

Pediatric Mental Health Care Access (PMHCA) QI Collaborative

Session 1

February 22, 2024

HRSA Funding Acknowledgement

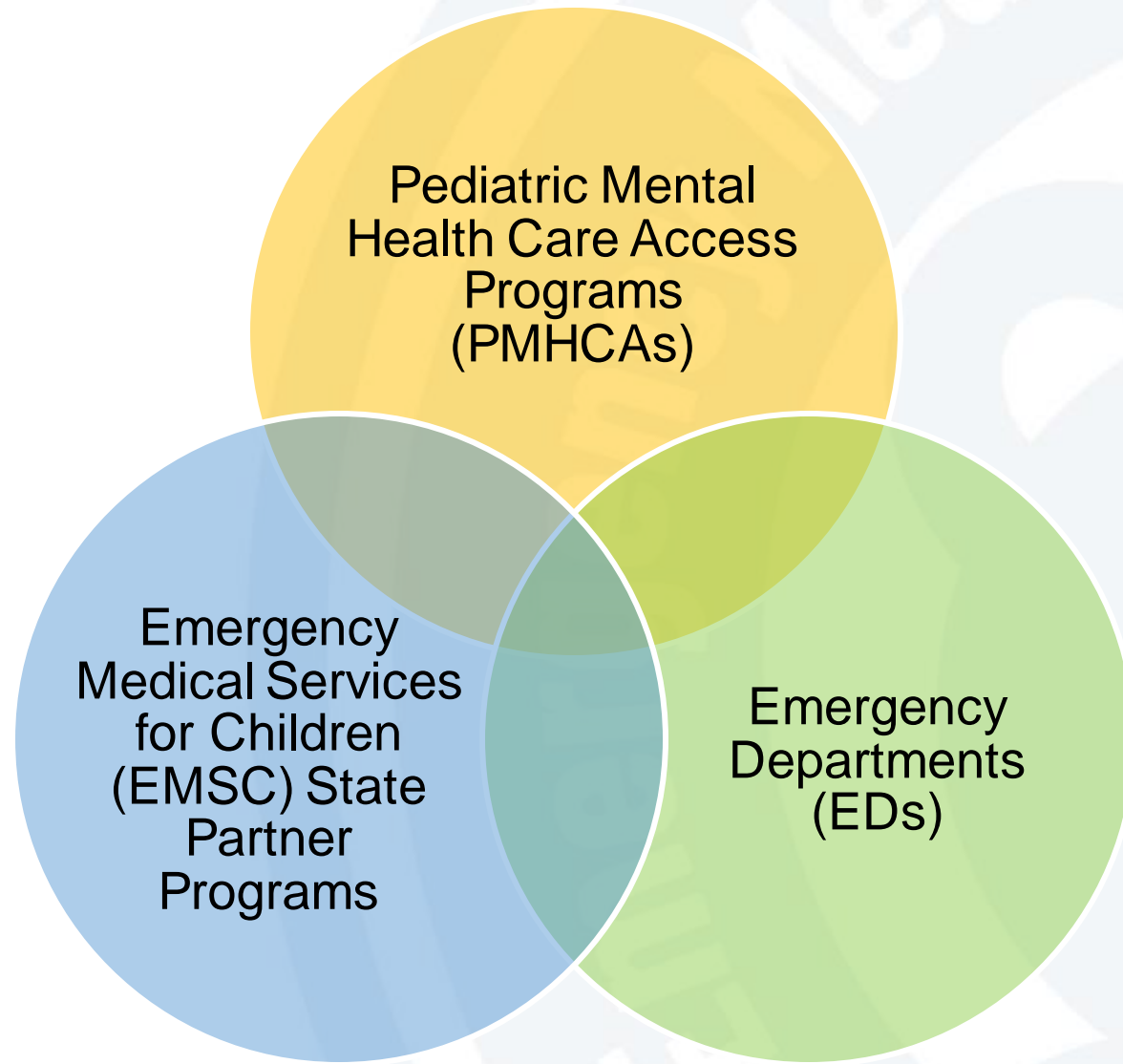
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Agenda:

- Introduction to QI Collaborative Work
- Break out groups – PMHCA ED Expansion Sharing
- Next Steps

Who is in the room today?

