**The Webinar will begin promptly at 12pm**

Due to the number of participants, you will be automatically placed on mute as you join to ensure good quality sound. If you would like to comment or ask a question, please use the "chat feature"

Send your questions to the host via the chat window in the Zoom meeting.

Q+A will open at the end of the presentation.

**Follow-up questions?**

**Contact**

Samantha Di Paola
sdipaola@healthmanagement.com

# TREATMENT PLANNING (QUALITY AND POPULATION HEALTH SERIES, PART 2)



INTEGRATED CARE DC

**PRESENTED BY:**
**Debbi Witham, LMSW, JD**

**Tuesday,**
**March 14, 2023**
12:00 PM– 1:30 PM ET

Integrated Care DC is managed by the DC Department of Health Care Finance (DHCF) in partnership with the DC Department of Behavioral Health (DBH). This project is supported by the U.S. Department of Health and Human Services (HHS). A total of $3,500,365, or 81 percent, of the project is financed with federal funds, and $810,022, or 19 percent, is funded by non-federal sources. The contents are those of the author(s) and do not necessarily represent the official views of, or an endorsement by, HHS or the U.S. Government.

# WHAT IS INTEGRATED CARE DC?

INTEGRATED CARE DC

- Integrated Care DC enhances Medicaid providers' capacity to deliver whole-person care for the physical, behavioral health, substance use disorder, and social needs of beneficiaries.
- The technical assistance program is managed by the DC Department of Health Care Finance (DHCF) in partnership with the DC Department of Behavioral Health (DBH).

**To improve care and outcomes, the program focuses on three practice transformation core competencies**

1. Deliver **patient-centered care** across the care continuum
2. Use **population health analytics** to address complex needs
3. Engage **leadership** to support person-centered, value-based care

# WHY PARTICIPATE IN INTEGRATED CARE DC?

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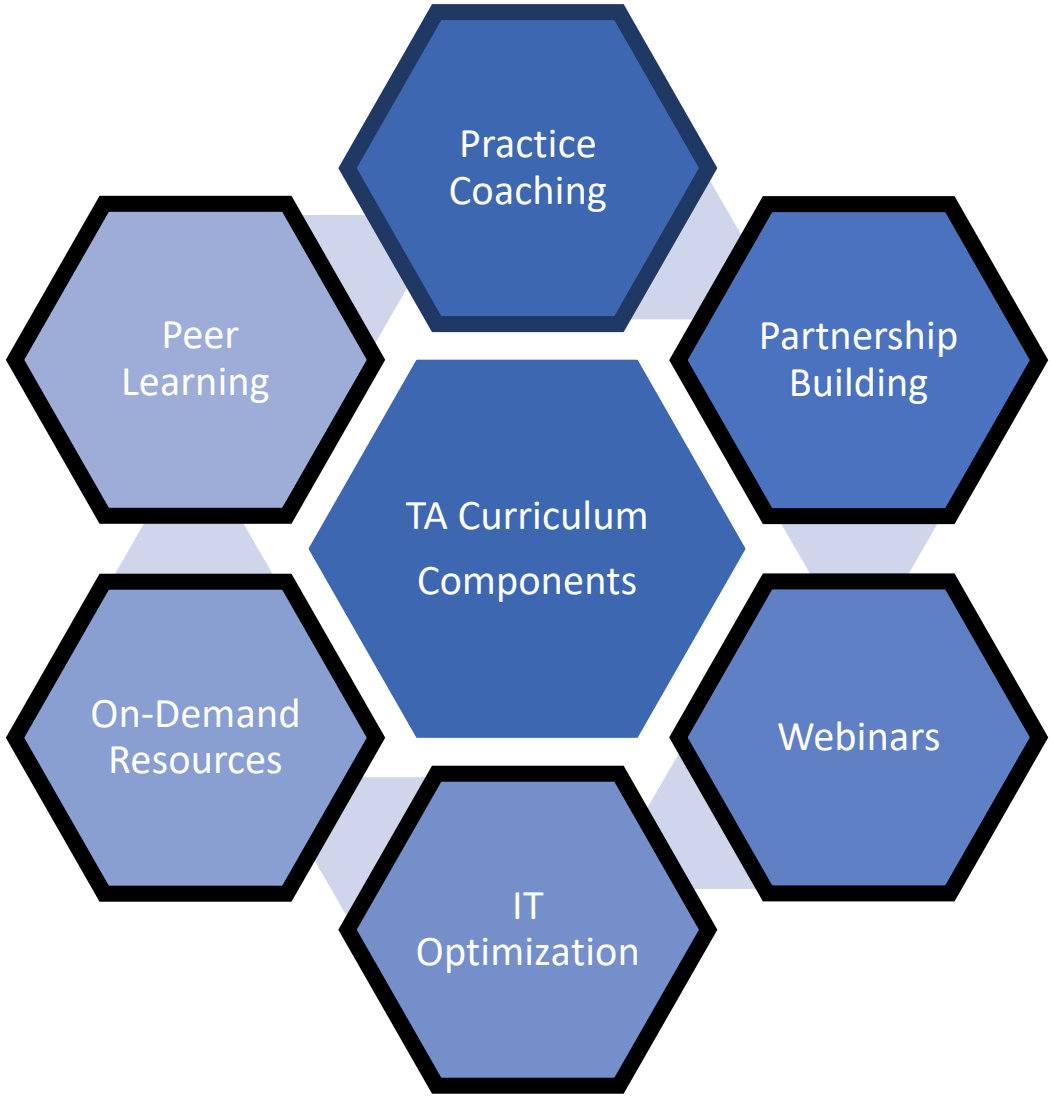
- Integrated Care DC will help ensure you have the infrastructure, knowledge, and tools you need to deliver high-value care.
- Our coaching team includes primary care, psychiatric, addiction medicine, and behavioral health clinicians with deep expertise in integrated care models.
- Educational credit is offered at no cost to attendees for live learning sessions.
- All DC Medical providers are eligible.



