

# Community of Practice (CoP) Expanding Behavioral Health Services in Health Centers

Wednesday, November 5, 2025

2:00 p.m. to 3:00 p.m. ET

*Office Hours*

*3:00 p.m. to 3:30 p.m. ET*

# Disclaimer

*This webinar was produced for the Health Resources and Services Administration (HRSA), Bureau of Primary Health Care under contract number 47QRAA18D00FZ/75R60224F80097. This publication lists non-federal resources in order to provide additional information to consumers. Neither HHS nor HRSA has formally approved the non-federal resources in this manual. Listing these is not an endorsement by HHS or HRSA.*

## Session Two

The Integrated Care  
Continuum: Identifying a  
Pathway Toward Integrated  
Care and Behavioral Health  
Service Expansion

# Facilitator



**Laura Ross, MS, LMFT, CCTP, CTMH**

# Session Objectives



## **Participants of today's session will be able to:**

- Understand and differentiate between elements common to integrated care models
- Determine your health center's level of integration and align it with implementation and sustainability aims
- Incorporate integration strategies to enhance community health outcomes in a plan-do-study-act (PDSA) plan

# Today's Agenda



Check-in and Agenda Review



Integrated Care Models and the Integrated Care Continuum



Integrated Care Pathway to Improve Health Outcomes



Interactive Discussion and PDSA Planning



Session Wrap-Up, Questions, and Office Hours

# Models of Integrated Care

## Primary Care Behavioral Health (PCBH)

- Treat BH conditions in primary care settings
- Leverage BH Managers or BH Consultants

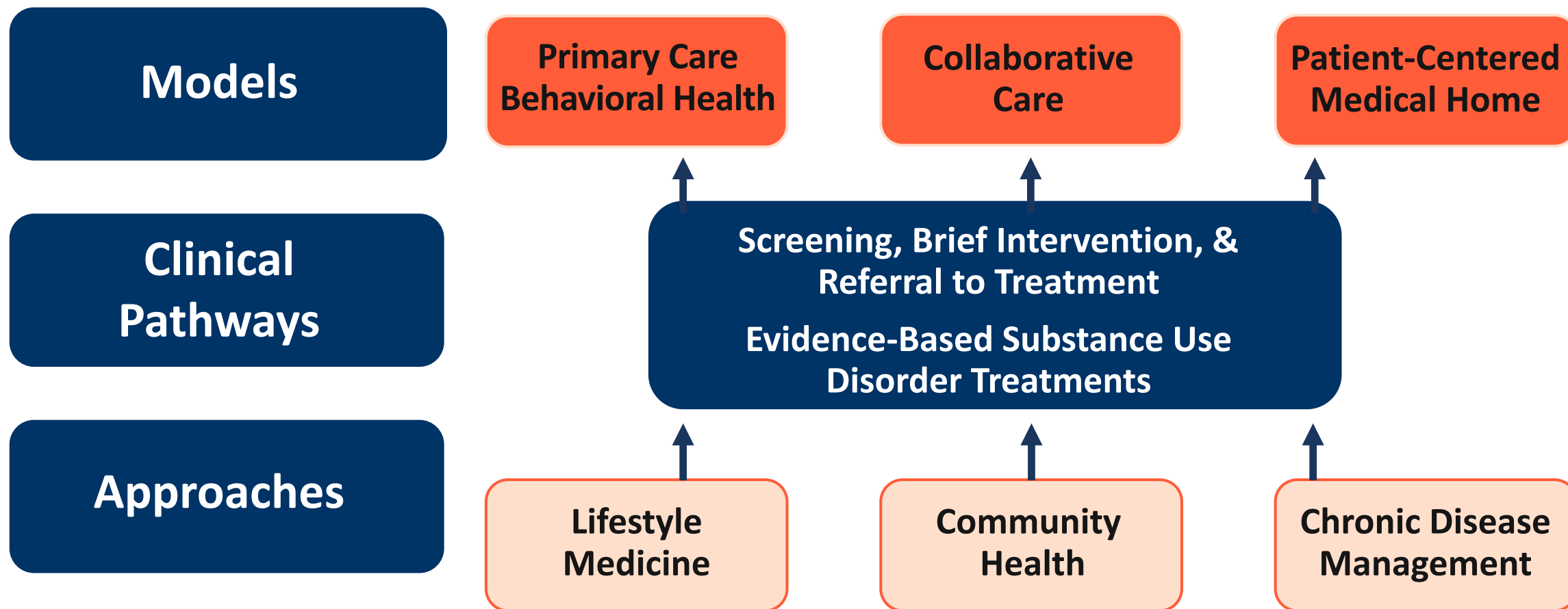
## Bi-directional Integration (CCBHC/CHC)\*