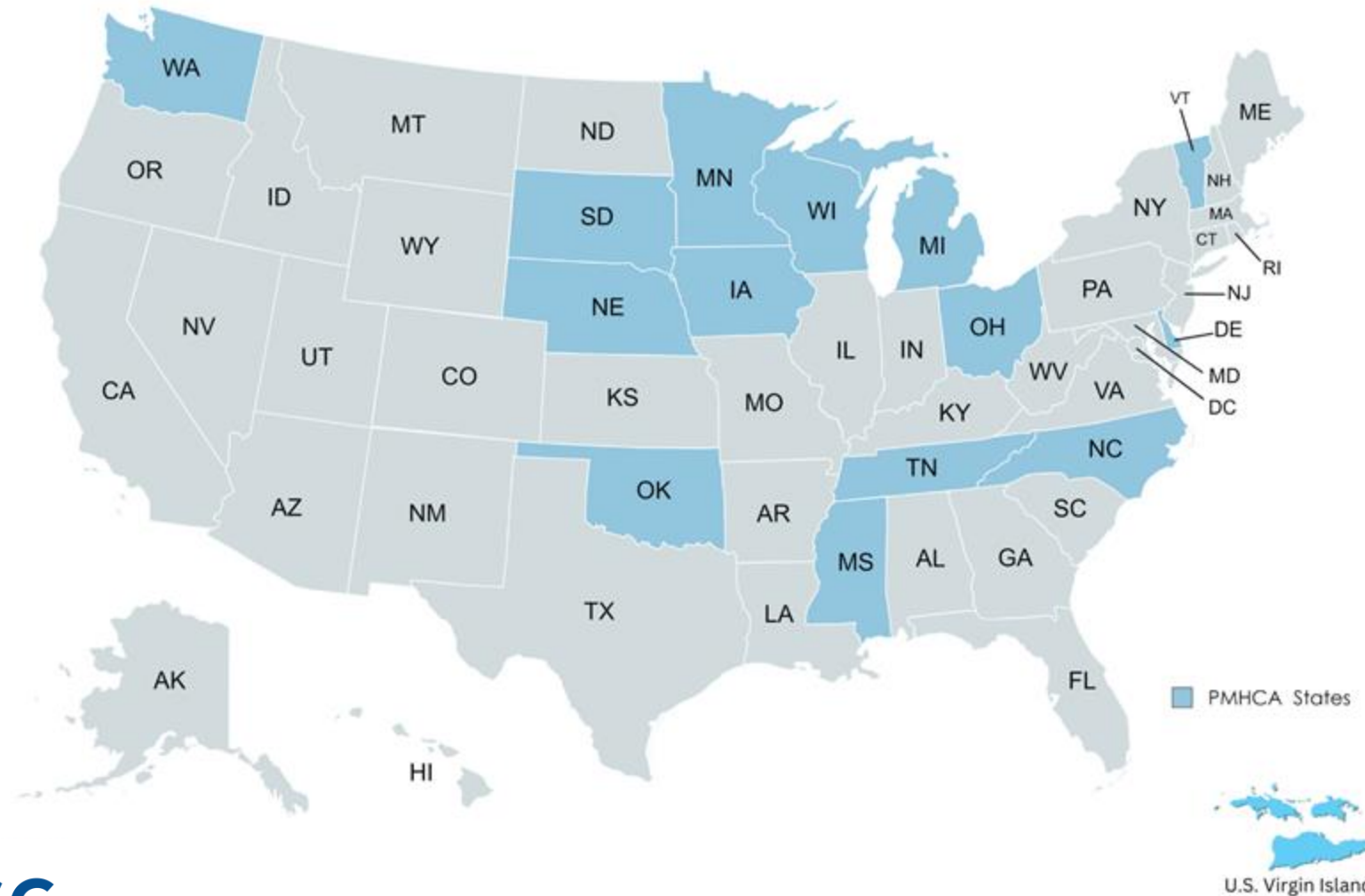


PMHCA Programs

- Federally funded, typically located in state departments of health.
- Provide children's mental and behavioral health support to pediatric primary care.
- Some are expanding to the ED, as well as schools.
- Services offered (vary by program):
 - Provider Consultation
 - Provider Trainer and Education
 - Patient Resource Connection

Pediatric
Mental Health
Care Access
Programs
(PMHCAs)

