

OVERCOMING OBSTACLES WEBINAR SERIES

# Sustaining behavioral health care in your practice

PART OF THE

AMA  | *STEPSforward*  
Innovation Academy

Presented by

**BHI Collaborative**

# Behavioral Health Screening as a Part of Ongoing Care

Behavioral health screening tools are just one of the many mechanisms that care teams can use to help assess, monitor, and engage patients regarding their mental health needs. In this pre-recorded webinar, experts will address physician concerns regarding screening pitfalls and practice readiness through the use of case study examples in the pediatric, OB/GYN and geriatric patient populations. Physician experts will share tips and best practices on which tools to use, when to use them in existing care workflows, and at what frequency, as well as how to communicate and engage patients before and after a screening takes place.



# Disclaimer

This content is provided for informational purposes only, is believed to be current and accurate at the time of posting, and is not intended as, and should not be construed to be, legal, financial, medical, or consulting advice. Physicians and other qualified health care practitioners should exercise their professional judgment in connection with the provision of services and should seek legal advice regarding any legal questions. References and links to third parties do not constitute an endorsement or warranty by the AMA and AMA hereby disclaims all express and implied warranties of any kind.

# About the BHI Collaborative

- The BHI Collaborative was established by several of the nation's leading physician organizations\*\* to catalyze effective and sustainable integration of behavioral and mental health care into physician practices.
- With an initial focus on primary care, the Collaborative is committed to ensuring a professionally satisfying, sustainable physician practice experience and will act as a trusted partner to help them overcome the obstacles that stand in the way of meeting their patients' mental and behavioral health needs.

*\*\*American Academy of Child & Adolescent Psychiatry, American Academy of Family Physicians, American Academy of Pediatrics, American College of Obstetricians and Gynecologists, American College of Physicians, American Medical Association, American Osteopathic Association, and the American Psychiatric Association.*

# Meet Your Presenters

## David Baron, MEd, DO, DLFAP, DFACN, DFACP

Professor of Psychiatry, Western University of Health Sciences



## Michelle Curtin, DO FAAP (she/her/hers)

Associate Professor of Pediatrics, Wake Forest School of Medicine



## Tiffany A. Moore Simas, MD, MPH, MEd, FACOG

Donna M and Robert J. Manning Chair of the Dept. of Obstetrics & Gynecology, and Professor of OB/GYN, Pediatrics, Psychiatry and Population & Quantitative Health Sciences at UMass Chan School/UMass Memorial Health



# Speaker Disclosures

- Dr. David Baron has no disclosures.
- Dr. Michelle Curtin has no disclosures.
- Dr. Tiffany Moore Simas has the following disclosures:
  - Obstetric Engagement Liaison, MCPAP for Moms
  - Obstetric Director, Lifeline for Moms
  - Co-Chair, ACOG Maternal Mental Health Expert Work Group (authors Clinical Practice Guidelines)
  - Member & Author, Alliance on Innovation Maternal health (AIM), PMH Conditions Pt Safety Bundle
  - Lead Faculty, IHI Perinatal Mental Health Conditions Pt Safety Bundle Change Package
  - Funding via CDC, NIMH, PCORI, Perigee, ACOG for PMH-related research and resource development including toolkit, e-modules and implementation guide available through ACOG
  - Speaker, Miller Medical Communications, CME ref PMH

# Learning Objectives

Upon completion of this activity, we expect that participants will be able to:

- 1. Describe the strengths and shortcomings of behavioral health screenings.*
- 2. Identify when and how to introduce a behavioral health screening to their patient.*
- 3. Find appropriate behavioral health screening tools for patient based on factors such as age, ethnicity, language, etc.*

# Screening Tools Overview





# Considerations: BH Screening Tools

## Strengths

- ✓ Conversation opener
- ✓ Allows for the additional collection of data to make informed decisions regarding patient care
- ✓ Provides a pathway for initial assessment, diagnosis, treatment, and follow-up
- ✓ Decreases stigma and normalizes mental health as health.

## Shortcomings

- ✓ No single tool is validated in all ages, ethnicities, etc.
- ✓ Does not provide the whole picture of the patient
- ✓ Is one of many available mechanisms for assessment, but does not directly constitute a diagnosis
- ✓ A negative screen does not eliminate clinician concern or chief complaint.