# INTEGRATED CARE DC UPDATES

## Are you receiving our Integrated Care DC Newsletters?

**Check your inbox** on the 1st and 3rd Tuesday for the Monthly Newsletter and the Mid-Month Update.

## Got ideas?

**Take this short survey** to share suggestions and requests for trainings.
https://www.integratedcaredc.com/survey/

# PRESENTERS

**Debbi Witham**
*TA Coach/SME*
dwitham@healthmanagement.com

| **Faculty** | **Elizabeth Wolff, MD, MPA**<br>**CME Reviewer** | **Shelly Virva, LCSW, FNAP /**<br>**Muriel Kramer, LCSW, FNAP** | **Debbi Witham, LMSW JD** |
|---|---|---|---|
| **Company** | No financial disclosures | No financial disclosures | No financial disclosures |
| **Nature of relationship** | N/A | N/A | N/A |

HMA discloses all relevant financial relationships with companies whose primary business is producing, marketing, selling, re-selling, or distributing health care products used by or on patients.

# CONTINUING EDUCATION CREDITS

- Health Management Associates (HMA), #1780, is approved to offer social work continuing education by the Association of Social Work Boards (ASWB) Approved Continuing Education (ACE) program. Organizations, not individual courses, are approved as ACE providers. State and provincial regulatory boards have the final authority to determine whether an individual course may be accepted for continuing education credit. HMA maintains responsibility for this course. ACE provider approval period: 09/22/2021–09/22/2025. Social workers completing this course receive 1.0 continuing education credits.
- To earn CE credit, social workers must log in at the scheduled time, attend the entire course and complete an online course evaluation. To verify your attendance, please be sure to log in from an individual account and link your participant ID to your audio.
- The American Academy of Family Physicians (AAFP) has reviewed Integrated Care DC Webinar Series and deemed it acceptable for AAFP credit. Term of approval is from 02/08/2022 to 02/07/2023. Physicians should claim only the credit commensurate with the extent of their participation in the activity. This session is approved for 1.0 Online Only, Live AAFP Prescribed credits.
- **If you would like to receive CE/CME credit, the online evaluation will need to be completed.** You will receive a link to the evaluation shortly after this webinar.
- Certificates of completion will be emailed within 10–12 business days of course completion.