QI Collaborative Participating PMHCA Teams

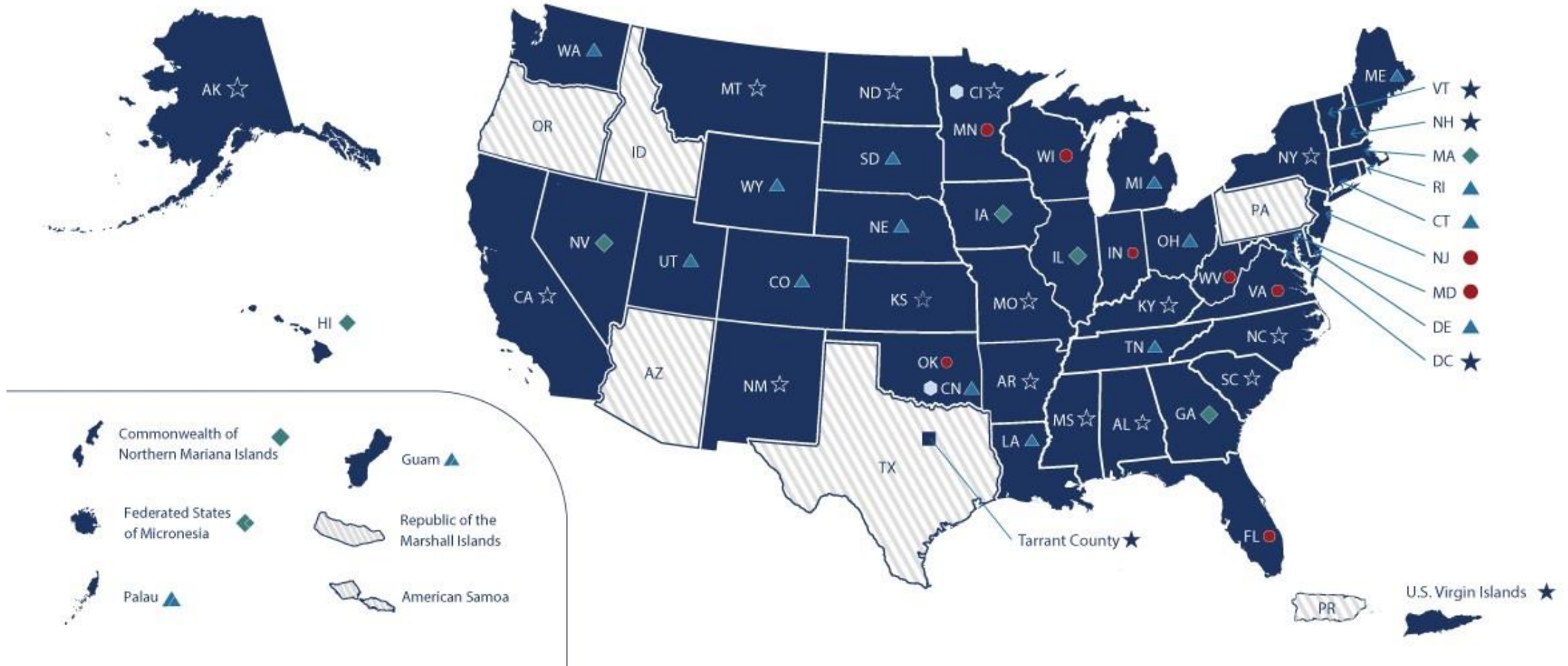


- 2024 New Teams**
Chickasaw Nation (Oklahoma)
Iowa
Minnesota
Mississippi
Nebraska
North Carolina
Ohio
South Dakota
Vermont
Virgin Islands (EMSC State Partner)
- 2023 Returning Teams**
Delaware
Michigan
Oklahoma
Tennessee
Washington

PMHCA Program Map

<https://mchb.hrsa.gov/programs-impact/programs>

TRIBAL NATION KEY	HRSA-PMHCA FUNDING KEY	SPECIAL TOPICAL AREA KEY
Chickasaw Nation (CN)	Funded	Schools
Red Lake Band of Chippewa Indians (CI)	Not Funded	Emergency Departments
		Both
		Other



EMSC State Partners

- State-funded programs – most are housed in state EMS offices, but location can vary.
- Support all 57 states, territories, and jurisdictions in meeting the needs of children in their emergency care systems.
- Develop, implement, and share pediatric-ready resources, tools, and other opportunities in their state.
- Build relationships with hospital and prehospital teams and experts directly impacting pediatric emergency care.