- Treat chronic physical conditions in BH settings
- Focus on serious mental illness (SMI) and addiction
- Leverage health care providers

## Blended Models

*\*Certified Community Behavioral Health Clinic/Community Health Center*

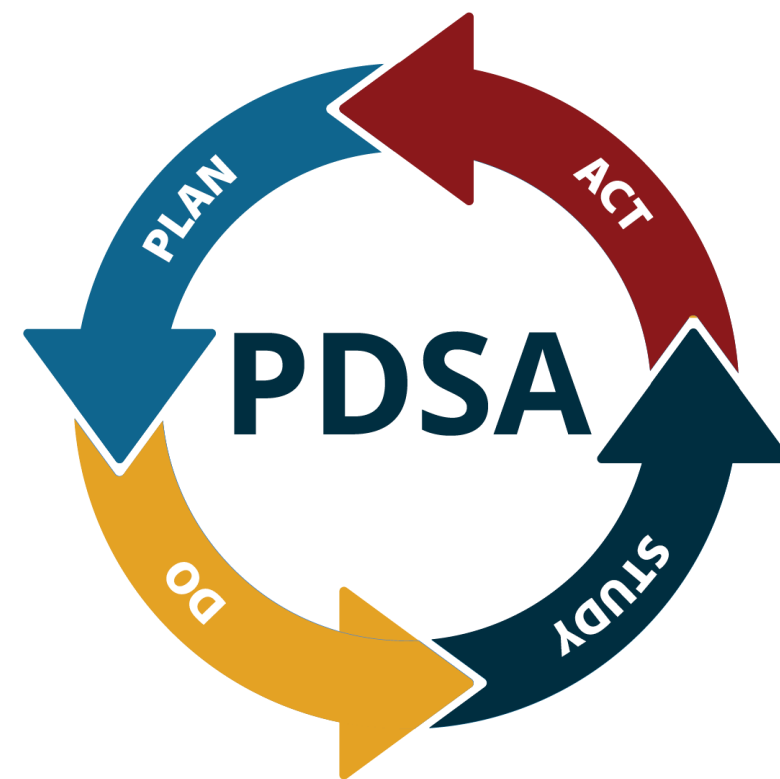
# Integrated Care Models, Pathways, and Approaches



