

# TOWARD INTEGRATED HEALTH CARE

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Each thread of healthcare is a strand able to support its own weight, not until all strands are integrated do they create a rope strong enough to carry the weight of the patients cares, concerns, and goals.

-unknown

# Why am I interested?

- ▣ My visits

# Why Integrated Behavioral Health Services?

- Incidence of co-morbid conditions
- ▣ Improved outcomes and cost savings with integrated health services
- ▣ High incidence of complex trauma and associated behaviors in our Native Communities

# The Model Matters (Williams 2012, Bower 2006)

- ▣ Outcomes are poor if behavioral health care is provided solely by a primary care clinician
  - Problems with diagnosis, dosage, duration of treatment, lack of follow-up treatment
  - Outcomes worse for minority and lower-income patients
- ▣ The model has to include a team approach, incorporating a variety of medical professionals
  - Must include systematic screening and coordination of care by a care manager with a specific mental health background
  - Must include frequent follow up for chronic conditions
  - Must include education to empower patients to aid in medical decision making and self care

# Outcomes in an Integrated Care Model (Williams 2012, Katen et. Al 2010)

- ▣ Outcomes are significantly better if care is provided by a team of health professionals that includes a mental health/addictive disorders professional (integrated care)
  - Medication adherence significantly improved
  - Outcomes for minority and lower-income patients the same or better than those for white, higher-income patients
  - For patients with co-morbid chronic health conditions and depression, overall health improves when both conditions are treated in an integrated care environment
  
- ▣ Patient satisfaction with care is higher

# IBH Models

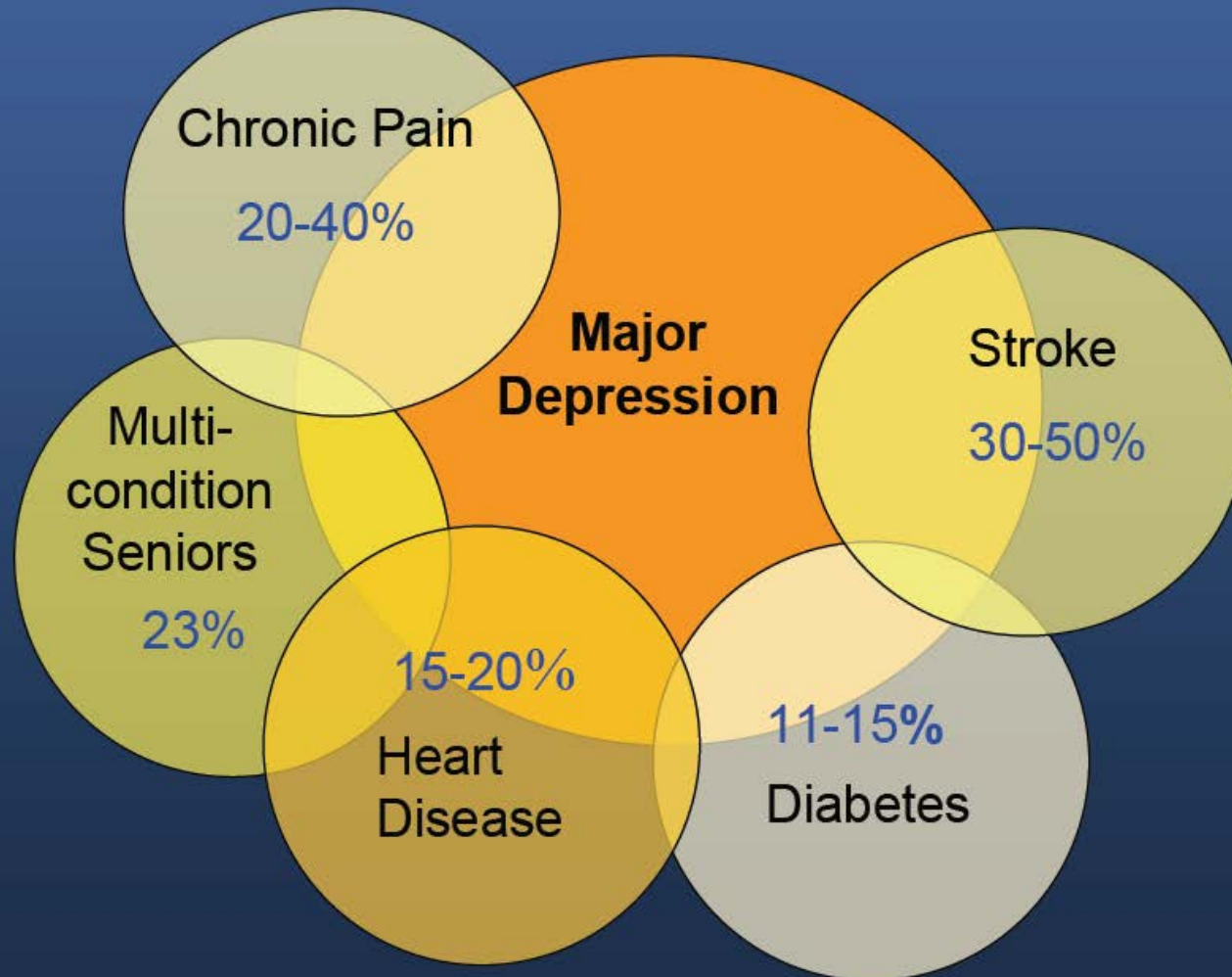
- Integrated behavioral health occurs when
  - Behavioral health services are added into the primary care setting, or
  - Primary health care services are added into the behavioral health setting
- Most patients with behavioral health issues or addictions are treated by behavioral health specialists in a psychiatric or community setting so adding primary care services to this setting makes sense for these patients
- Most patients with less serious mental illness or substance use disorders are treated by generalist physicians in a primary care setting so adding behavioral health services to this setting makes sense for these patients
- Patient is more likely to keep appointments where multiple issues are being address-one stop shop

