

The Primary Care Behavioral Health (PCBH) Model

PCBH informed development of a pilot study / national study (2017-2019); Health Improvement Practitioner (HIP) services in NZ

The PCBH Approach

- Goals are to improve efficiency, effectiveness of PC
- Designed to mirror the function of PC
- Work in team-based fashion
 - Shared exam rooms, workstations, staff, chart
 - Immediate access
- Consultant model (next slide)
- Brief visits, limited follow-up
- Functional focus
- Any behaviorally-based problem, any age



Health Improvement Practitioner (HIP)

HIP & GATHER

Generalist

Accessible

Team-based

High Productivity

Educator

Routine care component

PCBH Outcomes - United States

■ Clinical Outcomes

- 70% of patients receiving 2-4 visits show broad improvement in symptoms, functioning, well-being
- Effective for both mild and severe presentations
 - More severely impaired may improve faster¹⁻⁸
- Changes are robust and stable at 2 years⁵
- Patients report stronger connection to the BHC than to traditional, specialty therapists⁶

PCBH Outcomes – United States

- **Systems Outcomes**

- Large reductions in specialty mental health referral rate^{9,10}
- Improved adherence to evidence-based guidelines¹⁰
- More appropriate antidepressant prescribing^{9, 10}
- Improved PCP willingness to engage with behavioral issues^{9, 11}
- Improved detection (and treatment) of suicidal ideation¹²
- High patient and PCP satisfaction^{9, 11, 13}
- More appropriate utilization of PCP^{4, 11}
- Improved prevention (completion of anticipatory guidance in well-child checks)¹⁴

PCBH Outcomes – New Zealand

- Significantly improved equity of access across Māori, Pacific, Asian and European populations with no significant difference between rates of conversion of referral to appointments across ethnicities
- 74% of Māori clients report improved wellbeing (compared to 72% European, 74% Asian, 71% overall)
- 95% satisfaction rating from over 3,000 client surveys
- Reduction in prescribing of medication in favour of a 'skills before pills' approach

Health Improvement Practitioner

- Promote a population-based care approach to improving health in our clinics and communities
- Is a friendly and helpful member of the general practice team
- Adds efficiency and quality

The family is a focus in all HIP visits.



“Strong families provide a context for flourishing”

HIP Services for Families

- Preventive
 - Care standard at family transitions (pregnancy, birth, death of loved one)
- Acute
 - Parent-child relationship problem, loved one with SA problem, marital conflict, interpersonal violence
- Chronic
 - Families with medically ill member; families with toxic stress

HIP Tool Box for family Health

☐ Contextual Interview

- Always ask about family
- Notice: Is patient connected at a values level when talking about family?

☐ Conceptualize role of family in patient's health

- Ask follow-up questions as needed
- Identify resources beyond immediate family
 - Community (Big Sister, Big Brother)
 - School programs
 - Extended family



HIP Tool Box for family Health

☐ Intervene to strengthen family health

- Build parent-child, parent-parent relationships
- Build family skills (family meetings, family communication skills)



HIP Tool Box for Family Health

☐ Intervene to strengthen family health

- Use the opportunities provided by the PCBH approach (e.g., see parents in need of up-skilling on same-day of medical visits and use the parenting 4-skills protocol)
- Make HIP involvement routine for most vulnerable families
- Teach evidence-based intervention to building caring (e.g., Caring Days, problem-solving for couples)

☐ Programmatic interventions to strengthen family health

- Parenting Workshops
- Workshops for transitions (start of school, middle school, preparing for the senior year, birth of first child and lifestyle adjustments)
- Routinely offer groups for parents of children with special needs

HIP Tool Box for Family Health

Programmatic interventions to strengthen family health

- Super Club (mindful shopping, food prep, meal conversations, clean-up)
- Friends, Food, and Fun Workshop
- Marital Check-up
- How about a “Family Check-up”!

Promote family health

- Give brief talks about family health at provider and nursing meetings
- Notify team of new family health resources in community
- Co-teach family health basics workshops with a team member
- At the clinic health fair, pass out a handout about family health and resources at the clinic and in the community

HIPs in New Zealand Helping Children, Teens, and Families

William Teleaga, HIP

Porirua Union

Andy Creighton

HIP and HIP trainer

Hora Te Pai

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