Emergency
Medical
Services for
Children
(EMSC) State
Partners (SP)

Examples of EMSC SP Initiatives

Children with
Special Health
Care Needs

Human
Trafficking

Injury
Prevention

Safe Transport
of Children in
Ground
Ambulances

Telehealth

Child Death
Review

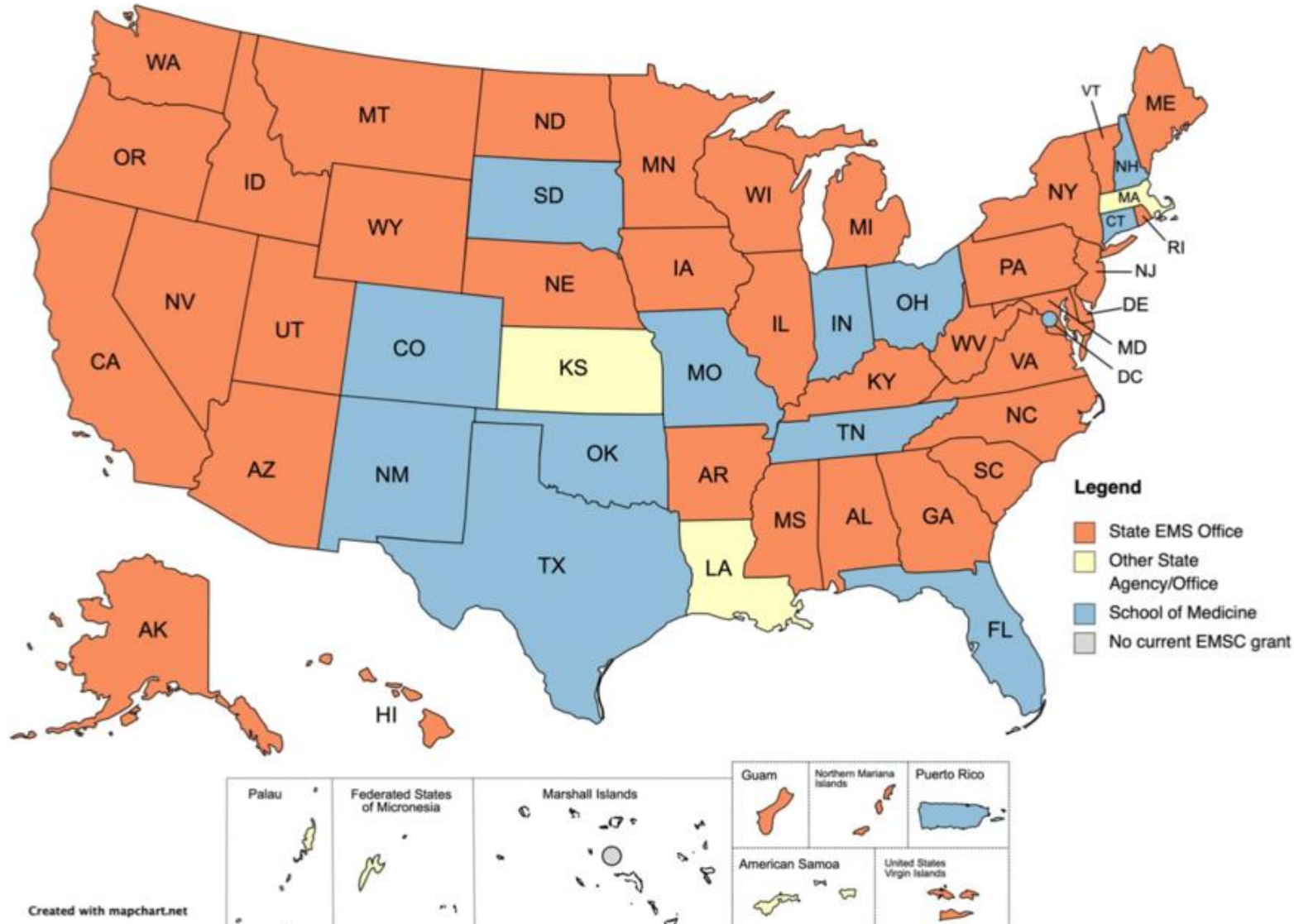
School Nurse
Courses/
Emergency
Guides

Safe Sleep

JIT training
(e.g.,
tripledeemic)

Behavioral &
Mental Health
Awareness

How to find and connect with your SP



Find contact information here.