# AGENDA

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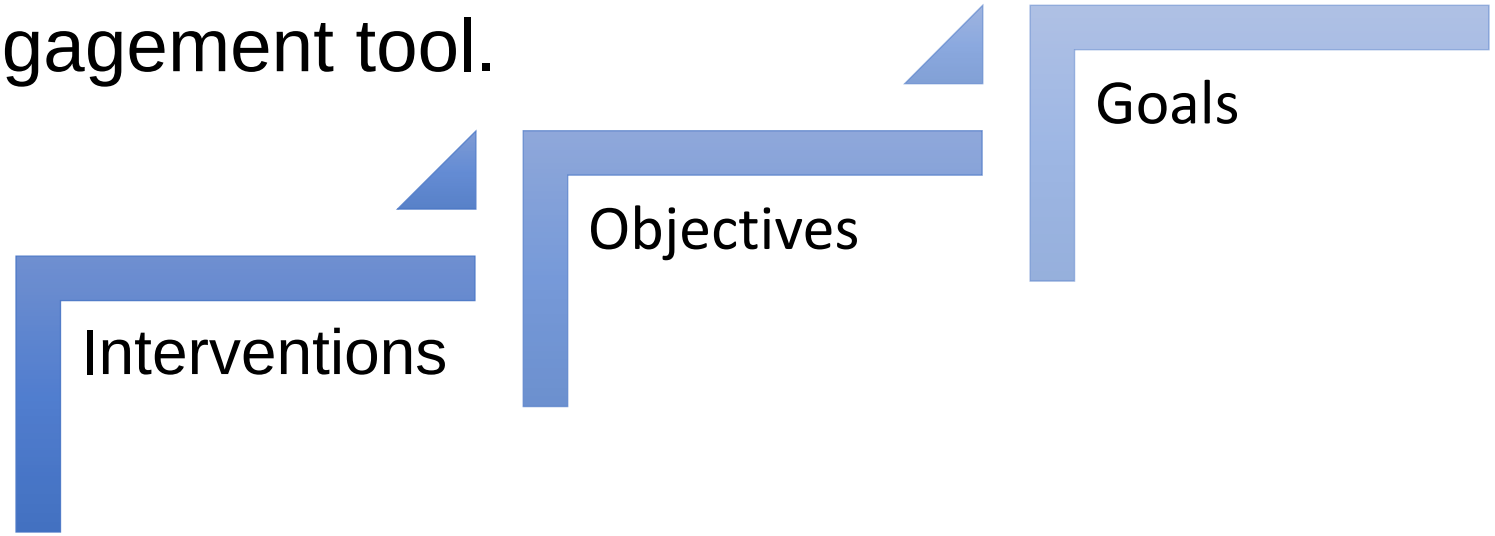
## Treatment Planning (Quality and Population Health Series, Part 2)

- Welcome and Program Announcements
- What is the Treatment Plan?
- Role of the Treatment Plan in Population Health
- Whole Person Health
- Team-Based Care/Treatment Planning
- Treatment Plan as a Tool to Measure Progress
- Closing Remarks/Q&A

