behavioral health needs
- Primary Care Clinicians: Improve Accessibility, Promote Network of Support provide **E**-Consults: for questions regarding patients with mildmoderate symptoms
- Allows moderate to severe patients to be referred to same week behavioral health appointments

### Buy-in & Support

- Provide education regarding the use of screening tools
- Offer Primary Care Providers tools to guide them when managing patients with behavioral health needs

#### Deployment

- Primary Care Team will use screening tools when referring patients
- Behavioral Health Teams introduce new **Behavioral**
- Health 101 Collaboration, E-**Consults & Same Week Appts.**

### Beneficiaries

- Patients: New Patient referrals for moderate to severe behavioral health needs will benefit from Same Week Appointments: More regular follow up appointment slots will be available from a likely decrease in referrals for patients with mild behavioral health needs PCPs will feel better equipped
- treating patients with behavioral health needs with the availability of E-Consults, Behavioral Health101 Collaboration, and Same Week Appointments.

#### Mission Budget/Cost

- Resources allocated for time to develop in Behavioral Health 101 Collaboration
- IT to develop E-Consult platform
- Clinician buy in to block slots in their schedules for Same Week Appointments one slot per provider per week

#### Mission Achievement/Impact Factors

- **Behavioral Health 101 Collaboration**
- Offer E-Consults
- Offer Same Week Appointments
- Improve Access to Behavioral Health Services