ED Members

- ED team representatives (physicians, nurses, social workers, staff)
- Participated in the EILC's ED Screening and Treatment Options for Pediatric (ED STOP) Suicide QI Collaborative in 2023.
- Focused on enhancing ED-based clinical care processes for children with suicidal ideation.

Emergency
Departments
(EDs)

Objectives

Collaborating PMHCA Teams

Identify a specific area or global aim of focus for your ED expansion project (or exploration).

EDs and EMSC State Partner Program Attendees

Explore your organization's/team's interest in engaging or partnering with your state's PMHCA team.

Why Quality Improvement?

The Benefits of a QI Collaborative

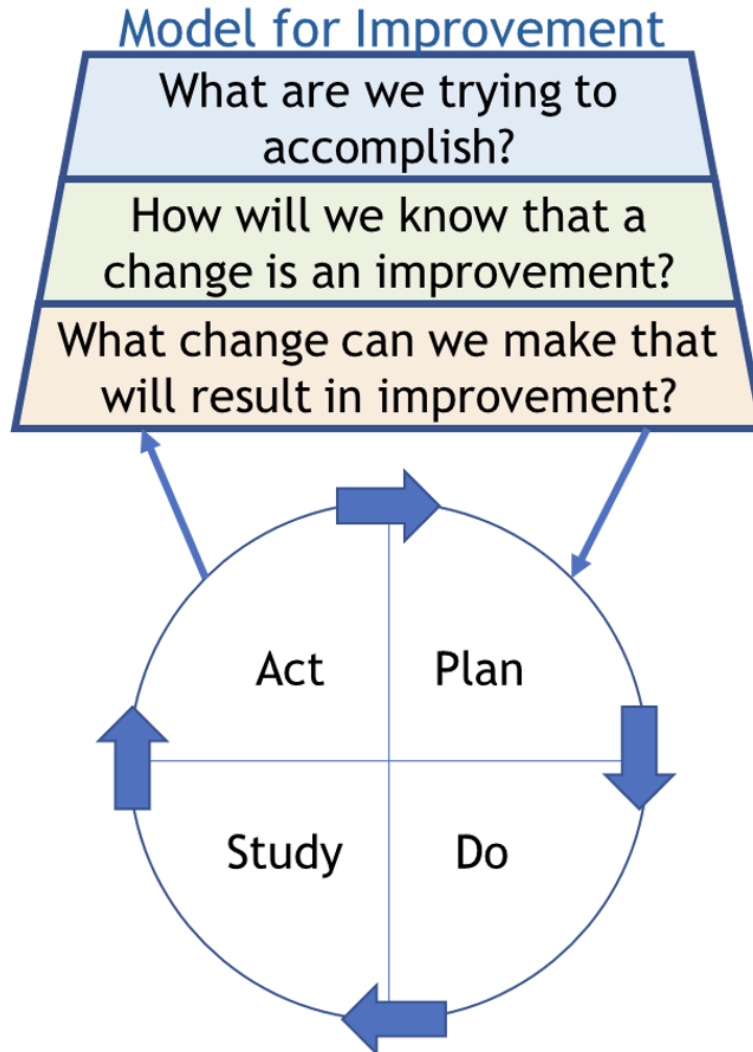
- Expert support in testing strategies
- Centralized resources and assistance
- All teach, all learn
- Diversity of participants
- Lasting results



Key Activities within the Collaborative

- Identify the change you want to make.
- Develop your SMART Aim.
- Design your plan for change.
- Test your change.
- Measure your change.
- Adapt, adopt, or abandon.

Fundamentals Questions to Ask



Not all changes lead to improvement, but all improvement requires change.

