

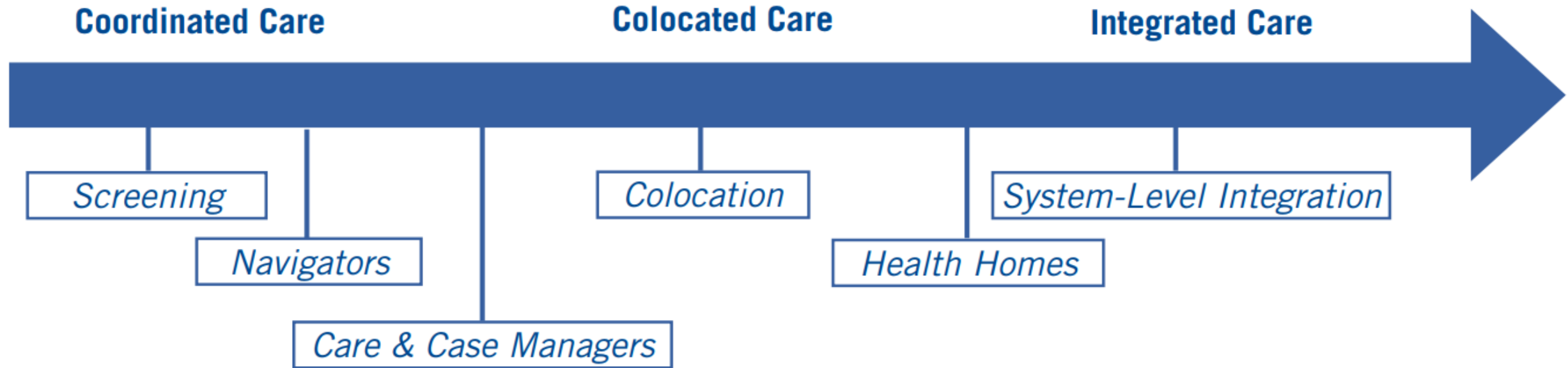
Relate, Create, Integrate

Kristine Hobbs, LMSW
Mental Health Integration Coordinator, QTIP
January 2020



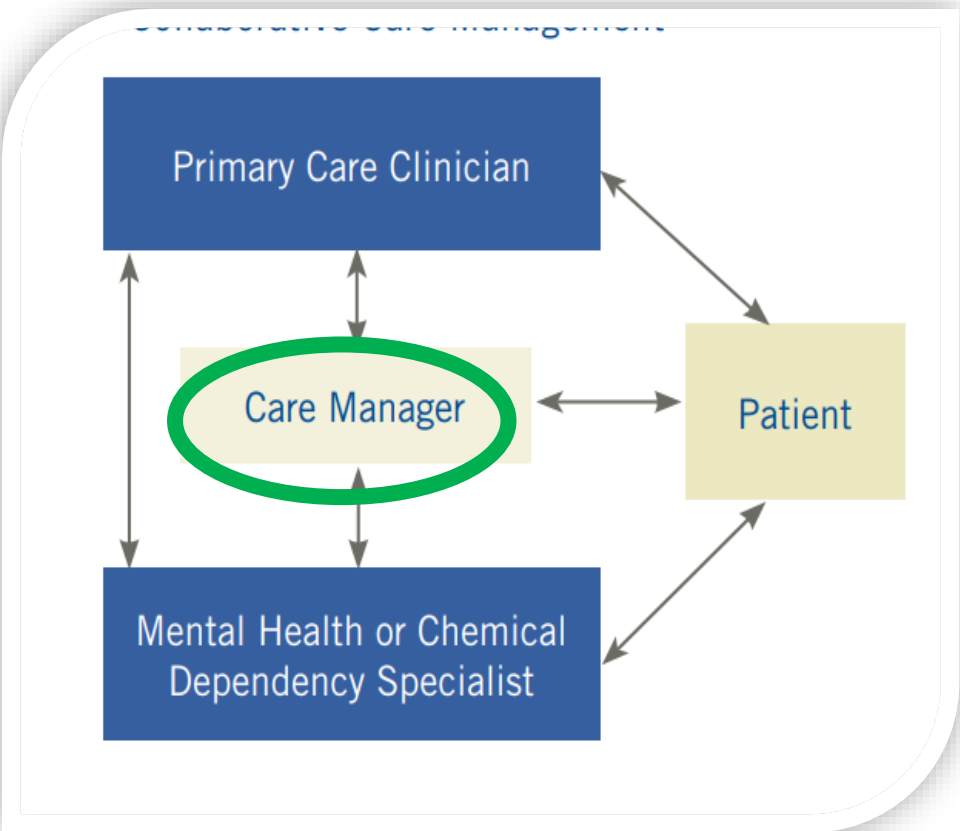


Figure 1. Continuum of Physical and Behavioral Health Care Integration*



*Adapted from Nardone²

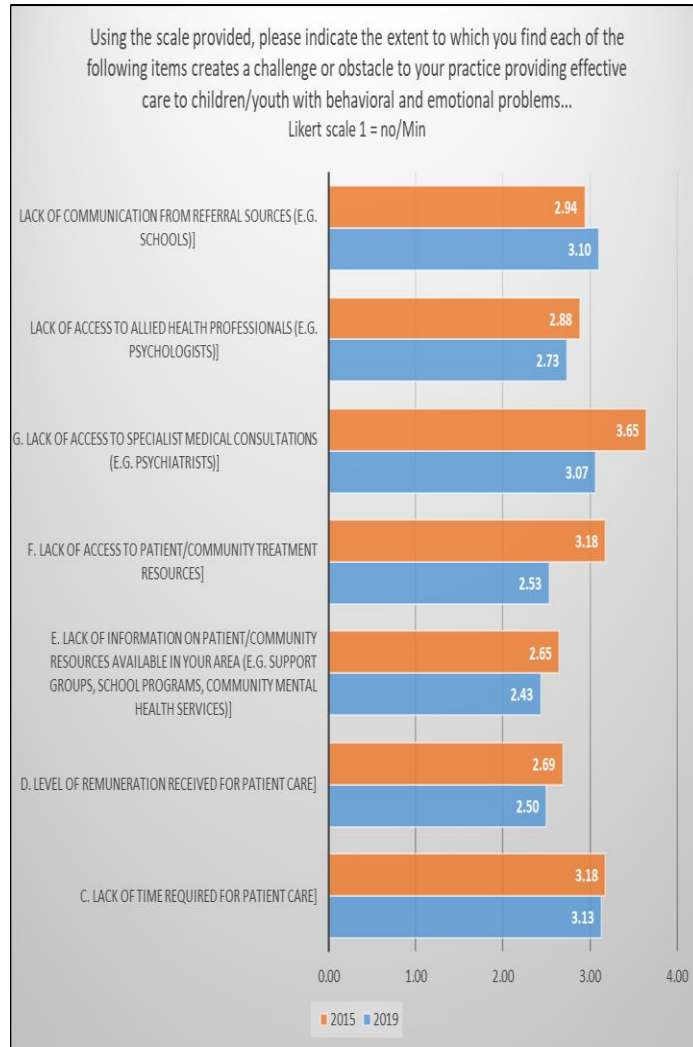
<https://www.milbank.org/wp-content/uploads/2016/05/Evolving-Models-of-BHI.pdf>



CCM Components associated with improved patient outcomes:

- Well-trained and supported care managers
- Systematic monitoring and follow up of patients
- Communication with providers
- In some cases, psychological interventions

How can I best assist you 2019?



Resources
Referral feedback loops
Psychiatry

Charleston Green



<https://www.kiechle.com/trips/charleston/charleston42.jpg>



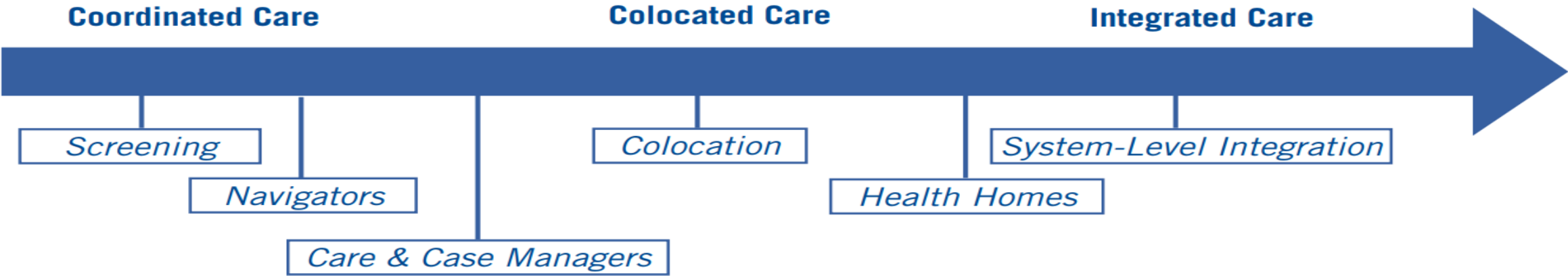
<http://cottagedays.blogspot.com/2014/05/photo-of-week-charleston-green-shutters.html>