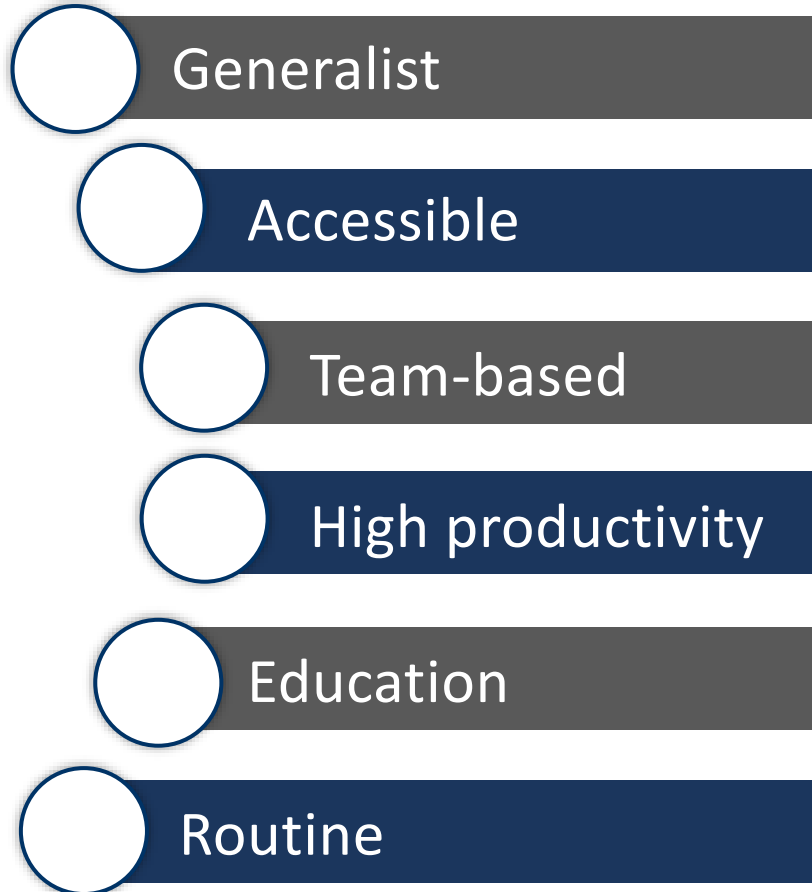


# Reflection and Assessment: Integrated Care Models (1)

- Which integrated care model most closely represents the care approach at your health center?
  1. PCBH
  2. Bi-directional (CCBHC/CHC)
  3. Blended
- What characteristics does your health center have that led you to select that model?



# Models of Integrated Care – PCBH



## The PCBH Model

The PCBH Model improves health outcomes by improving access to BH services in primary care settings.

PCBH is organized on four core principles:

1. PCBH offers team-based care.
2. The Behavioral Health Consultant (BHC) provides consults as a core member of the primary care team.
3. The BHC'S role is to identify, treat, triage, and manage behavioral components of complex medical and BH conditions.
4. PCBH is based in a philosophy of community-based care.

# Key Elements of Primary Care Behavioral Health Integration

The PCBH model is community based and includes a licensed behavioral health professional who functions as a BHC.

The BHC is a key member of the primary care team.

BH services are brief (15–30 minutes).

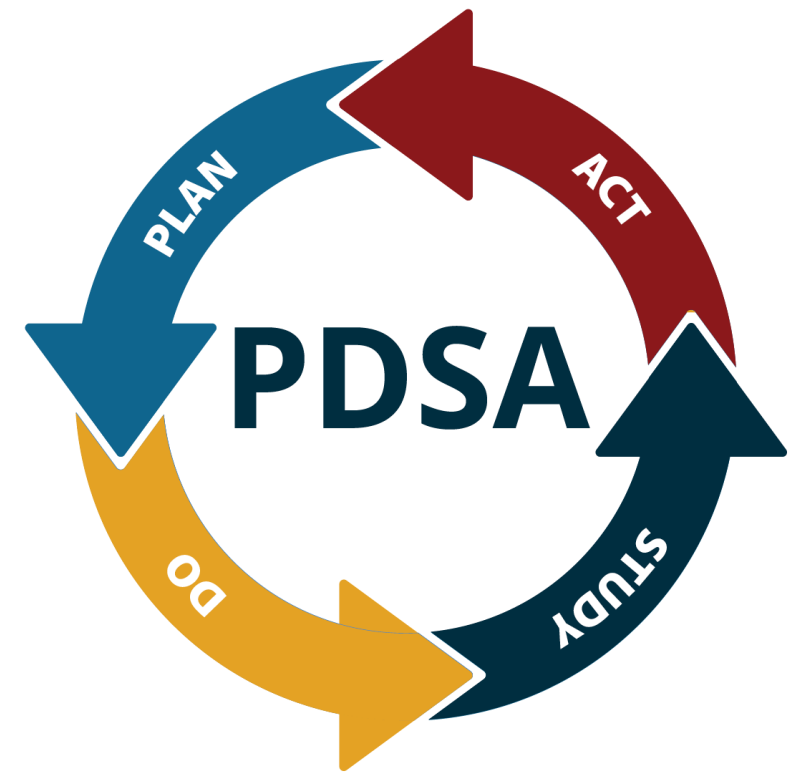
PCBH offers practice-wide prevention, early intervention (e.g., Screening, Brief Intervention, and Referral to Treatment [SBIRT]) and treatment for BH conditions.

PCBH addresses **health behaviors** impacting physical and chronic medical and behavioral health conditions.

PCBH uses patient registries and clinical pathways to organize care.

