Atlas of Integrated Behavioral Health Care Quality Measures

IBHC Measures Atlas
The Problem

Finding quality measures to assess the degree to which your organization is providing Integrated Behavioral Health Care

Purpose

Integrated behavioral health care is an emerging field with the potential to improve health outcomes for patients and health care delivery within practices. Integrated behavioral health care can systematically enhance a primary care practice’s ability to effectively address behavioral health issues that naturally emerge in the primary care, prevent fragmentation between behavioral health and medical care, and create effective relationships with mental health specialists outside the primary care setting.

As greater numbers of primary care practices and health systems begin to design and implement integrated behavioral health services, there is a growing need for quality measures that are rigorous and appropriate to the specific characteristics of different approaches to integration.

The Atlas of Integrated Behavioral Health Care Quality Measures (the IBHC Measures Atlas) aims to support the field of integrated behavioral health care measurement by:

1. Presenting a framework for understanding measurement of integrated care;
2. Providing a list of existing measures relevant to integrated behavioral health care; and
3. Organizing the measures by the framework and by user goals to facilitate selection of measures.

Intended Audience

The IBHC Measures Atlas was developed for practices and teams that wish to understand if they are providing high-quality integrated behavioral health care or are preparing to implement integrated care. Individuals in clinical, administrative, accounting, policy, or patient advocacy roles may find this concept and measures of interest in the IBHC Measures Atlas.
Development of the IBHC Measures Atlas

Lexicon

Framework

IBHC Atlas
The Integration Framework

Integrated behavioral health care is patient-centered care as a result of a team of primary care and behavioral health clinicians, working together with patients and families, using a systematic and cost-effective approach to provide patient-centered care for a defined population. This care may address mental health and substance abuse conditions, health behaviors (including their contributions to chronic medical illnesses), life stressors and crises, stress-related physical symptoms, and ineffective patterns of health care utilization.

<table>
<thead>
<tr>
<th>Functional Domains</th>
<th>Measurement Constructs</th>
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<tbody>
<tr>
<td>Functional Domains divide and organize the Integration Framework into functions or actions.</td>
<td>Measurement Constructs describe specific characteristics (i.e., structures), actions (i.e., processes), and outcomes that can be observed during Integrated Behavioral Health Care.</td>
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1. **Care Team Expertise**
   - The team is tailored to the needs of particular patients and populations—with a suitable range of expertise and roles.
   - Structure:
     - Health care professionals with a range of expertise and roles are available and can be tailored into a team to meet the needs of specific patients and populations.
   - Process:
     - Conduct an individualized needs assessment for a specific patient and family.
     - Develop a unified care plan that builds a team—with necessary members and functions—to care for a given patient.
     - Train the care team to function in collaborative practice and respond as a team to an individual patient’s unique needs.
     - If desired, select a subpopulation of clinic patients with similar needs, such as geriatric care, children with special needs, or chronic illnesses and make available a range of team expertise generally needed to care for the selected subpopulation.

2. **Clinical Workflow**
   - The team uses shared operations, workflows, and protocols to facilitate collaboration.
   - Structure:
     - Clinical protocols and workflows are clearly documented. This implies that the protocols and workflows specify:
       - the roles, functions, and activities of all team members within the shared workflows;
       - the types of information that need to be shared; and
       - the standard way to manage the addition of team members, transitions (or “handoffs”).
   - Process:
     - Consistently implement specific shared workflows rather than informal processes.
     - Collaborate toward shared goals using shared workflows.
     - Maximize team roles so that team members can do the highest-level tasks permitted by their credentials and licenses.
Methodology of Selecting Measures

Project Team

Environmental Scan

Review Measures

Map Measures to Framework

Usability & Usefulness Check

Measure Selection

Expert Panel
The IBHC Measures Atlas: Measures
To access the IBHC Measures Atlas go to:

http://integrationacademy.ahrq.gov/atlas