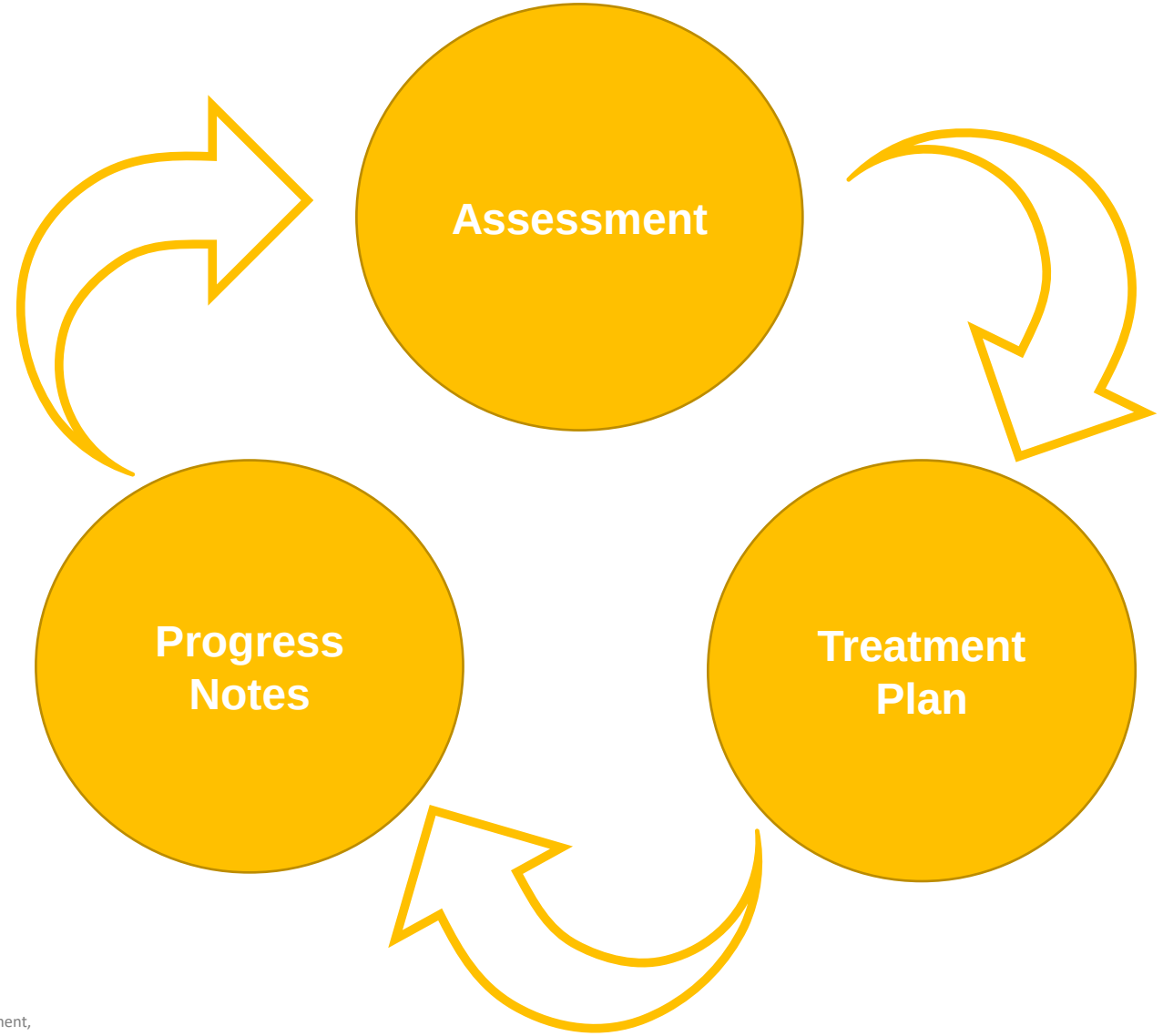
# LEARNING OBJECTIVES

1. Identify the components of the treatment planning process.
2. Define goals, objectives, and interventions as part of a treatment plan.
3. Identify one strategy to use the treatment planning process as an engagement tool.



# WHAT IS THE TREATMENT PLAN?

# THE GOLDEN THREAD



# THE ASSESSMENT DRIVES THE PLAN

Assessment: *Process* used with the person served to collect information related to his or her history and strengths, needs, abilities, and preferences in order to determine the diagnosis, appropriate services, and/or referral.

- Focuses on the client's specific needs
- Identifies the goals and expectations of the person served
- Responsive to the changing needs of the client
- Reflects significant life events or changes (yup – it's a *process*)
- The assessment should result in an individualized and goal-oriented plan

Something to remember: the assessment itself should be therapeutic.