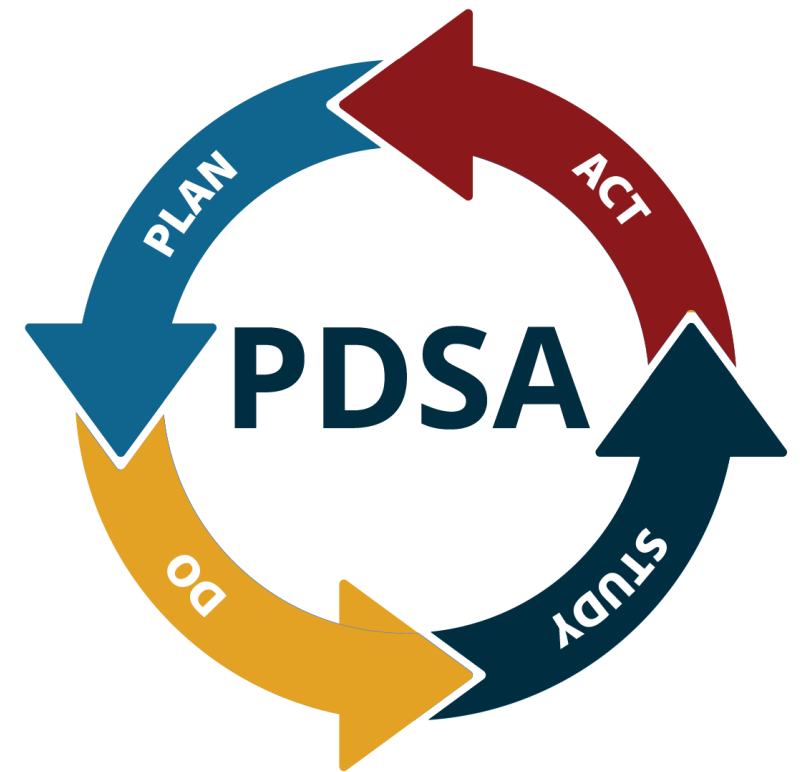
# Reflection and Assessment: Integrated Care Models (2)

- In considering the four core principles of the PCBH model:
  1. PCBH offers team-based care.
  2. BHC is a core primary care team member.
  3. BHC addresses health behaviors in addition to behavioral health conditions.
  4. PCBH is a community-based care approach.
- Which PCBH core principles does your organization do well? Describe key features.
- Which PCBH core principles are opportunities for improvement in your organization? Why?



# Reflection and Assessment: Integrated Care Models (3)

- In considering the key elements of PCBH integration:
  1. Central role of BHC as a primary care team member
  2. Brief service provision
  3. BH services provided across care continuum (e.g., prevention, early intervention, treatment)
  4. Address health behaviors impacting physical health
  5. Use of patient registries and clinical pathways to guide care
- Which PCBH core principles does your organization do well? Describe key features.
- Which PCBH core principles are opportunities for improvement in your organization? Why?



# Levels of Care Integration

## COORDINATED

Minimally Integrated

- **Key Element: Referral**
- Separate facilities and systems
- No shared Electronic Medical Record (EMR)
- Staff do not value or understand team roles
- **Referral between facilities or specialties**

## CO-LOCATED

Somewhat Integrated

- **Key Element: Physical Proximity**
- Communication as needed with varying frequency
- Occasional meetings, care coordination interactions
- Basic understanding of team roles and functions
- **Shared facilities; possible shared systems**