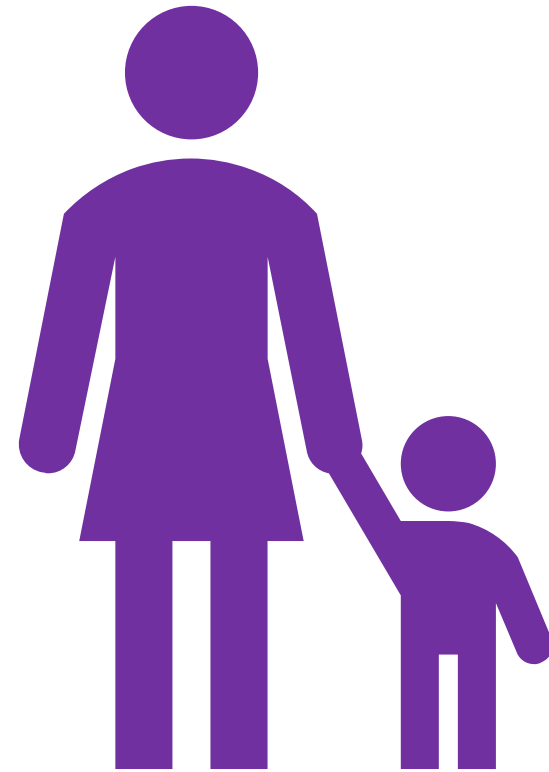
# CASE STUDIES



# Case Study #1: Child/Caregiver Scenario

Caroline is an 8-year-old girl exhibiting concerning behavior at home and at school. She is throwing tantrums at home and is refusing to speak at school. Her pregnant mother, Theresa, brings her in for a check-up with her pediatrician, Dr. Smith.

As the appointment begins, Dr. Smith notices that not only is Caroline exhibiting signs of anxiety, but her mother Theresa appears to be detached and possibly depressed.



# Key Considerations for Caroline

## Child

- ✓ Tantrums after 48 months of age can be a mental health symptom
- ✓ Not talking in some environments likewise suggests a concern may be present
- ✓ Children respond to parent mental health status and social changes in the home through “behavior”
- ✓ Children ages 8 years and older are recommended for anxiety screening annually by the US Preventive Services Task Force. Good screening tools for anxiety exist in this age group with both caregiver and self-report tools available.
- ✓ Caroline’s symptoms may not be due to her own anxiety in her current setting, even with a positive screen from the mother and/or Caroline herself.

# Key Considerations for Theresa

## Caregiver

- ✓ Upwards of 1 in 5 pregnant and postpartum individuals experience a mental health condition.
- ✓ Significant impacts for perinatal individual, offspring, and other supports/family members (including existing child).
- ✓ Assessment/diagnosis similar to outside of pregnancy. Therapy is the first line of treatment.
- ✓ Pharmacotherapy discussions need to balance risk of untreated dz vs. treatments.
- ✓ Perinatal mental health conditions are leading overall and preventable cause of maternal mortality.

# Case Study #2: Older Adult Scenario

Tony is a recently widowed, 65-year-old man. He comes in to see his longtime family physician, Dr. Young, at the urging of his adult children. He has not seen Dr. Young since retiring and the passing of his wife of 40 years.

During the appointment, Tony cites a lack of energy and motivation, unsteady when walking, and a loss of 15 lbs. He reports occasionally feeling lightheaded during the day, and that the symptoms have gradually increased over the last year. Upon physical examination, Dr. Young confirms the 15 lb. weight loss, loss of muscle mass, and physical signs of dehydration and balance issues.

Tony currently lives alone since the death of his wife 1 year ago and was force into retirement just over a year ago. He has few friends and social supports, and notes that his fixed income barely covers the cost of his meds and housing.

# Key Considerations for Tony

## Older Adult

- ✓ Be respectful and non-judgmental
- ✓ Avoid assumptions
- ✓ Keep your patient at ease, with the focus on quality of life.

# Key Takeaways

1. Behavioral health screening is only one piece of the puzzle and should be utilized as a conversation opener between the physician and patient.
2. Screening tools allow physicians to collect additional data as part of making a well-informed decision regarding next steps in diagnosis, treatment and patient follow-up.
3. Prior to starting screening, develop a plan for screening implementation that includes distribution, scoring, documentation, and responding to a positive screen, such as identifying local mental health crisis centers for emergency cases.



# Additional Resources



# Pediatric Screening Resources

- Zero to Three: <https://www.zerotothree.org/>
- National Network of Child Psychiatry Access Programs: <https://www.nncpap.org/>
  - State program map: <https://www.nncpap.org/map>
- American Academy of Pediatrics' Screening Technical Assistance and Resource (STAR) Center: <https://www.aap.org/en/patient-care/screening-technical-assistance-and-resource-center/>
- American Academy of Pediatrics' Mental Health Practice Tools & Resources: <https://www.aap.org/en/patient-care/mental-health-initiatives/mental-health-practice-tools-and-resources/>
- Project TEACH Child Clinical Rating Scales: <https://projectteachny.org/child-rating-scales/>