<https://fineartamerica.com/featured/a-green-door-in-charleston-christiane-schulze-art-and-photography.html>



Figure 1. Continuum of Physical and Behavioral Health Care Integration*



*Adapted from Nardone²



Referral and Feedback Loops

ADDRESSING
Mental Health
CONCERNS IN
PRIMARY CARE
A CLINICIAN'S TOOLKIT

PRIMARY CARE REFERRAL AND FEEDBACK FORM

Date: _____ () Initial () Follow-up
Referring Physician Name: _____
Address: _____
(Street/PO Box) City State Zip
Fax: (_____) Phone: (_____)
Patient's Name: _____ DOB: _____
Parent's Name: _____ Address: _____ Phone: _____
Date(s) Patient Seen: _____
Reason(s) for Referral: _____
Any Specific Questions or Requests _____

Referring Physician's Printed Name/Signature

Thank you for evaluating this patient. To facilitate communication and treatment, please make copies of this form to retain in the patient's record; complete a form after initial assessment; complete additional forms periodically during treatment (as indicated) and when treatment is terminated; and mail or fax completed form(s) to the physician listed above. This is not a request for copies of psychotherapy notes, which require a signed consent to release. Thank you for your collaboration.

Consultant's Report

Date(s) Patient Seen: _____
 Patient did not make appointment. Patient made an appointment but did not keep appointment.
 Patient not seen within 60 days.
Initial Diagnoses:
1. _____
2. _____
3. _____
Recommendations: _____
Medications Prescribed: _____
Follow-up Arranged or Provided by Consultant: Further diagnostic testing _____
 Individual therapy Group therapy
 Family therapy Lab tests
 Medication management Return visit _____
Other Care Needed: Medication management by PCC
 Referrals recommended _____
 Follow-up recommended _____
 Other _____
Name (type or print) _____ Signature _____
FAX to _____ # _____ contact person _____

Add disclaimer statement per your institution here: _____

doi: 10.1542/peds.2010-0788Q

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Behavioral health provider is a member of the Primary Care team



Clinicians balance accessibility with productivity



Method for anticipating patients who will need integrated care



Successful Integrated Practices

The Academy – Integrating Behavioral Health and Primary Care
~ Neil Korsen, MD, MSc

“Common Factors”

H Hope
E Empathy
L2 Language
Loyalty
P3 Permission
Partnership
Plan



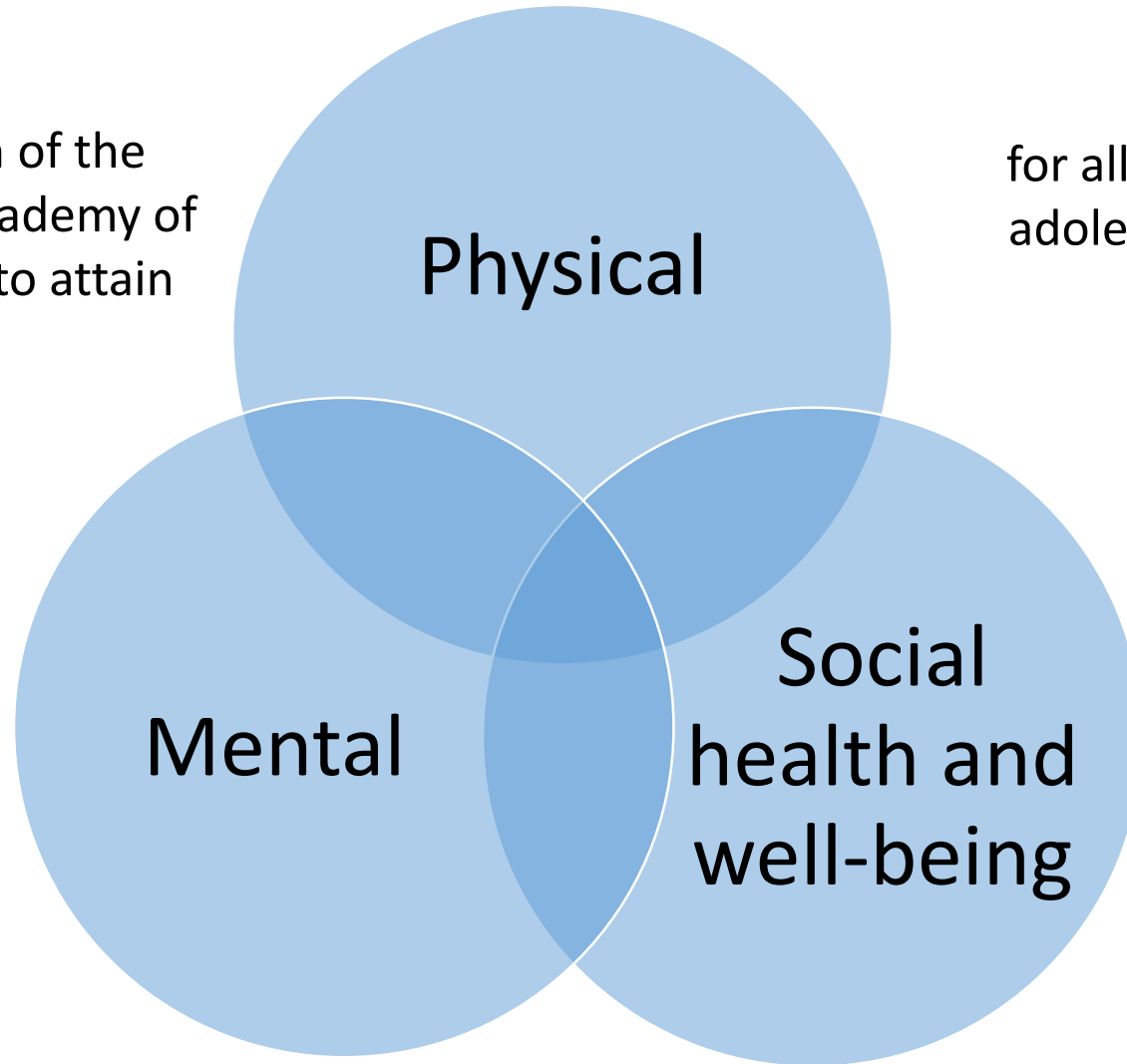
COMMON ELEMENTS OF EVIDENCE-BASED PRACTICE AMENABLE TO PRIMARY CARE: INDICATIONS AND SOURCES