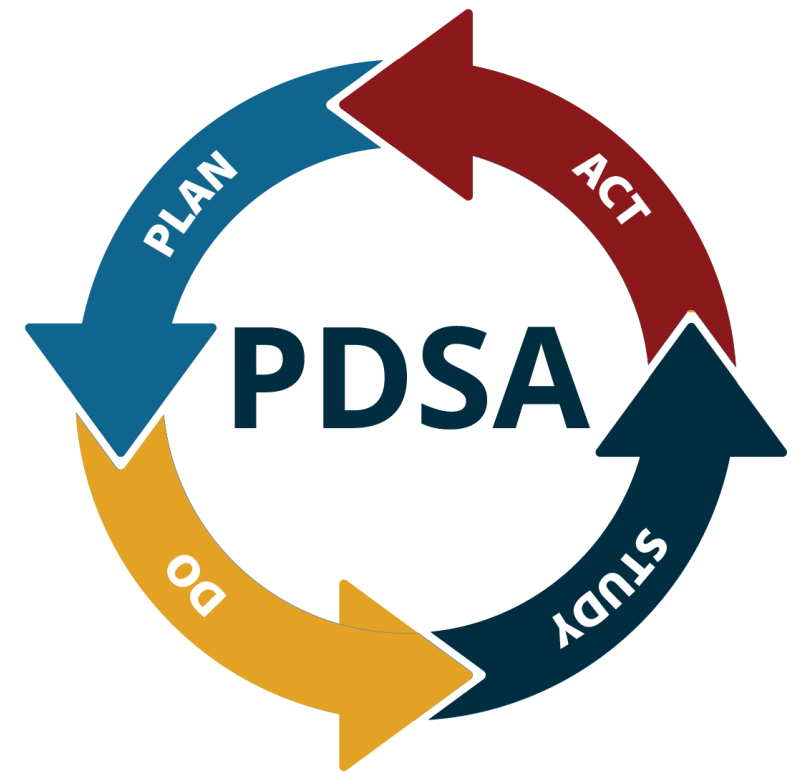
## INTEGRATED

Fully Integrated

- **Key Elements: Systems, Clinical Care, and Protocols**
- Shared facilities and systems, including EMR and referrals
- One shared treatment/care plan
- Consistent, frequent communication and collaboration
- Focus on team-based roles/care
- **Understand team roles and reliance on interdisciplinary care team coordination**

# Reflection and Assessment: Integrated Care Models (4)

- How would you characterize integrated care in your health center?
  1. Not integrated
  2. Minimally integrated
  3. Partially integrated
  4. Fully integrated
- What characteristics does your health center have that led you to select that answer?
- What one or two things would need to happen at your health center to move to a higher level of integration?



# Improving Health Outcomes

Select strategies shown to improve health outcomes in health care settings.





# Strategies for Improving Health Outcomes in Integrated Care (1)

## Improve reach and quality of care

- Hire and train staff whose backgrounds and language skills align with the community served.
- Utilize peer health workers.
- Incorporate practices that reflect your community and patients' health conditions into clinical care.
- Provide services for limited English proficiency.

## Address patients' health-related needs

- Screen patients for health-related needs and factors that influence health outcomes.
- Establish strong, formal partnerships with community partners.
- Connect patients to resources with appropriate hand-offs and follow-ups to ensure services are received.
- Collect the data!

# Strategies for Improving Health Outcomes in Integrated Care (2)

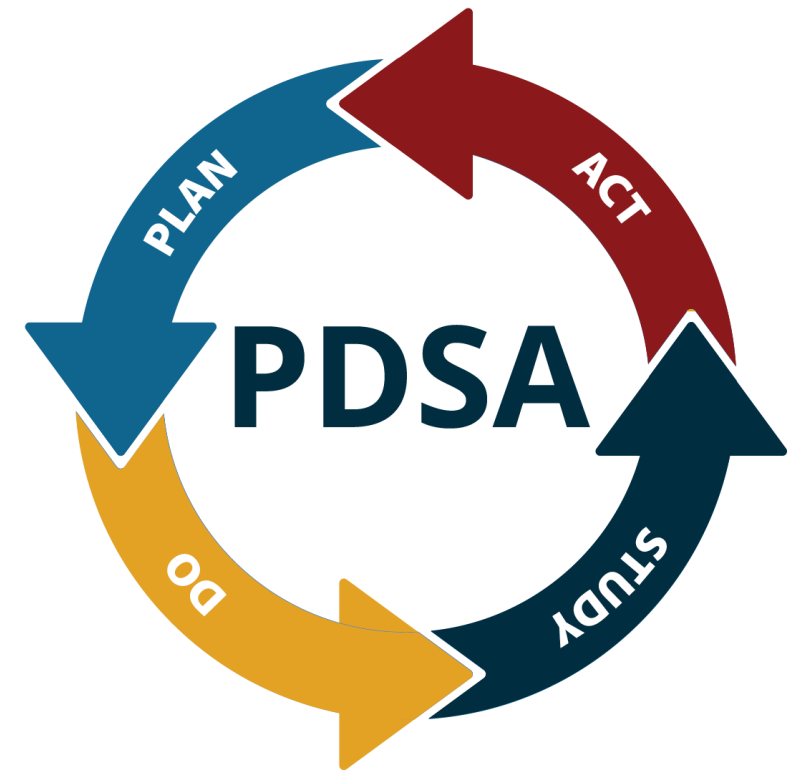
## **Adapt interventions to fit the population(s) served**