# Pediatric Screening Resources *(Cont.)*

- Guidelines for Adolescent Depression in Primary Care (GLAD-PC) Toolkit: <http://www.gladpc.org/>
- Guidelines for Adolescent Depression in Primary Care (GLAD-PC): Part I. Practice Preparation, Identification, Assessment and Initial Management: <https://publications.aap.org/pediatrics/article/141/3/e20174081/37626/Guidelines-for-Adolescent-Depression-in-Primary?autologincheck=redirected>
- Guidelines for Adolescent Depression in Primary Care (GLAD-PC): Part II. Treatment and Ongoing Management: <https://publications.aap.org/pediatrics/article/141/3/e20174082/37654/Guidelines-for-Adolescent-Depression-in-Primary?autologincheck=redirected>
- Promoting Optimal Development-Screening for Behavioral and Emotional Problems: <https://publications.aap.org/pediatrics/article/135/2/384/33387/Promoting-Optimal-Development-Screening-for>

# OB/GYN Screening Resources

- Screening and diagnosis of mental health conditions during pregnancy and postpartum. Clinical Practice Guideline No. 4. American College of Obstetricians and Gynecologists. *Obstet Gynecol* 2023; 141: 1232– 61. doi: 10.1097/AOG.00000000000005200.
  - *Evidence review of perinatal mental health conditions with a focus on mood and anxiety disorders, and guidelines for screening and diagnosis. The conditions of symptoms reviewed include depression, anxiety and anxiety-related disorders, bipolar disorder, suicidality, and postpartum psychosis.*
- AIM Patient Safety Bundle: <https://saferbirth.org/psbs/perinatal-mental-health-conditions/>
  - *Addressing perinatal mental health in the domains of readiness, recognition & prevention, response, reporting & system learning, and respectful, equitable and supportive care. Bundle support additionally includes implementation details, data collection plan and change package.*
- Lifeline for Moms Perinatal mental Health Toolkit: <https://www.acog.org/programs/perinatal-mental-health> ; <https://www.umassmed.edu/lifeline4moms/products-resources/toolkits-and-apps/2019/11/lifeline4moms-perinatal-mental-health-toolkit/>
  - *Comprehensive toolkit addressing depression, anxiety, posttraumatic stress disorder, bipolar disorder, suicidal symptoms, intrusive thoughts, and psychosis with actionable and easy-to-follow algorithms for use in practice.*

# Geriatric Screening Resources

- Blazer, D. G. (2004). The psychiatric interview of older adults. *Focus*, 2(2), 224-235.
- Essentials of Patient and Family Centered Behavioral Health Care for Older Adults: <https://www.ama-assn.org/about/events/essentials-patient-and-family-centered-behavioral-health-care-older-adults>
- Practice Guide: Integrated Behavioral Health Care for Older Adults: <https://www.ama-assn.org/delivering-care/public-health/integrated-behavioral-health-care-older-adults>
- Tucher, E. L., Keeney, T., Cohen, A. J., & Thomas, K. S. (2021). Conceptualizing food insecurity among older adults: development of a summary indicator in the National Health and Aging Trends Study. *The Journals of Gerontology: Series B*, 76(10), 2063-2072.
- Wambogo, E. A., Ghattas, H., Leonard, K. L., & Sahyoun, N. R. (2018). Validity of the food insecurity experience scale for use in sub-Saharan Africa and characteristics of food-insecure individuals. *Current developments in nutrition*, 2(9), nzy062.

# Additional Resources

- Implementation of Measurement-Based Care:  
<https://www.psychiatry.org/getattachment/3d9484a0-4b8e-4234-bd0d-c35843541fce/Resource-Document-on-Implementation-of-Measurement-Based-Care.pdf>

# Contact Information

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# BHI Collaborative **ON DEMAND** Webinars

Check out other webinars and LIVE discussions from the **Overcoming Obstacles** series such as:

- **Addressing Behavioral Health in Primary Care: Non-Pharmacological Services & Treatments**
- **Actionable Insights: Key Steps to Engaging Patients in Psychosocial Interventions**
- **Practical Strategies for Managing Suicidal Ideation and Reducing Risk**

Watch all these webinars  
(and more) on the  
**Overcoming Obstacles**  
[YouTube playlist!](#)

## **Behavioral Health Integration: Overcoming Obstacles**

American Medical Association (AMA)

22 videos 3,915 views Last updated on Oct 28, 2022



Play all



Shuffle





# Collaborative Resource – BHI COMPENDIUM

The **BHI Compendium** serves as a tool to learn about behavioral health integration and how to make it effective for your practice and patients.