# TREATMENT PLANNING

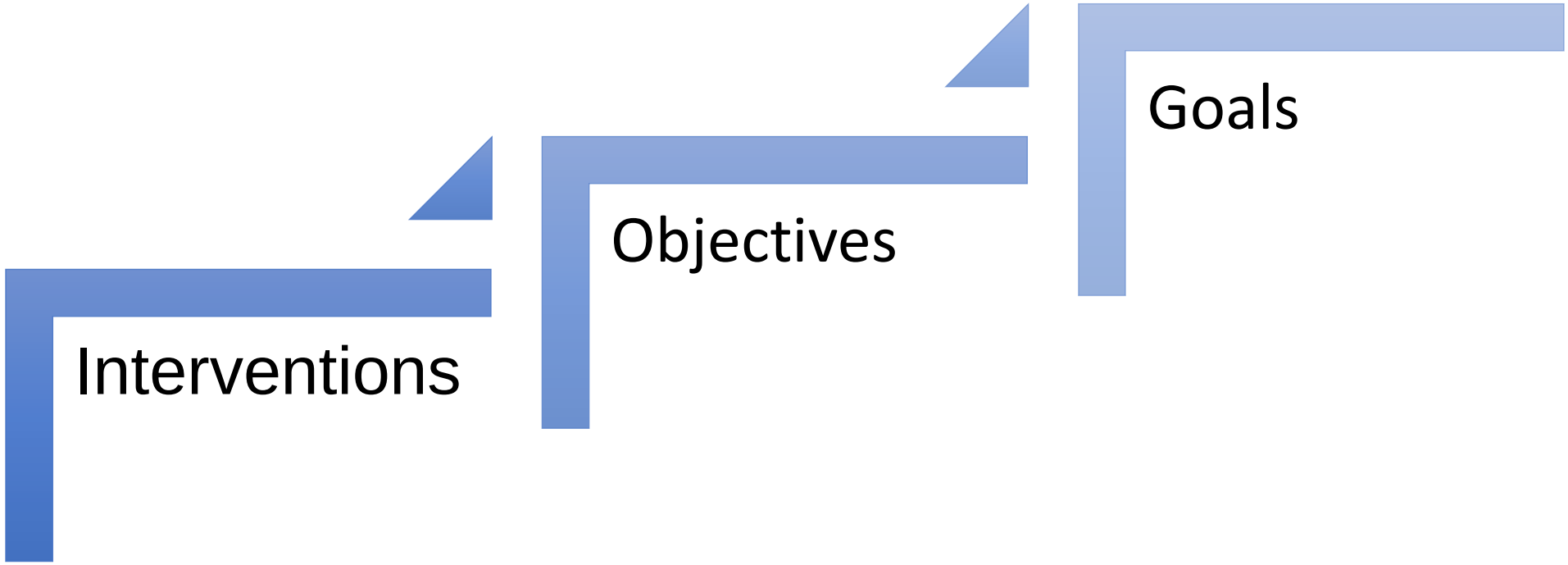
Plan: Written direction that is *action oriented* and related to a specific project or a defined goal, either present and/or future oriented.

| **Treatment Planning is:** | **Treatment Planning is NOT:** |
|---|---|
| • **An opportunity to engage with your client**<br>• **A process**<br>• **A roadmap**<br>• **A living document**<br>• **Documents medical necessity**<br>• **Shows why the person is here**<br>• **Shows what the plan of care is**<br>• **Inclusive of priorities of the person served** | • A form<br>• Static<br>• Something we do for DBH<br>• About compliance<br>• Something we do at admission and every 90 days<br>• Something the provider prepares on their own |

# AND NOW WE START TO PLAN

| What | How |
|---|---|
| • Active Participation of the Client<br>o Opportunity to learn what they really want from their time with you<br>o What does recovery look like for them? | Show their participation through a progress note of the session. Document your conversations leading up to the treatment planning session. |
| • Involve Others<br>o Who are the people that will support their recovery? | As you are planning, ask who they want in those conversations. |
| • Strengths, Needs, Abilities, Preferences<br>o Understand their needs<br>o Build on their strengths and abilities<br>o Ask about their preferences | Use what you learned in the assessment. |
| • Based on the assessment process<br>o Use the information you learned during the assessment to engage the client in a discussion regarding their goals | Engage around what you remember them stating as needs in the assessment. |

