

**SAMPLE of Integration Standards/Recommendations**

<b>Function</b>	<b>Basic Collaboration from A Distance</b>	<b>Basic Collaboration On-Site</b>	<b>Close Collaboration/Partially Integrated</b>	<b>Fully Integrated</b>
<b>Clinical Services</b>	<p>(1) Evidence Based Practice is unique to each site, with no sharing</p> <p>(2) Quadrant Model is not even known or used or known by BH system is not shared with Primary Care</p> <p>(3) Quadrant 2 &amp; 4 seen mostly in the Primary Care system</p>	<p>(8) Evidence based practices in use at individual sites, but generally not sharing them across systems</p> <p>(9) A psychiatrist is on site with a PCP, however, practices separately from the PCP in all four Quadrants.</p> <ul style="list-style-type: none"> <li>• PCP refers consumers to the psychiatrists who sees the patient and takes over the prescribing of anti-depressants and/or anti-psychotics</li> <li>• Psychiatrist maintains the caseload of consumers for psychotropic medications</li> <li>• Separate treatment plans for all quadrants, but may be shared</li> </ul> <p>(3) Quadrants 2 &amp; 4</p> <ul style="list-style-type: none"> <li>• Usually served in separate BH facility with primary care provided on site at BH facilities</li> </ul>	<p>(1) An evidence based or promising practice model is chosen as the basis for services, but can be modified for additional diagnoses*</p> <p>(2) Quadrants 1 &amp; 3</p> <ul style="list-style-type: none"> <li>• Psychiatrist is consulting on medications as needed</li> <li>• Primary Care Physician is prescribing medications</li> <li>• Behavioral Health Staff are available for consults and/or short term, solution focused work with consumers</li> <li>• Single treatment plan for consumers</li> <li>• Behavioral Health Services are available at primary care sites</li> </ul> <p>(3) Quadrants 2 &amp; 4</p> <ul style="list-style-type: none"> <li>• Psychiatrist may prescribe initially with plans to transfer to PCP</li> <li>• Physical health care needs are addressed in treatment plan</li> <li>• Disease Management Options are available for population</li> </ul>	<p>(1) Multiple evidence based practices in use for services where they exist</p> <p>(2) Medical Home at either primary care clinic and/or BH clinic for all quadrants where all services can be received in one visit</p> <p>(3) Single treatment plan for all quadrants; Care provided at site of consumers choice</p>

	<p>(4) Paper documentation is shared when releases are signed; Little case consultation; communicate on paper</p> <p>(5) Referrals – generally suggested that consumer see the other person; little follow</p> <p>(6) Training separate</p> <p>(7) Data Collection is separate and may not even know the other exists</p>	<p>(4) Documentation is separate charts but generally share between organizations with a release of information and/or separate section for BH in medical record with copies from other agency and vice versa; some calls or hall conversations</p> <p>(5) Referrals well coordinated, but not the less a referral for each others services</p> <p>(6) Training generally is separate with invitations to others to participate</p> <p>(7) Data Collection is separate and may be shared in aggregate.</p>	<ul style="list-style-type: none"> <li>• Two treatment plans may exist but are shared</li> <li>• Primary care services are available at BH site(s)</li> </ul> <p>(4) Documentation</p> <ul style="list-style-type: none"> <li>• Services are documented in each organization's chart</li> </ul> <p>(5) Referrals</p> <ul style="list-style-type: none"> <li>• Warm handoff process based on consumer needs</li> </ul> <p>(6) Training</p> <ul style="list-style-type: none"> <li>• A process for joint medical education is developed and implemented</li> </ul> <p>(7) Data Collection</p> <ul style="list-style-type: none"> <li>• The program is collecting the minimum data set defined by the state for such programs**</li> </ul>	<p>(4) Integrated mental health and primary care records, preferably electronic</p> <p>(5) Referrals within clinic are automatic and not thought of as referrals; external referral processes well developed</p> <p>(6) Training is fully integrated for all prescribers</p> <p>(7) Data Collection includes outcomes measures, tracking and trending for all consumers***</p>
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