Indications ^a	EPB Sources ^b	Common Elements of EBPs Amenable to Primary Care
<p>Preparation of patient or family to address any health risk or mental health need</p> <p>Resistance to care seeking</p> <p>Barriers to care seeking</p>	<p>Family therapy</p> <p>Cognitive behavioral therapy</p> <p>Motivational interviewing</p> <p>Family engagement</p> <p>Family-focused pediatrics</p> <p>Solution-focused therapy</p>	<p>“Common factors” communication techniques</p>
<p>Pain</p> <ul style="list-style-type: none"> • Acute (eg, injury, illness, procedural) • Chronic or recurrent (eg, chronic illness, disability, trauma, recurrent procedures) <p>Stress</p> <p>Habit problems and disorders</p> <p>Behavioral problems (eg, attention problems, anger management)</p> <p>Medical-biobehavioral disorders (eg, asthma, migraine, Tourette syndrome, inflammatory bowel disease, warts, pruritus)</p>	<p>Self-regulation therapies and mind-body therapies</p>	<p>Teach...</p> <ul style="list-style-type: none"> • Breathing techniques • Relaxation (eg, progressive muscle relaxation) • Mental imagery • Self-hypnosis <p>Offer adjunct biofeedback.</p>
<p>Anxiety (eg, performance)</p>		

Integrate

“The mission of the American Academy of Pediatrics is to attain optimal

for all infants, children, adolescents and young adults.”





HOW CAN BEGINNINGS SC HELP CHILDREN IN YOUR PRACTICE?

9,925



Help to find the **1 in 100** children with permanent hearing loss in SC struggling in school and home

FREE hearing screenings in child care centers using OAE technology



Education support for families after confirmed hearing loss thru age 21



Referrals after failed newborn hearing screening and support enrolling into BabyNet



info@scbegin.org

803.216.1171

beginningssc.org



NEED DIAPERS? WE ARE HERE FOR YOU!

HAVE DIAPERS? WE ARE HERE FOR YOU, TOO!

One in three women in the U.S. experience diaper need, meaning, they lack a sufficient supply of diapers to keep their child clean, dry and healthy.

If, at any point, you find yourself concerned about affording enough diapers for your new baby, please consider getting in touch with one of our distribution partners who can assess your needs and may be able to provide you with diapers at no charge.

