



***SAMHSA-HRSA  
Center for Integrated  
Health Solutions***

**Project Management:  
Recruitment & Retention  
Workflows**

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**Slides for today's webinar are  
available on the CIHS website at:**

<http://www.integration.samhsa.gov/pbhci-learning-community/webinars>

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## The Purpose of Our Time Together

### Learning Objectives:

- Engage Consumers & Staff in Your Whole Health Integration Efforts
- Clarify Enrollment Targets Over the Term of the Grant
- Engaging Staff & Consumers in Strategies to Keep Consumers Engaged/Accessing Services
- Designing Workflows to Ensure Easy Quick Access to Primary Care & Wellness Services

## Our format...



### Structure

Short comments from experts  
Specifics from their point of view

### Polling You

Every 20 minutes  
Finding the “temperature” of the group

### Asking Questions

Watching for your written questions  
Questions by phone

### Follow-up and Evaluation

Ask for what YOU want or expect  
Ideas and examples added to the Resource Center

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## **By Now You have Developed a PBHCI Grant Project Plan**

*Remember this is your primary mechanism for bridging the organization's vision & strategic plan to the grant award requirements.*

### **Common Project Management Plan Areas:**

- Communication
- Staffing/Human Resources
- Billing/Financing/Sustainability
- QI, Data Reporting, & Use
- Health Information Technology
- Network Engagement

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COMMUNITY RECOVERY CENTER  
Mental Health, Making Connections



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## **Target Enrollment & Other Grant Requirements**

**Annual Consumer Enrollment:**

**Four Year Total Enrollment:**

**Wellness Programming Defined as:**

**NOMS, IPP & H indicators including:**

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## Engaging Consumers...

It's not enough to enroll people...they need to come back for reassessment

It's not enough to reassess people...they need to be engaged in changing their health behaviors

Being able to assess for and engage a consumer in their commitment and ability to follow through on health behavior change is at the core of your success

## Engaging Staff...

It's not enough that staff understand/agree that whole health/PBHCI is important; they need to know *what to do differently, do the same and/or stop doing* as it relates to doing PBHCI in their daily work

It's not enough that staff know what to do/not do but that they see regularly the evidence that they are/are not doing it

Being able to assess for and engage staff in their commitment and ability to follow through on these work behavior changes is at the core of your success

## This is a BIG DEAL...

For most agencies (both CMHC & CHC/  
FQHCs) PBHCI requires rebranding...

*Meaning that the patients and staff both must  
change their fundamental understanding/  
mental model of the services purpose &  
array!*

## Engaging Consumers & Staff

Identify Target Populations including Health Disparity  
Populations (FYI your DIS is due December 1<sup>st</sup>)

Develop your enrollment workflow that includes both the  
customer and staff experience of enrollment into the  
grant

Workflow should include the Data, Dollars, & Time

## Workflow Mapping Process

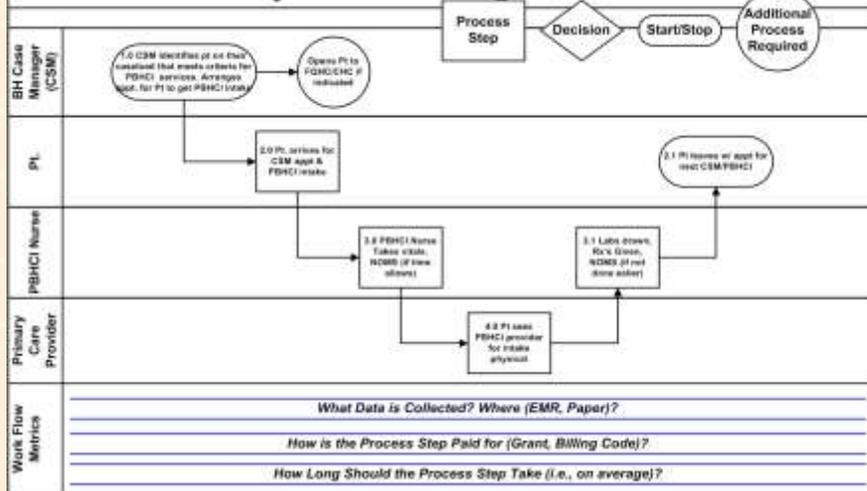
Bring together PBHCI team members & champions from other departments/agencies (inc. IT, finance, admin.).

Have grant requirements, billing codes, paper forms/EMR fields for completion, relevant policy/procedures, etc. at the ready for review.

Flow the process on overhead screen or white board taking into consideration the patient's perspective.

Walk through the intake process making it as patient friendly as possible! It's about targeting/calibrating the marketing procedures to the patient's level of engagement.

### XYZ CMHC: Pt. Entry into PBHCI Program



XYZ CMHC: Pt. Entry into PBHCI Program				
Step #	Role	Process Step Details	Forms, Report, Time, Cost, Revenue:	Notes (e.g., resources needed, work plan link, f/u needed, parking lot issues etc.):
1	<b>Case Manager (CSM)</b>	1.0 CSM completes: NOMS, New PBHCI form  Walks pt to PBHCI clinic  For first appt CSM stays with client  Provides f/u contact inc. reminder for next appt  Adds PBHCI services to Tx Plan	<b>FORMS:</b> <ul style="list-style-type: none"> <li>NOMS</li> <li>New Pt Intake to PBHCI Program</li> </ul> <b>DASHBOARD REPORT:</b> <ul style="list-style-type: none"> <li>PBHCI Team Report</li> <li>Monthly CSM Team Report</li> </ul> <b>TIME:</b> 30min <b>COST:</b> <b>REVENUE:</b>	All CSM's need training in Physical Health  Need to develop CSM report that CSM team leads will monitor  Must make New Pt Intake to PBHCI Form quick/simple nonduplicative
2	<b>Nurse</b>		<b>FORMS:</b> <b>DASHBOARD REPORT:</b> <b>TIME:</b> 10mins <b>COST:</b> <b>REVENUE:</b>	
3	<b>Patient</b>		<b>FORMS:</b> <b>DASHBOARD REPORT:</b> <b>TIME:</b> (whole process time) <b>COST:</b> N/A <b>REVENUE:</b> Copay?	
4	<b>Primary Care Provider (PCP)</b>		<b>FORMS:</b> <b>DASHBOARD REPORT:</b> <b>TIME:</b> <b>COST:</b> <b>EXPENSE:</b>	
<b>TOTAL ROCESS TIME:</b> <b>TOTAL EXPENSES/COST:</b> <b>TOTAL REVENUE:</b> <b>PROCESS PROFIT/LOSS:</b>				

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## Polling question: Have you mapped/work flowed the PBHCI intake process?

Yes

No

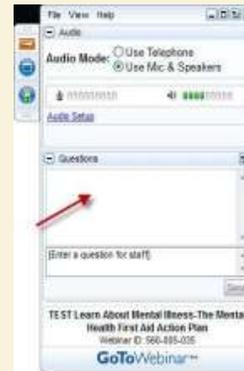
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## How to ask a question during the webinar



By phone: Please use the “raise your hand” button and we will open up your lines for you to ask your question to the group. (left)



By chat box: Please type your questions into the question box and we will address your questions. (right)

## For More Information...

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Questions? SAMHSA-HRSA Center for  
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**Thank you for joining us today.**

**Please take a moment to provide your  
feedback by completing the survey at  
the end of today's webinar.**

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