

QUERINational Program

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TEAM-BASED BEHAVIORAL HEALTH

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Overview

The evidence is clear: team-based behavioral healthcare improves outcomes and satisfaction for individuals with mental health conditions. However, healthcare teams do not develop naturally and require targeted support to form, function effectively, and be sustained. Using facilitation techniques and common measures, this QUERI Program will enhance and inform team-based care for Veterans with behavioral health conditions. This program will advance VA's knowledge of how team-based behavioral healthcare can be improved through the use of implementation facilitation strategies, with anticipated improvements in Veteran outcomes. Projects are responsive to VA national priorities to produce greater choice for Veterans, modernize systems, focus resources more efficiently, improve timeliness of services, and support suicide prevention.

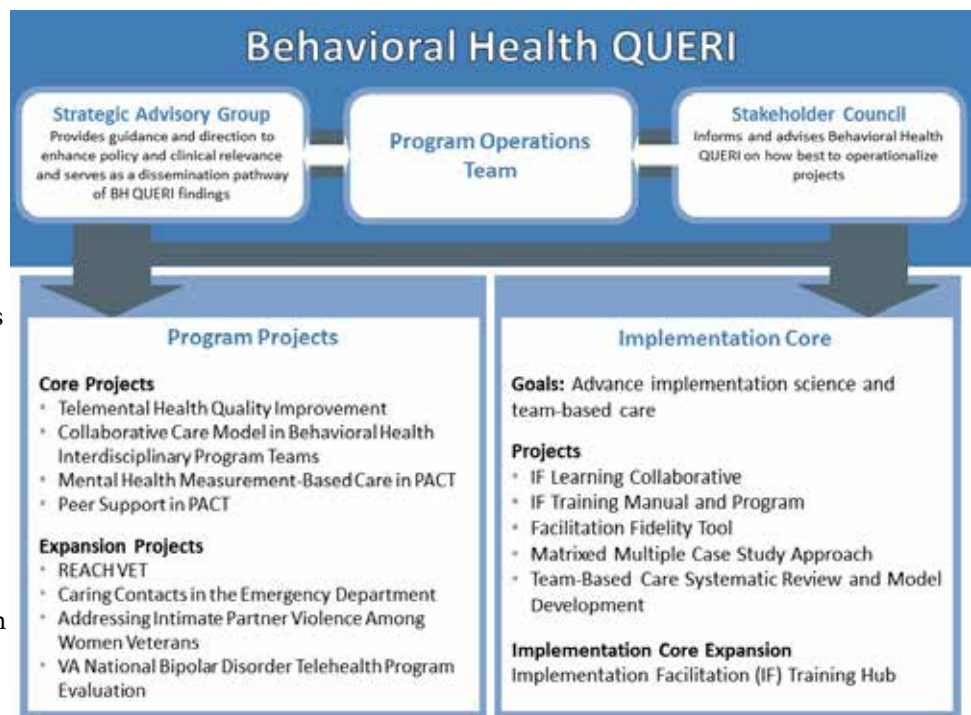
For this QUERI Program, team-based care is defined as treatment provided through interdisciplinary VA clinical teams and across disciplines (e.g., mental health and primary care). Specific aims include:

- Understand and enhance coordination, quality, equity, and outcomes of care for Veterans treated within interdisciplinary VA treatment teams and via shared care across healthcare disciplines;
- Advance measurement-based care delivery strategies that enhance personalized, proactive, and patient-driven care for Veterans; and
- Advance implementation science by developing, evaluating, and refining new tools and resources to support the use of facilitation to implement clinical programs and practices that are responsive to VA priorities.

Methodology

Guided by the *integrated-Promoting Action on Research Implementation in Health Services* (i-PARIHS) framework, Behavioral Health QUERI is testing the impact of implementation facilitation strategies to support the uptake of clinical innovations and enhance team-based care for Veterans with behavioral health conditions. Further, Behavioral Health QUERI

investigators are using the RE-AIM framework to guide selection of measures for rigorous evaluations in program projects. Finally, investigators are conducting innovative work to enhance understanding of implementation facilitation (IF) and develop



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Team-Based Behavioral Health **QUERI**

new tools to support the use and evaluation of IF strategies for evidence-based practices and other clinical innovations. Examples of our Implementation Core resources include: a two-day training program for novice facilitators, along with a companion Implementation Facilitation Training Manual (available for download at <https://www.queri.research.va.gov/tools/implementation/Facilitation-Manual.pdf>); and the Implementation Facilitation Learning Collaborative (contact: Mona.Ritchie@va.gov).

Findings and Anticipated Impacts

- The **Tele-Mental Health (TMH)** project addressed a VISN 20 request to develop a process to implement Tele-Mental Health programs in rural community-based outpatient clinics (CBOCs). Project facilitators worked with 20 providers at TMH clinics providing services—and three rural CBOCs receiving services—to improve access to mental health care for all Veterans served by the CBOCs. Providers conducted 496 encounters for 126 Veterans during FY16. Additionally, facilitators supported implementation of VA Video-to-Home, which resulted in 52 Veterans receiving care in their homes for 588 visits. The TMH Implementation Checklist developed by this QUERI project team is now available to four TMH Regional Hubs established by the VA Office of Rural Health.
- The **Behavioral Health Interdisciplinary Program (BHIP)** project completed a trial of the impact of external facilitation on implementing BHIP teams based on evidence-based collaborative care models in general mental health clinics. Trial results indicated improved team ratings for BHIP providers as well as reduced hospitalization rates for BHIP-treated Veterans. Results were published in JAMA Network Open (Bauer et al., March 2019). In FY17-FY18, the BHIP team partnered with VA's Office of Mental Health and Suicide Prevention and Office of VA Access to Care leadership to train 17 senior Transformational Coaches, who completed facilitation with 21 additional VAMCs.
- The **Peers in PACT (PEER)** project is evaluating the use of external facilitation to support the implementation of Peer Specialists on VA Patient Aligned Care Teams (PACT) in primary care. To date, 41 Peer Specialists involved in this project have delivered an approximate total of 13,750 encounters to 5,811 Veterans across 25 VA medical centers. Peer Specialists in this project also are supporting the Whole Health initiative as it rolls out in enrolled sites.
- The **Measurement-Based Care for Mental Health (MBC)** project is testing the effectiveness of external facilitation and local team-based quality improvement for increasing MBC in primary care clinics using patient-reported outcome measures. Investigators also are examining the impact of MBC on primary care and primary care – mental health integration (PC-MHI) clinic communication and team functioning. To date, 6 of 12 VA medical centers have been recruited to participate in this project. Multiple members of the Team-based QUERI Program lead or serve on committees supporting the VA's Measurement Based Care in Mental Health National Initiative.

Operational Partner(s)

VA Patient Care Services (Mental Health & Suicide Prevention, Primary Care, Public Health), and the Office of Health Equity.