Bethel UMC • www.bethelcharleston.com • 843.723.4587 • 57 Pitt Street, Charleston
East Cooper Community Outreach • eccocharleston.org • 843.849.9220 • 1145 Six Mile Road, Mount Pleasant
Florence Crittenton • florencecrittentonsc.org • 843.722.7526 • 19 Saint Margaret Street, Charleston
HALOS • charlestonhalos.org • 843.990.9570 • 4995 Lacross Road, Suite 1250, North Charleston
Housing Authority of the City of Charleston • chacity.org • 843.720.3972 • 183 President Street, Charleston
Lowcountry C.A.R.E.S. • ourlowcountry.com • 843.553.2012 • 2427 Midland Park Road, North Charleston
Lowcountry Orphan Relief • lowcountryorphanrelief.org • 843.747.4099 • PO Box 70185, North Charleston
Lowcountry Pregnancy Center • lowcountrypregnancycenter.com • 843.553.3505 • 7481 Northside Dr., Suites B&C, N.Charleston
Ronald McDonald House Charities of Charleston • rmhcharleston.org • 843.723.7957 • 81 Gadsden Street, Charleston
Shifa Clinic • shifaclinics.com • 843.352.4580 • 1092 Johnnie Dodds Boulevard, Suite 10, Mount Pleasant
The Community Outreach Center at St. Matthews • smccharleston.org/COC • 843.723.1611 • 405 King Street, Charleston
Tricounty Family Ministries • tricountyfamilyministries.org • 843.747.1788 • 2105 Cosgrove Avenue, North Charleston
YoungLives • charleston.younglife.org • 843.564.3295 • 126 Coming Street, Charleston

Diapers are distributed at the discretion of the distribution partners to their clients and are based on current inventory.

Babies grow quickly! If you have extra diapers that your child outgrew, please consider donating them to the Junior League of Charleston Diaper Bank.

We accept unused disposable diapers of any brand or size.
Donations can be dropped off to our office at 51 Folly Road, Charleston, SC 29407
between 8:00 am - 4:00 pm Monday through Friday.

For more information about the Junior League of Charleston Diaper Bank, including current distribution partners and ways to donate or show your support, please visit our website at jlcharleston.org or email diaperbank@jlcharleston.org

**CHANGING DIAPERS,
CHANGING LIVES**

Dickerson Children's Advocacy Center, Lexington SC

- Forensic Interview
- Forensic Medical Exam
- Mental Health
- Victim Advocacy

- Crisis counseling services
- Trauma assessment
- Family/caregiver services
- Individualized and appropriate evidence-informed treatment
- Referrals as needed

3-18 years of age

Bilingual Therapist

TIRED OF WEIRDLY CRAVING **MANGOS**
EVERY TIME YOU TRY TO LIVE YOUR LIFE?



Parents and other adults
looking to help young
people quit should text:

“QUIT” to
202-899-7550





WIC has the answers to all of these questions:

- What kind of food should your children be eating?
- Where can your children get immunizations (shots)?
- How can you learn more about breastfeeding?

WIC helps:

- **Women:** Pregnant, recently pregnant, breastfeeding, or who have a new baby
- **Infants:** Newborn to age 1
- **Children:** Ages 1 to 5

WIC INCOME ELIGIBILITY GUIDELINES

Effective July 1, 2019 to June 30, 2020

FAMILY SIZE	INCOME (185% POVERTY)		
	YEARLY	MONTHLY	WEEKLY
1	\$23,107	\$1,926	\$445
2	\$31,284	\$2,607	\$602
3	\$39,461	\$3,289	\$759
4	\$47,638	\$3,970	\$917
5	\$55,815	\$4,652	\$1,074
6	\$63,992	\$5,333	\$1,231
7	\$72,169	\$6,015	\$1,388
8	\$80,346	\$6,696	\$1,546
For each additional family member add:	\$8,177	\$682	\$158

Even if you are working, you might be eligible for healthy foods and personalized nutrition information.

To apply for WIC or make an appointment, call 1-855-4-SCDHEC (1-855-472-3432).

Visit www.scdhec.gov/wic.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](http://www.ascr.usda.gov/complaint_filing_cust.html), (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture; Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov.

This institution is an equal opportunity provider.

ML-025416 5/19

wic foods

for children

These WIC Foods...

- Are low in fat and high in fiber.
- Promote a healthy weight for your child.
- Provide essential nutrients.
- Are core WIC Guideline foods.

What you will receive:

GRAINS

- 36 ounces iron-fortified cereal
- 2 pounds of whole wheat bread or other whole grain option:
 - Whole wheat tortillas
 - Soft corn tortillas
 - Brown rice
 - Whole grain bread
 - Whole wheat pasta

FRUITS & VEGETABLES

- \$8 cash value voucher
 - Fresh
 - Frozen
 - Canned
- 128 fluid ounces of vitamin C-rich juice

DAIRY

PROTEIN



or peas or
but butter for
old.