# WHAT'S IN A PLAN?



# AND WHAT DOES THAT MEAN?

| Goals | Objectives | Interventions |
|---|---|---|
| • Reflects the global needs and desires of the client<br>• Pulled from the areas identified as needs in the assessment | • Specific outcomes to reach each goal | • What you as the provider will do to help the person reach each objective |

# WHAT DOES THAT LOOK LIKE?

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| Goals | Objectives | Interventions |
|---|---|---|
| • Should be in the words of the client<br>• Should be understandable<br>• Should be individualized to each client | • **S**pecific<br>• **M**easurable<br>• **A**ttainable<br>• **R**ealistic<br>• **T**imely<br>• **R**eflective of client's age, development, and culture<br>• **R**eflective of what client expects from their care | • The plan should include the modality that will be used*<br>• Frequency of the intervention<br>• Specific, that is, which motivational interviewing (MI) or cognitive behavioral therapy (CBT) skill is being taught |

* Modalities include Motivational Interviewing, Cognitive behavior Therapy, Problem Focused Therapy…

# ROSE'S TREATMENT PLAN

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**Goal:** Rose will cease use of all illicit substances.

**Objectives:** Rose will submit toxicology tests consistent with expected results.

**Intervention:** Rose will attend group.

Source: Medical University of the Americas

# THE ROLE OF THE TREATMENT PLAN IN POPULATION HEALTH

# TREATMENT PLAN AND POPULATION HEALTH

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What is the treatment plan's role in the experience of care?

# TREATMENT PLAN AND POPULATION HEALTH

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- An opportunity to align with your practice goals and metrics
  - Think about what is important to your practice and what you work on improving
  - Learn from the data you are measuring what is working to drive objectives and interventions
  - Include elements from your practice goals into treatment plans

# TREATMENT PLAN AND POPULATION HEALTH

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Example:

- Your practice is focused on implementing CBT. You meet with a person whose condition would benefit from CBT interventions.
- How can you include this in your treatment plan?

# TREATMENT PLAN AND POPULATION HEALTH

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- The treatment plan is the opportunity to bring population health to the person and to drive data up through:
  - Whole-person care
  - Team-based care
  - The treatment plan as a tool to measure progress

# WHOLE PERSON HEALTH

# WHOLE PERSON HEALTH

The National Academies for Science, Engineering and Medicine definition for whole person health:

- Whole person health is a person-centered, integrated approach to healthcare that focuses on health creation and well-being by incorporating patients' goals into their health care.

# WHOLE PERSON HEALTH

Can anyone be defined by just the reason they are receiving services from you?

- What are areas of strength and support in their life? Protective factors?
- What are other factors that may impact the services they receive?
- What are health-related social needs you may need to consider to ensure success in services?

# TEAM BASED CARE/ TREATMENT PLANNING

# TEAM-BASED CARE/TREATMENT PLANNING

When we think about the person as a whole, we need to think about the team that supports their care:

- Team members in your clinic
- Team members from partnering agencies
- Who does the person-served define as their team?

Source: American Hospital Association

# TEAM BASED CARE/TREATMENT PLANNING

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What do we need to consider for team-based treatment planning?

- Scheduling
- Communication
- Confidentiality
- Specific tasks and interventions – clear expectations
- Desires of the person served – they have the final say!