Plan → Do → Study → Act



- Adopt an implementation plan

- Develop SMART Aim
- Select a change strategy

- Put the plan into action

- Rapid test of change

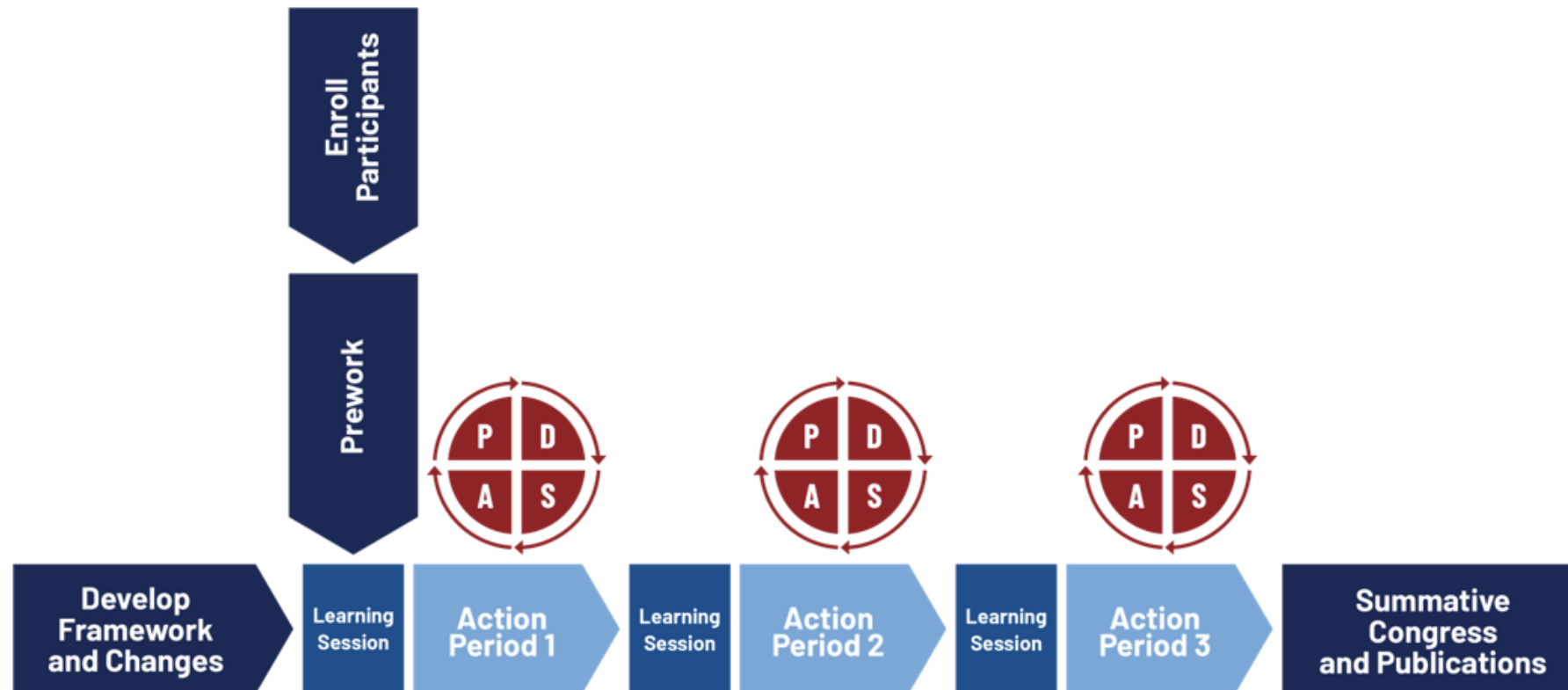
- Assess the outcome and evaluate your performance

- Consider: Was it successful? What feedback was gathered?

- Adapt or abandon the change process and implement another PDSA cycle

Lifecycle of the Collaborative

The IHI Model



Supports: Email, Visits, Phone Conferences, Monthly Team Reports, Assessments

Adapted from the Institute for Healthcare Improvement

What will PMHCAs be learning?

- Quality improvement tools and methods
- Strategies to develop more defined goals
- Measure/s specific to ED expansion efforts (or exploration)
- Examples from other teams regarding ED expansion work
- Potential opportunities for collaboration with ED and EMSC representatives

PMHCA Collaborative Expectations

- **Be active and engaged** – we need all voices in the room!
- **Attend** large-group sessions to learn QI fundamentals and applications.
- **Provide** regular progress updates on work, seek help from EIIC, and brainstorm with collaborative members.
- **Participate** in small working groups focused on your chosen path of work.
- **Join** office hours
- **Schedule** 1:1 time with QI coaches as needed.
- **Apply** QI methods outside of sessions – complete assignments.