Women of every culture, age, income level and race can develop perinatal mood and anxiety disorders. Please know that with informed care you can prevent a worsening of these symptoms and can fully recover. There is no reason to continue to suffer. There are effective and well researched treatment options to help you feel like yourself again. The MUSC Women's Reproductive Behavioral Health Program offers services that are easily accessible, stigma free and confidential.

If you live in or near the Charleston area you can access our services without an appointment every Monday or Wednesday from 8am-10:30am by coming to:

MUSC Women's Health Services
135 Cannon Street, Suite 201
Charleston, SC 29403



843-792-9162
muscedu

Changing What's Possible

What Services Do We Offer?

If you are pregnant or postpartum and needing an evaluation for non-urgent mental health problems such as difficulties with mood, irritability or anxiety, please visit the MUSC Women's Reproductive Behavioral Health Program. We offer an array of treatment options, including lifestyle interventions, several types of therapy and medication, and counseling on the risks of medication. We also offer Zulresso (brexanolone), the first FDA approved medication for Postpartum Depression. Our goal is to create an individualized treatment plan that is tailored to your needs.

When and Where?

If you live far away from MUSC you can call our telehealth schedulers at 843-792-9907 to inquire about seeing us through a video-visit directly from your home or through our telehealth program from a pediatric office. Our telehealth schedulers will assist you in setting up an appointment with one of our Women's Reproductive Behavioral Health providers.

If you live in the Myrtle Beach area and would like to be seen in person at our Myrtle Beach office please call 843-792-9162.

For more information: <https://muschealth.org/medical-services/womens/pregnancy/postpartum>



843-792-9162
muscedu

Changing What's Possible

Services for Moms with Postpartum Depression

Locations:

Charleston

Myrtle Beach

If far away: Telehealth

Process:

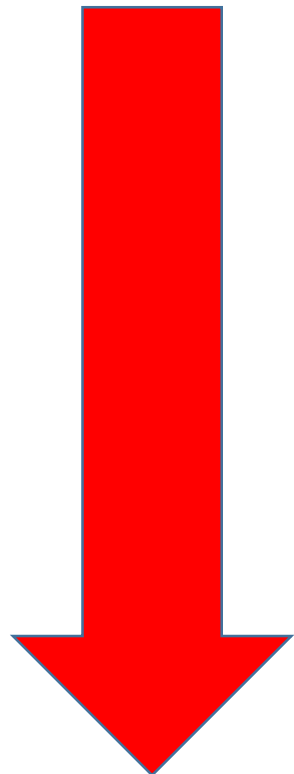
Give mom the brochure
Make a referral if you are comfortable doing that

*Referral form is on the blog





<http://charlestonscvisitors.com/attractions/2-french-quarter-attractions/1918-powder-magazine>



THE PURPOSE

To enhance the crisis services array to include a statewide community crisis on-site emergency psychiatric screening and assessment.



Program Director:
Amanda Gilchrist

CCRI Access Line:
833-DMH-CCRI
833-(364-2274)

Email: ccri@scdmh.org
www.state.sc.us/dmh/

To provide services **24/7/365** within 60 minutes of contact with the CCRI team to meet the mental health needs of residents of South Carolina.

CCRI Access Line:

833-DMH-CCRI

833-364-2274

Email: ccri@scdmh.org

www.state.sc.us/dmh/

ABOUT CCRI

We provide adults and children with clinical screening either



in person at the location of the crisis,



in person at a community mental health center,



via phone, or



Telehealth Communication Software,

in order to de-escalate the crisis and provide linkage to ongoing treatment and other resources.

HOW IT WORKS

Each call that is received via the CCRI Access Line will be directed to the appropriate triage clinician based on geographical location (region).

South Carolina Department of Mental Health



Region A: Midlands
Region B: Upstate
Region C: Pee-Dee
Region D: Coastal

PROGRAM GOALS

Provide access and link patients to appropriate levels of care and divert from unnecessary hospitalizations and incarcerations.

Build partnerships with local law enforcement, hospitals, judges, community partners, and local mental health providers.



WHEN IS IT AVAILABLE?

Each region will be phased in. The local DMH centers are available for services to the community based on their current county of residence.