# Less Stigma

- ▣ Comfort in discussing mental health issues
- ▣ Established relationship with primary care provider
- ▣ Less stigma walking into primary care setting than mental health setting
- ▣ My Elder Patient



# Comorbidity



Integrated Care	Co-location	Collaborative Care
<ul style="list-style-type: none"> <li>- Systematically combining physical and mental health services</li> </ul>	<ul style="list-style-type: none"> <li>- Most common model of integrated care</li> </ul>	<ul style="list-style-type: none"> <li>- Integrated health care model</li> </ul>
<ul style="list-style-type: none"> <li>- Term care approach to mental health based in community health primary care setting</li> </ul>	<ul style="list-style-type: none"> <li>- PCPs develop agreement with mental health providers to whom they refer their patients with mental health needs to on-site mental health services</li> </ul>	<ul style="list-style-type: none"> <li>-Partnership between the physical health and mental health providers to manage the treatment of mild to moderate and stable severe psychiatric disorders in primary care settings</li> </ul>
<ul style="list-style-type: none"> <li>- Integration of mental health treatment in primary care</li> </ul>	<ul style="list-style-type: none"> <li>- PCPs typically do not follow up on their referral once it has been made</li> </ul>	<ul style="list-style-type: none"> <li>- May include brief psychotherapy or simply medication management and patient education</li> </ul>

Function	Minimal Collaboration	Basic Collaboration from a Distance	Basic Collaboration on-Site	Close Collaboration Partly Integrated	Fully Integrated
Doherty, McDaniel & Baird (1995)	<ul style="list-style-type: none"> <li>▪ Separate Systems</li> <li>▪ Separate facilities</li> <li>▪ Communication is rare</li> <li>▪ Little Appreciation</li> </ul>	<ul style="list-style-type: none"> <li>▪ Separate Systems</li> <li>▪ Separate facilities</li> <li>▪ Periodic focused communication ; mostly written</li> <li>▪ View each other as outside resources</li> <li>▪ Little understanding of each other's culture or influence</li> </ul>	<ul style="list-style-type: none"> <li>▪ Separate systems</li> <li>▪ Same facilities</li> <li>▪ Regular communication; occasionally face-to-face</li> <li>▪ Some appreciation of each others role &amp; general sense of large picture</li> <li>▪ Mental health usually has more influence</li> </ul>	<ul style="list-style-type: none"> <li>▪ Some shared systems</li> <li>▪ Same facilities</li> <li>▪ Face-to-face consultation; coordinated tx plans</li> <li>▪ Basic appreciation of each others role and cultures</li> <li>▪ Collaborative routines difficult; time &amp; operation barriers</li> <li>▪ Influence sharing</li> </ul>	<ul style="list-style-type: none"> <li>▪ Shared systems &amp; facilities in seamless biopsychosocial web</li> <li>▪ Consumers &amp; providers have same expectations of system(s)</li> <li>▪ In-depth appreciation of roles &amp; culture</li> <li>▪ Collaborative routines are regular &amp; smooth</li> <li>▪ Conscious</li> </ul>

# Barriers to Integrated Care

## ▣ Clinical Barriers

- Traditional separation of mental health issues from general medical issues
- Lack of awareness of mental health screening tools in the primary care setting
- Physicians' limited training in psychiatric disorders and their treatment

# Barriers to Integrated Care

## ▣ Policy Barriers

- Physical health and Mental health funding streams
- Difficulty of sharing information due to HIPAA regulations (progress notes)

## ▣ Organizational Barriers

- Shortage of mental health professionals
- Limited communication between medical and mental health providers
- Lack of agreement between medical and mental health providers

# People Seek comfort in close relationships

- ▣ Diabetes programs
- ▣ CHR's
- ▣ Drivers!
- ▣ Not someone they see once a year

Sometimes what is going on can swimming in some some pretty deep water. Its not “just do it”,  
**It may be**

“I have been carrying around this trauma since childhood and am hypervigilant and what you call “resistant” I call surviving”

-The second slogan was too long for Nike

# MWB

- ▣ <http://www.youtube.com/watch?v=Ahg6qcg0ay4>



How does Trauma become  
activated in a Diabetes Program?!?!

I'm glad you asked

# Novelty Activates the CNS

We are novelty/newness/unfamiliar to many  
people

- ▣ If a patient who has suffered complex trauma feels unsafe/insecure, they become activated and may suffer in silence OR Not so silence

# The 4 horseman of Trauma

(Levine)

- ▣ Hyperarousal
- ▣ Constriction
- ▣ Freeze
- ▣ Dissociation

# The Brain and Stress

- ▣ Built for survival
- ▣ Something that stresses us calls our attentions and energy
- ▣ Not until we focus on change does it happen
- ▣ Stress and Trauma work to survive
- ▣ We feed it

Sometimes it aint a rabbit down that hole!

- ▣ With integrated care we have a team readily available to not only deal, but to heal.
- ▣ Beyond basic counseling, we can take the next step in HEALING our patients toward better long term health



# What can we do about it

- ▣ As providers we collaborate to gain a greater understanding of the interplay between trauma and health
- ▣ Gain basic skills for dealing with activation- Grounding and Centering, and pendulation
- ▣ Gain a greater appreciation for the ecological model of health care
- ▣ Know where our fence line ends

# Whole Patient Centered Ecological Model (CDC)



We don't change a behavior  
until it is no longer rewarding,  
or there is more value in the  
change

CHANGE IS HARD!!!

Be Well My Friends  
Lets take care of each other