ED and EMSC Programs Collaborative Expectations

Join PMHCA collaborative meetings

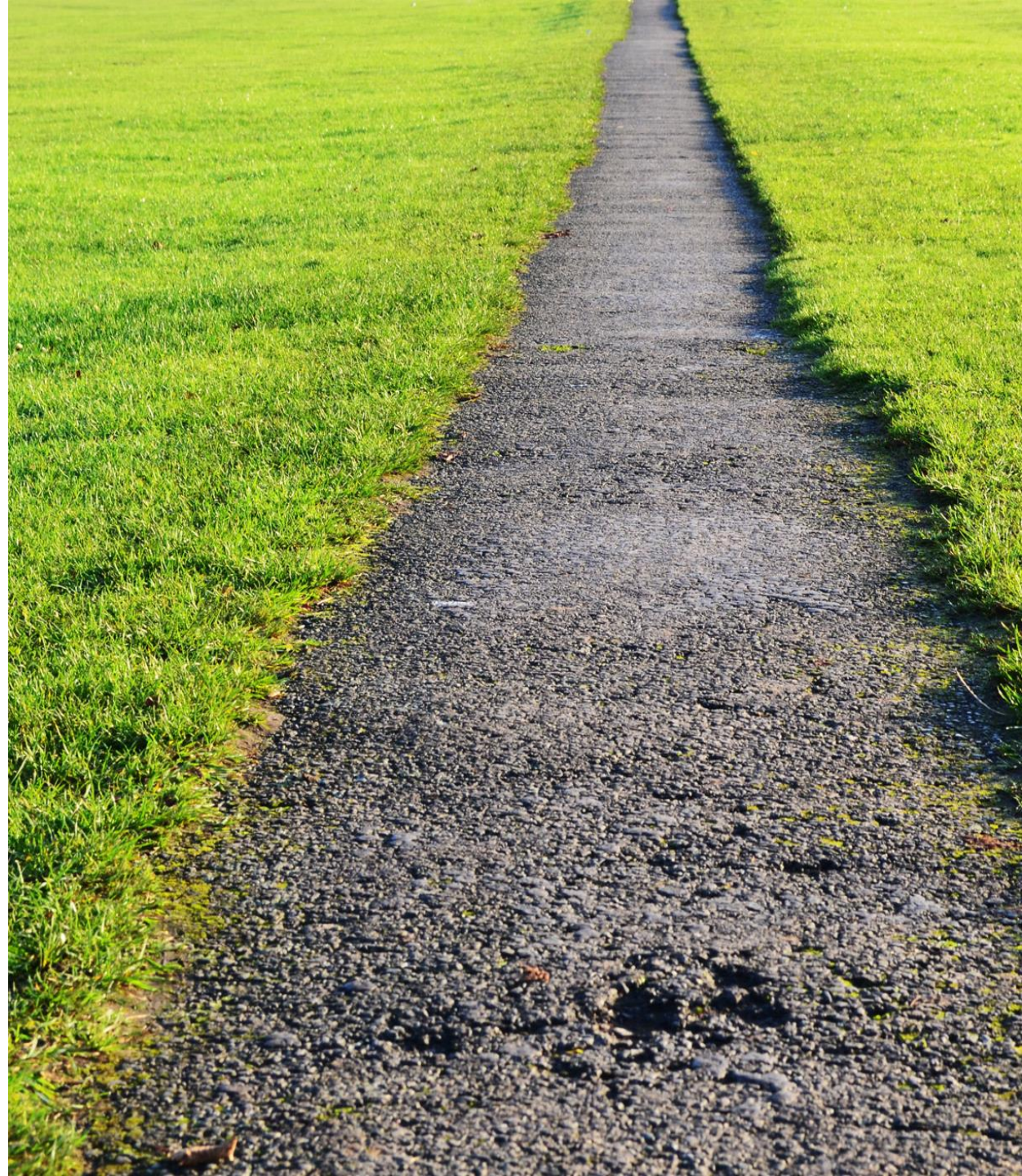
Explore collaboration with PMHCA team in your state