School-Based Mental Health

ADDRESSING
Mental Health
CONCERNS IN
PRIMARY CARE
A CLINICIAN'S TOOLKIT

PRIMARY CARE REFERRAL AND FEEDBACK FORM

Date: _____ () Initial () Follow-up

Referring Physician Name: _____

Address: _____
(Street/PO Box) City State Zip

Fax: (_____) Phone: (_____) _____

Patient's Name: _____ DOB: _____

Parent's Name: _____ Address: _____ Phone: _____

Date(s) Patient Seen: _____

Reason(s) for Referral: _____

Any Specific Questions or Requests _____

Referring Physician's Printed Name/Signature

Thank you for evaluating this patient. To facilitate communication and treatment, please make copies of this form to retain in the patient's record; complete a form after initial assessment; complete additional forms periodically during treatment (as indicated) and when treatment is terminated; and mail or fax completed form(s) to the physician listed above. This is not a request for copies of psychotherapy notes, which require a signed consent to release. Thank you for your collaboration.

Consultant's Report

Date(s) Patient Seen: _____

Patient did not make appointment. Patient made an appointment but did not keep appointment.

Patient not seen within 60 days.

Initial Diagnoses:

1. _____

2. _____

3. _____

Recommendations: _____

Medications Prescribed: _____

Follow-up Arranged or Provided by Consultant:

Further diagnostic testing _____

Individual therapy Group therapy

Family therapy Lab tests

Medication management Return visit _____

Other Care Needed:

Medication management by PCC

Referrals recommended _____

Follow-up recommended _____

Other _____

Name (type or print) _____ Signature _____

FAX to _____ # _____ contact person _____

Add disclaimer statement per your institution here: _____

doi: 10.1542/peds.2010-0788Q

The recommendations in this publication do not indicate an exclusive course of treatment or serve as a standard of medical care. Variations being the various individual circumstances may be appropriate. Original document included as part of Addressing Mental Health Concerns in Primary Care: A Clinician's Toolkit. Copyright © 2010. American Academy of Pediatrics. All Rights Reserved. The American Academy of Pediatrics does not review or endorse any modifications made to this document and is not aware that the AAP be liable for any such changes.

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DEDICATED TO THE HEALTH OF ALL CHILDREN™



Psychiatry is still a need.

Dr. Khetpal



Partnering with Residency Programs

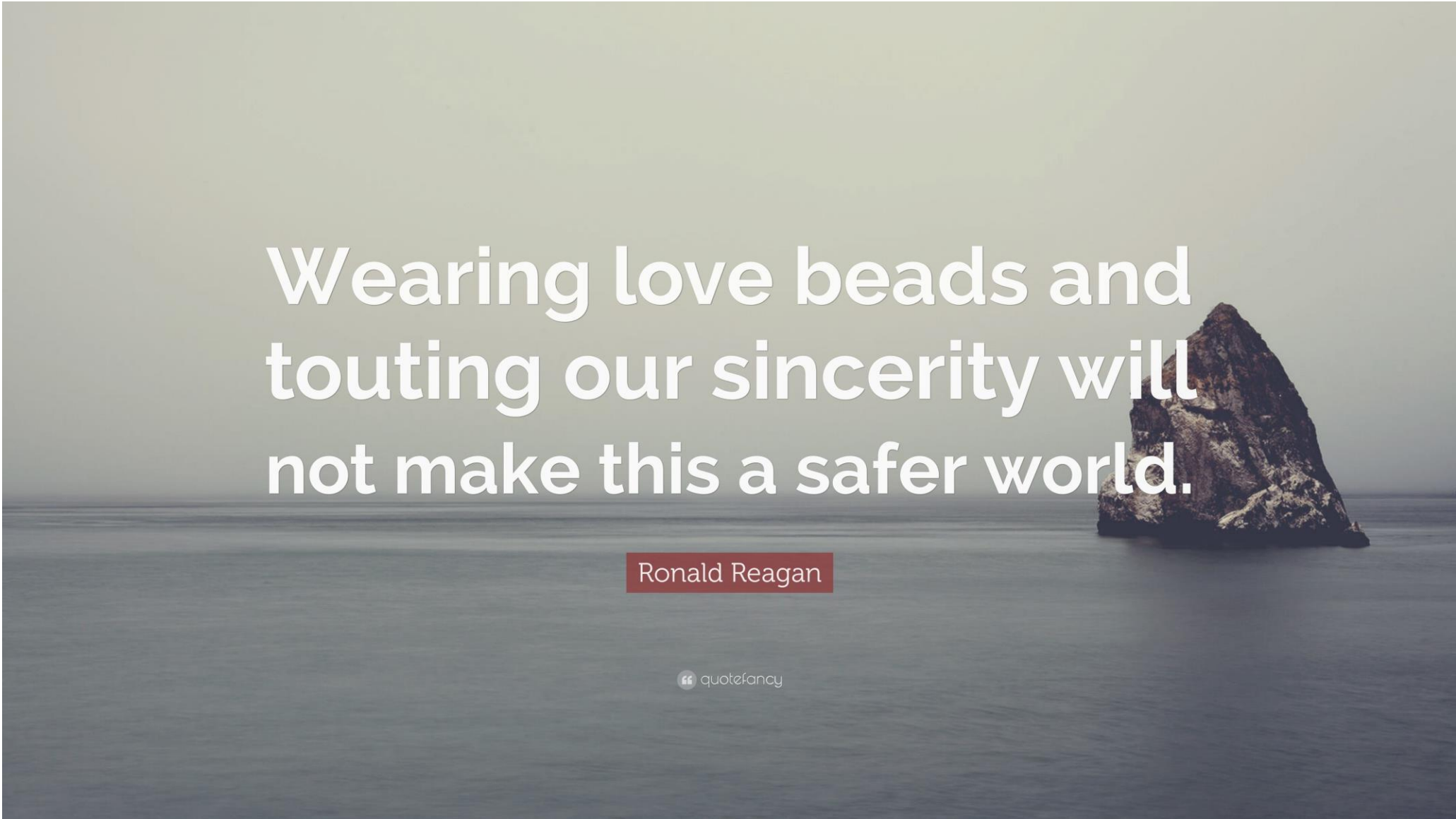
Bringing Psychiatrist into the Pediatric Practice