- Incorporate relevant language and community-specific examples.
- Modify interventions to address factors like family dynamics and geographic location.
- Use a version of SBIRT that considers key characteristics of your patient population.



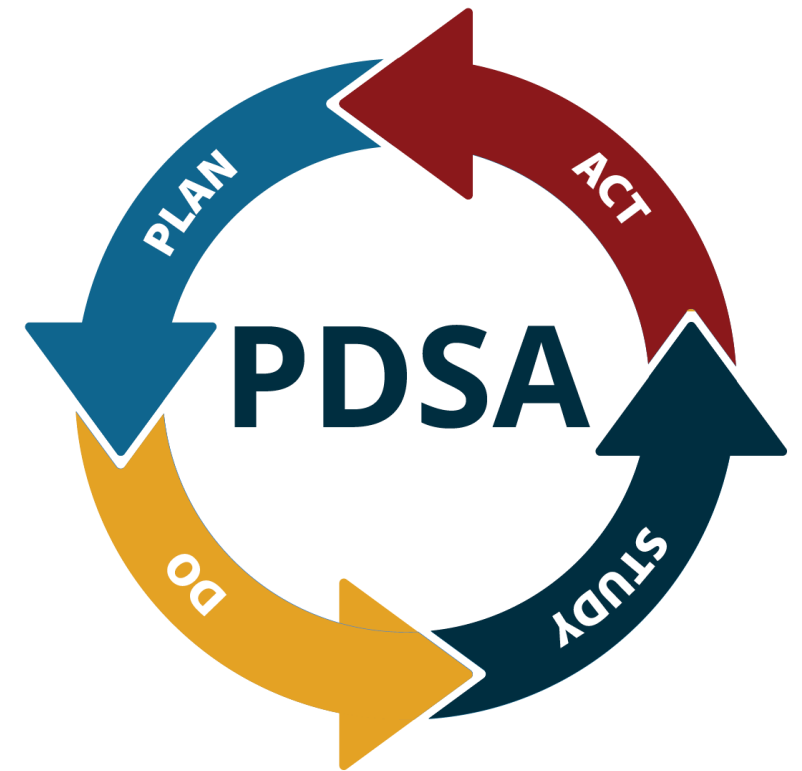
# Reflection and Assessment: Improving Health Outcomes (1)

- How consistently and comprehensively does your health center conduct health-related screening to identify factors that impact health outcomes?
- Which staff members can you leverage to support population community-based health outcome strategies by collecting data on health-related needs?
- What strategies does your health center employ to connect patients to resources to address health-related needs once identified?



# Reflection and Assessment: Improving Health Outcomes (2)

- What clinical care practices can your team adapt to reflect the patients and populations being served?
- What strategies might your health center adopt in the next two (2) weeks that would:
  - increase the reach and quality of care, and
  - strengthen relationships with internal and external resources that influence health outcomes?



# Resources

- Agency for Healthcare Research and Quality. (n.d.). *The Academy: Integrating Behavioral Health & Primary Care*. <https://integrationacademy.ahrq.gov/>
- Substance Abuse and Mental Health Services Administration (SAMHSA). (n.d.). *Evidence-Based Practices Resource Center*. <https://www.samhsa.gov/libraries/evidence-based-practices-resource-center>

# Health Center Satisfaction Assessment

**We'd love your feedback on today's session!**

Please take 2 minutes to complete the Health Center TA Satisfaction Assessment.

**You must complete the assessment to claim continuing education credit.**

**Thank you for your time!**



<https://www.surveymonkey.com/r/CoP6Session2>

# Thank you!

See you next time on  
Wednesday, November 19,  
at 2:00 p.m. ET



# Office Hours