

Integrating Behavioral Health in Group Visits



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Agenda

- ▶ Getting Grounded
- ▶ Structure of Behavioral Health within Centering
- ▶ Behavioral Health components that could be integrated
- ▶ Facilitating Behavior Change
- ▶ Next steps: integration or expansion

Getting Grounded: Check In

- ▶ In the chat, please answer the following question:
 - ▶ How has your site incorporated behavioral health into Centering groups? What barriers have come up (regardless of if you've incorporated it)?

Structure:

- ▶ Behavioral Health staff:
- ▶ Social Worker, Psychologist, Behavioral Health Case Manager
- ▶ Role as Staff Facilitator OR assigned to group when difficult topics are scheduled:

Structure (Cont.)

- ▶ Behavioral Health Risk Screenings built into assessment time at beginning of group:
- ▶ ACEs
- ▶ PHQ9
- ▶ GAD7
- ▶ EPDS
- ▶ Patients track their screenings on Participant Notebook, paper flow sheet, or shadow chart
- ▶ Screening score (s) reviewed during assessment time
- ▶ Entered into patient's chart by either Staff Facilitator or MA

Behavioral Health Components

- ❖ Cultural Responsiveness/Competency
- ❖ Safer Space for discussions around trauma
- ❖ Building trust/inclusivity
- ❖ Trauma Informed Care & Approaches
 - ❖ Resilience and Strengths Based
 - ❖ Self management
 - ❖ Resource: Trauma Informed Oregon's ["Hosting a meeting using principles of trauma informed care"](#)

Behavioral Health Components (cont.)

Facilitate Difficult/Sensitive Topics:

- ▶ Interpersonal Violence
- ▶ Stress Management
- ▶ Family Relationships
- ▶ Depression/PPMD
- ▶ Attachment and Bonding

Behavioral Health Components (cont.)

What are some social determinants that affect your patients' health?

- ▶ Housing
- ▶ Income/Socioeconomic Status
- ▶ Transportation
- ▶ Education/work opportunities
- ▶ Oppression
- ▶ Culture
- ▶ Public Safety
- ▶ Social Support
- ▶ Language/Literacy
- ▶ Resources at the community level

Behavioral Health Components (cont.)

Community/Peer Support/Mutual Self-Help Building:

- ❖ Warm Handoff to Resources
- ❖ Referrals to MH Resources
- ❖ Support & affinity groups
- ❖ Usage of community health workers, peer navigators & case managers
- ❖ Linkages with Community Agencies to assist with SDOH

Facilitate Behavior Change

- ▶ Self-Management Focus
- ▶ Passive to Active Coping
- ▶ Mindfulness/meditation
- ▶ “Seeking Safety” Grounding
- ▶ SMART Goals

Next steps

- ▶ In the chat or using your voice:
 - ▶ Moving forward- is there anything you learned today you could integrate in your groups immediately? Within a year?