MUSC - Telepsychiatry

<u>Practice Name</u>
All Children's Pediatrics
BJH Comp
Charles Towne Pediatrics
Carolina Health Center
CMC Pediatrics
Georgetown Pediatrics
Inlet Pediatrics
Pawleys Pediatrics & Adult Medicine
Rice Planter Pediatrics
Riverside Pediatrics
Salerno Pediatrics
Sea Island Pediatrics Beaufort
The Children's Group
Tri County Pediatrics Rock Hill
Valcourt Pediatrics Augusta

Denotes current/former QTIP Practice





Wearing love beads and
touting our sincerity will
not make this a safer world.

Ronald Reagan

“ quote fancy

References

Achieving the Pediatric Mental Health Competencies

Cori M. Green, Jane Meschan Foy, Marian F. Earls, COMMITTEE ON PSYCHOSOCIAL ASPECTS OF CHILD AND FAMILY HEALTH, MENTAL HEALTH LEADERSHIP WORK GROUP

Pediatrics Nov 2019, 144 (5) e20192758; DOI: 10.1542/peds.2019-2758

<https://pediatrics.aappublications.org/content/144/5/e20192758>

Mental Health Competencies for Pediatric Practice

Jane Meschan Foy, Cori M. Green, Marian F. Earls, COMMITTEE ON PSYCHOSOCIAL ASPECTS OF CHILD AND FAMILY HEALTH, MENTAL HEALTH LEADERSHIP WORK GROUP

Pediatrics Nov 2019, 144 (5) e20192757; DOI: 10.1542/peds.2019-2757

<https://pediatrics.aappublications.org/content/144/5/e20192757>

Gerrity, M. (2016). Evolving models of behavioral health integration: Evidence update 2010 –2015. Retrieved from <https://www.milbank.org/publications/evolving-models-of-behavioral-health-integration-evidenceupdate-2010-2015/>
<https://www.milbank.org/publications/evolving-models-of-behavioral-health-integration-in-primary-care/>

TEXT DITCH JUUL information: <https://www.ednc.org/text-in-quit-line-for-vaping-subscribes-more-than-100-young-people-daily/>

Beginnings - where belonging begins for deaf and hard of hearing children -

beginningssc.org <https://beginningssc.org/>

Primary Care Referral and Feedback Form https://pediatrics.aappublications.org/content/125/Supplement_3/S172

Common Elements of Evidence-Base Practice Amenable to Primary Care: Indications and Sources

[https://downloads.aap.org/AAP/PDF/Mental Health Common Elements of Evidence Based Practice.pdf](https://downloads.aap.org/AAP/PDF/Mental_Health_Common_Elements_of_Evidence_Based_Practice.pdf)

Common Factors = HELP

[https://downloads.aap.org/AAP/PDF/Mnemonic for Common Factors Communication Methods Help.pdf](https://downloads.aap.org/AAP/PDF/Mnemonic_for_Common_Factors_Communication_Methods_Help.pdf)

Neil Korsen, MD, MSc, Video <https://integrationacademy.ahrq.gov/expert-insight/national-integration-academy-council-videos>