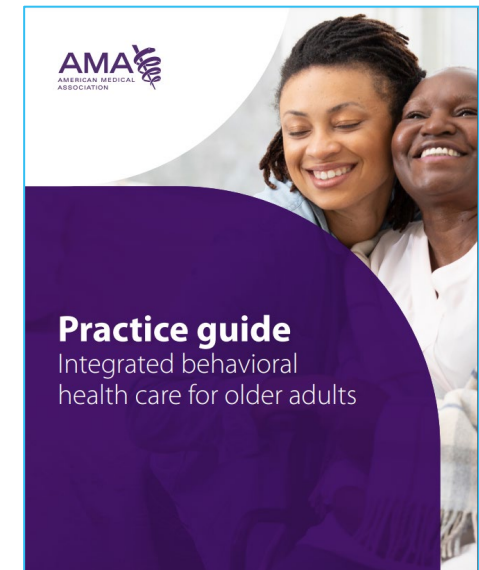
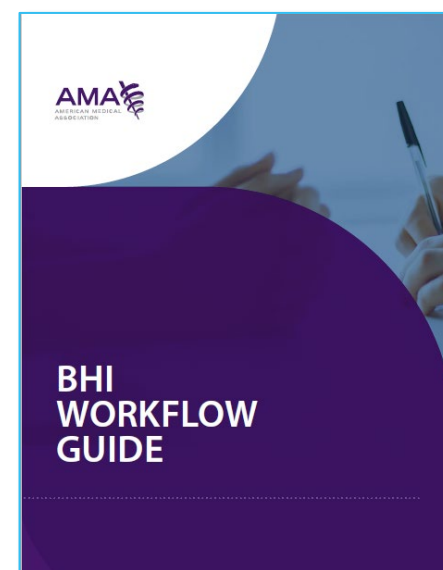
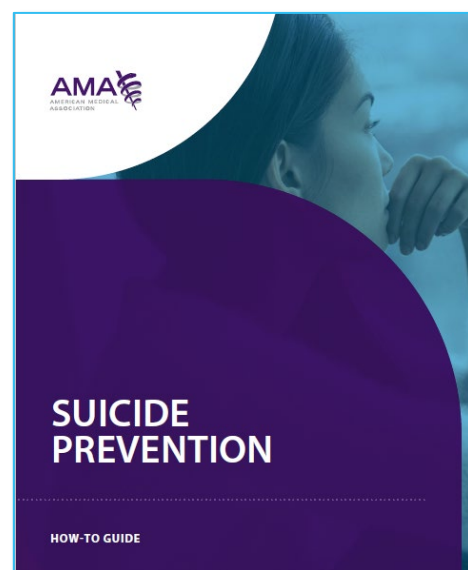
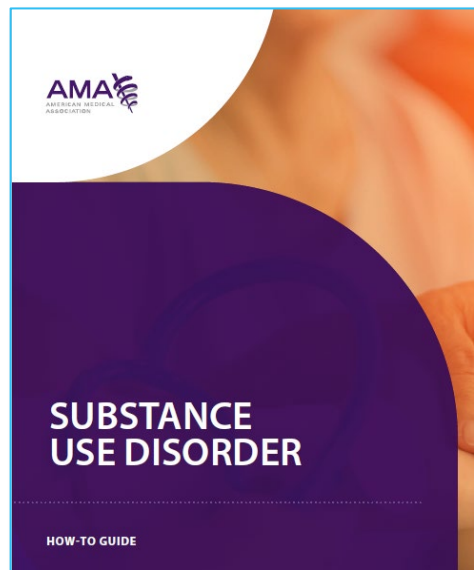
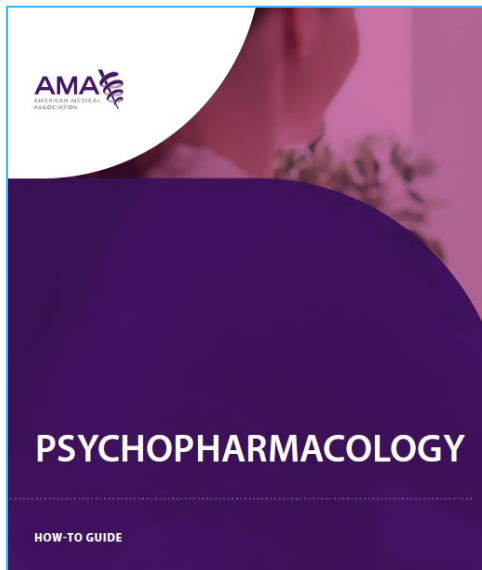
[\*\*DOWNLOAD NOW\*\*](#)  
to learn how to make the  
best decisions for the mental  
health of your patients.



# AMA Resources – HOW-TO GUIDES

Access AMA’s BHI practice guides for practical strategies, actionable steps and evidence-based resources on five specific areas of effective integrated care:

[pharmacological treatment](#), [substance use disorder](#), [suicide prevention](#), [workflow design](#) and [integrated behavioral health care for older adults](#).



# THANK YOU!