PMHCA ED Expansion Project Paths

PMHCA ED Expansion Project Paths

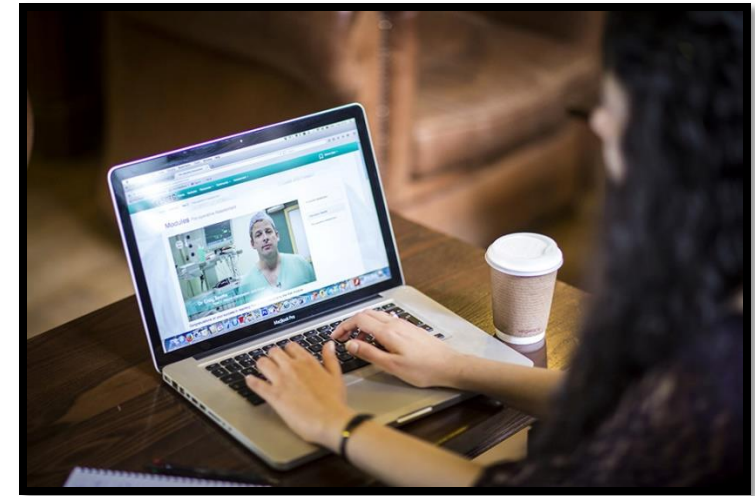
Projects may fall into one or more of the following project “paths”:

- Education and Training (Provider-Specific)
- Teleconsultation (Provider-to-Provider)
- Patient Resource Connection (Community-Focused)



PMHCA Education and Training (Provider-Specific)

- Your team may engage ED providers by offering mental and behavioral health...
 - Resources
 - Training (via in-person or online modules)
 - Education
- These efforts are specific to providers and seek to educate.



PMHCA Teleconsultation (Provider-to-Provider)

- Your team may engage ED providers by offering provider-to-provider consultation.
- Consultation may look like...
 - Guidance on specific screenings for pediatric patients
 - Medication management
 - Guidance on discharge and safety planning
 - Hosting weekly “office hours” with a mental health specialist



Patient Resource Connection (Community-Focused)

- Your team may determine it can serve as a “community resource connection” point for providers.
- Resource connection may look like:
 - Providing guidance on resources to connect patients to within the community.
 - Utilizing different processes, telehealth platforms, or other technologies/modalities to connect patients to providers or places.
 - Offering telepsychiatry services to patients upon referral.



Transition to Breakout Groups

- Share the following:
 - Who are you?
 - What is your team's ED expansion plan/exploration?
 - What do you hope to gain from this collaborative?



Return from Breakout Groups



Breakout Discussion and Q&A



EMSC
Quality Improvement
Collaboratives

Next Steps: April Collaborative Meetings

- Split teams based on the ED-expansion project/exploration interest(s):
 - Teleconsultation (Provider-to-Provider)
 - Education and Training (Provider-Specific)
 - Telebehavioral Health Services (Resource Connection)
- SMART Aim drafting
 - SMART aim refinement for returning teams



April Collaborative Sessions



APRIL 4

PMHCA Teleconsultation
(Provider-to-Provider)
Projects

2-3 PM ET



APRIL 18

PMHCA Education and Training
(Provider-Specific)
Projects

2-3 PM ET



APRIL 25

PMHCA Patient Resource
Connection (Community-Focused)
Projects

2-3 PM ET

What is a SMART Aim?

- **S**pecific
- **M**easurable
- **A**chievable
- **R**ealistic
- **T**ime-bound



- An aim statement is a clear, explicit summary of what your team hopes to achieve over a specific amount of time including the magnitude of change you will achieve
- Narrower and more measurable than Global Aim

Example SMART Aim

Increase the percentage of suicide screenings at “Hospital ED” from 10% to 90% by June 2025.



SMART Aim Development Resources

- February 1st office hour video on the EICC website – overview of how to draft a SMART aim.
- QI Introduction guide (will be resent after today's session).
- March 26th Office Hour: Meet with a QI Coach & Data Analyst from 3-5 PM ET.

Upcoming Webinars

- **March 5** - Tutorial: PMHCA ED Expansion Toolkit Tutorial – Exploration Phase with Michigan PMHCA | 2 -3 PM ET
- **March 19** - Webinar: Making Telehealth Work in the Emergency Department – North Carolina’s Statewide Telepsychiatry Program (NC-STeP) | 2-3 PM ET
- **March 26** - Office Hours: Meet with a QI Coach & Data Analyst | 3-5 PM ET



Save the Date: Cleveland Meeting

For collaborating PMHCAs → Meeting and registration details *coming soon*

Dates: July 22-24, 2024

Location: Downtown Cleveland

Website:





Thank you for your participation!