# TREATMENT PLAN AS A TOOL TO MEASURE PROGRESS

# MEASURING PROGRESS

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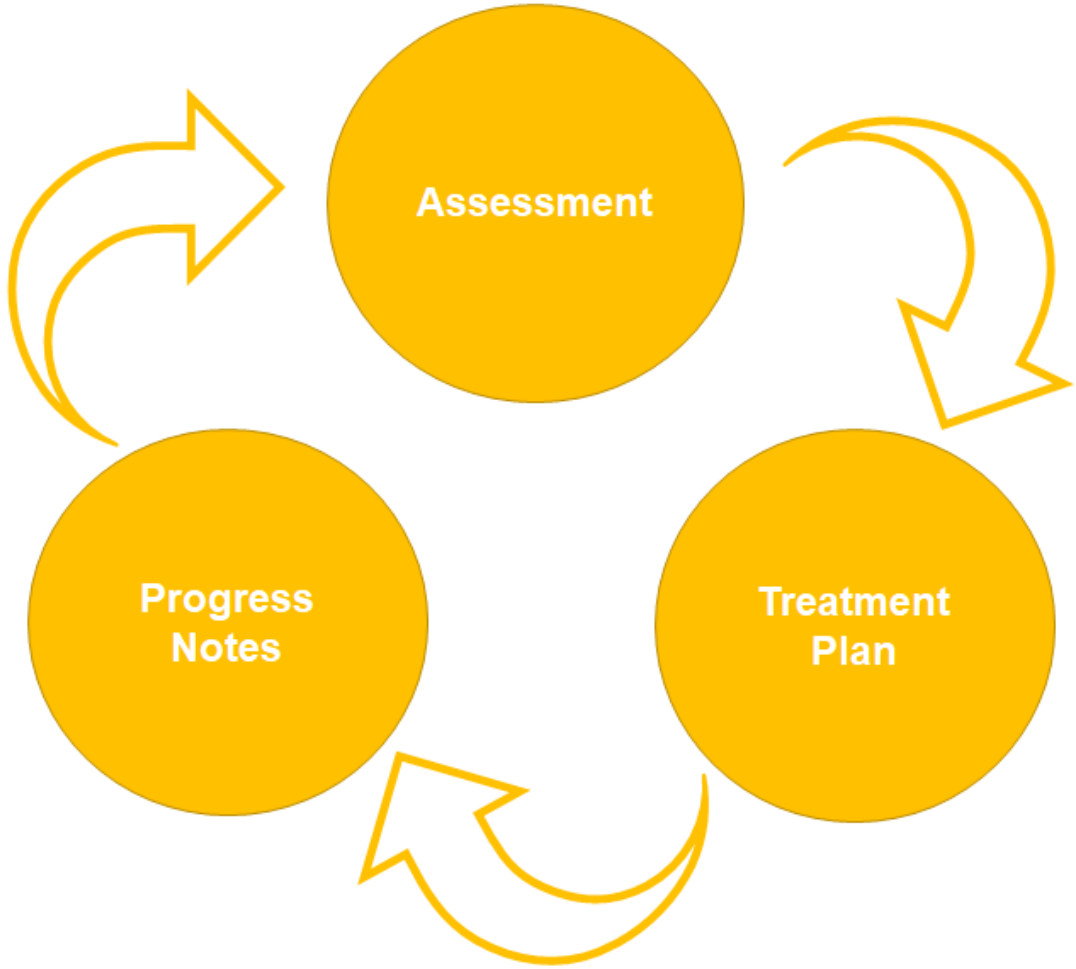
Back to the beginning:

- Measurable objectives
- Ongoing assessment
- Golden thread



# MEASURING PROGRESS

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- Use the treatment plan to measure success as objectives are attained
- Apply a measurement-based care approach to look at baseline and progress toward objectives
- Adapt interventions if objectives are not attained
- Leverage data learned regarding the population to drive and tailor interventions
- Conduct ongoing assessment and regular documentation!

# VOICE OF THE PROVIDER
# BRIAN CRISSMAN AND JO HOUSTON OF MEDMARK TREATMENT CENTERS

# Q&A

# REFERENCE LIST


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# WRAP UP AND NEXT STEPS

- Please complete the online evaluation! **If you would like to receive CE or CME credit, the evaluation will need to be completed.** You will receive a link to the evaluation shortly after this webinar**.**
- The webinar recording will be available within a few days at: www.integratedcaredc.com/learning
- **Upcoming Webinar:**
  - *Addressing Grief in PCBH (PCBH Part 9)*, March 21, 2023, 12:00 PM – 1:00 PM ET
- For more information about Integrated Care DC, please visit: www.integratedcaredc.com