Michigan Action Learning Network (ALN) on

PRIMARY & BEHAVIORAL HEALTH

INTEGRATION

FOR CHILDREN & FAMILIES

Practice Brief 1

August 2013

Opportunities & Challenges

Integrating primary and behavioral health care offers vast potential for better outcomes for children, youth, and their families and communities. Several Michigan children's mental health leaders are convening as an Action Learning Network (ALN) with the intent of making progress on integration by identifying priority challenges and strategic actions in a proactive fashion. The goals of this group are to:

- Connect with others who have similar interests and goals
- Share information about integration
- Identify emerging and promising strategies for action

This practice brief is the first of a series aimed at documenting the advancement of Michigan communities toward the promise of integration. We begin with highlights of the dialogue to date and close with information about upcoming practice brief topics.

Proactive Approaches to Integration

Integrated primary and behavioral health care is a new undertaking for children's mental health providers and pediatricians alike. There is high potential to better serve children, youth, and their families in more accessible and less stigmatized settings, but taking advantage of opportunities, managing change and uncertainty, and maximizing results is very challenging. Being proactive about the opportunities and challenges of integration allows us to:

- Be strategic about how integration is implemented
- Use shared understanding to shape change
- Work together in service of children, families, and our communities

What does integration mean?

Integration is a concept that can be defined in multiple ways. With a goal of improved access and quality of both primary and behavioral healthcare, the definition of integration can include:

- Embedding primary and behavioral care in one setting to achieve easier access to services and resources for families
- More effective communication of information among care providers and families
- Enhanced coordination, alignment, linkages, and relationships among care providers

The Case for Integration

Integration of primary and behavioral healthcare holds the promise of:

- Better physical and behavioral health outcomes
- Improved quality and cost-effectiveness of services and supports
- More family-centered care
- Opportunities for early behavioral health intervention

Meeting the Challenge of Integration

Building New Partnerships

Strategic action connected to integration requires building new collaborations and partnerships. As new partnerships take shape, it is important to focus on critical strategies for action:

Building shared commitment and vision among partners

- Communicate benefits of integration to stakeholders and partners
- Use data to build shared understanding among partners
- Identify incentives for partnering and collaboration

Increasing cross-system knowledge

- Facilitate information access and sharing
- Build support for cross-system learning
- Develop sense of shared accountability for outcomes

Opportunities for Shared Action

The ALN is beginning to identify opportunities for shared action to move integration forward.

Strategy 1: **Know Your Partners.** Convene pediatricians, behavioral health providers, and schools to explore opportunities and champion integration efforts.

Strategy 2: **Identify and Disseminate Models for Integrated Care.** Describe examples of successful integration ranging from co-location of services to fully integrated care delivery.

Strategy 3: **Make the Case.** Share examples of improved outcomes resulting from more family-centered, integrated care.

Strategy 4: **Use Data.** Target specific health indicators and connect physical health outcomes with behavioral health outcomes.

Strategy 5: **Support Family Voice.** Provide education for families and providers about system navigation.

Essential Partners in Integration

The partnership between pediatric care and community mental health systems is essential to building integrated care.

- Pediatricians strive to offer the best care and support at the earliest point of intervention and recognize the unique challenges of responding to the behavioral health needs of children and youth in the context of their families and communities.
- The public community mental health system brings specialized expertise in service coordination and complex care management for children and families as well as a continuum of community-based services and supports.

Across Michigan, these two partners are joining forces to create shared vision and tailored strategies for their communities that focus on the unique needs of children, youth and their families.

The Action Learning Network

Community Mental Health Centers throughout the country are sorting through the implications of health care reform. This activity has largely centered on the implication for adult consumers. The unique needs of children, youth and families, have been largely overlooked. The ANL was created to ensure that these needs are considered and addressed. The group whose conversations formed the basis for this practice brief includes leadership staff from five community mental health children's services representing Kent, Kalamazoo, Saginaw, Wayne, and Clinton/Eaton/Ingham counties as well as a Kalamazoo County pediatrician. Known as the Action Learning Network, group members are building upon the foundation of federal systems of care initiatives, which primed their communities with the values and approaches that can facilitate the complex changes inherent in health care integration. Upcoming practice briefs will highlight:

- Outcomes and analytics specific to children and families
- Opportunities to fill gaps in knowledge and practice that are essential for effective integration
- Models and best practices, beginning with guidelines for the use of psychotropic medications for children

For more information on the ALN and upcoming activities, please contact: Matt Wojack, wojack@ceicmh.org.

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About this Brief

This Practice Brief was developed by the Michigan Action Learning Network on integration of primary and behavioral healthcare for children and families with support for the Department of Child and Family Studies, University of South Florida. ALN meetings were co-facilitated by Sharon Hodges (USF), Suzanne Miel-Uken (Miel-Uken Associates), and Erin Watson (Michigan State University).