

THIS WEEK



It's time for holistic patient care

Treating the whole patient — both mind and body — in a well-coordinated system has become essential to health care's mission. But integrating behavioral health into every aspect of patient care and coordinating and connecting with community resources across all points in the care continuum often prove challenging, research shows.

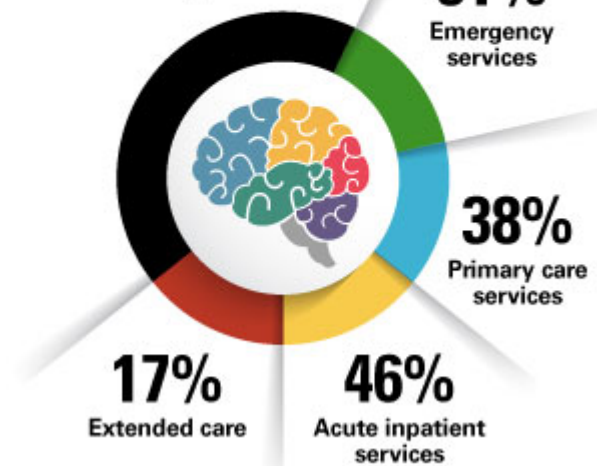
This helps to explain why only about half of hospitals routinely integrate behavioral health into emergency and acute inpatient services, and why even fewer hospitals do so in primary (38%) or extended care (17%), according to 2018 AHA Annual Survey data (based on 2017 operations).

This lack of integration results in a more fragmented, higher-cost delivery system, with fewer access points for behavioral health patients. Yet, things are changing rapidly as hospitals and health systems are making a concerted effort to create a

single system of care for physical and behavioral health.

To accelerate progress, hospitals and health systems will need to make this a clinical and organizational priority. Health care executives must help lead this effort by ensuring that behavioral health services are part of their organizational mission and values, notes a new [Market Insights report](#) from the AHA Center for Health Innovation.

Percentage of hospitals reporting routine integration of behavioral health services into the following areas:



Source: Source: AHA Annual Survey, 2017

Report highlights include:

- A **behavioral health pathway matrix** providing a framework to assess integration level and capabilities in areas like provider network management, case management, patient experience and community partnerships.
- **Case studies and models** for how providers can improve the availability and coordination of behavioral health services in the emergency department, in inpatient and outpatient care and by extending access and care into the community.
- **(New Tool)** “Behavioral Health Integration Assessment: 26 Questions for Leadership Teams” – available exclusively to AHA members.

On the ED/inpatient side, for example, providers can make behavioral health assessments routine for all patients, either directly or through telemedicine services, and have appropriate processes in place for referral and treatment if needed. Electronic health record systems can be used to prompt clinicians to assess all patients for behavioral health issues and to ensure that the information gathered is shared with and addressed by all providers.

Provider organizations also can teach primary care physicians how to effectively use screening and assessment tools and educate them on what to do with the information. In addition, hospitals and health systems need to establish a continuum of services to which patients can be referred.

The [AHA's 2019 TrendWatch](#) cites research that indicates integration can reduce the total cost of care and lead to better outcomes — essential components of succeeding in value-based care models.

5 ways to optimize integrated care

The report also urges health care organizations to leverage technology more effectively in care delivery and provides the following key insights for scaling and optimizing integrated care models:

- **Start small:** Don't try to integrate behavioral health into the entire care continuum all at once.
- **Leverage technology:** Use technology to distribute your limited behavioral health resources more efficiently and equitably through telehealth and virtual consults.
- **Collaborate smarter:** Use electronic health information exchange and care management software to improve collaboration, handoffs and transitions in care.
- **Get wise to patient apps:** Familiarize caregivers with the growing number of consumer-facing behavioral health applications patients use, and help them use digital health tools, when appropriate, to manage their conditions.
- **Stress transformation:** Measure the effects of behavioral health integration on key clinical, operational and financial performance indicators to show continuous improvement. Stress to your team that the real goal is transforming care delivery.

GET YOUR INNOVATION EFFORTS UP TO SCALE AND UP TO SPEED

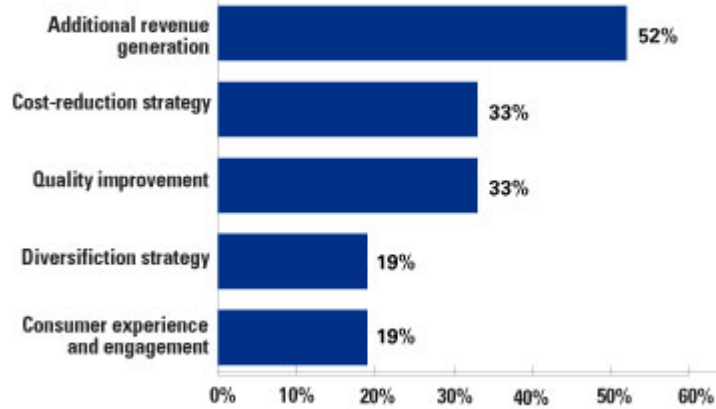


Hospitals and health systems are accelerating efforts to drive innovation, but they haven't mastered the ability to scale their ideas quickly. In fact, a new [study](#) from the Center for Connected Medicine and The Health Management Academy shows that 62% of responding health systems scale innovation slowly or very slowly.

Among the 38% of organizations that indicated they can scale and implement innovation quickly, the vast majority attribute part of their success to having a formal process for innovating. These processes include things like expediting approvals from their legal departments and other key stakeholders and allowing pilot projects to get up and running quickly.

The study, based on surveys and interviews with executives from 28 health systems, also found that 60% of respondents focus primarily on internal innovation. As for the primary strategic drivers of innovation, slightly more than half of respondents said generating additional revenue, followed by cost reduction and quality improvement.

Primary strategic drivers of innovation



Source: "Trends for Scaling Innovation in Health Care," Center for Connected Medicine and The Health Management Academy, June 2019

Based on the research findings, The Academy and CCM offer these six tips for scaling innovation:

Define innovation: Create a system-level definition for innovation, with C-suite buy-in. Respondents' definitions for innovation suggest a quest for new value that leads with problem-solving, supported by technology.

Align with goals: The research suggests decision-making around innovation is heavily connected to alignment with existing organizational strategic goals. Top functional areas for innovation at health systems center on areas like access, information technology/data analytics and patient engagement.

Structure people and process: Create a formal innovation department and scaling process to support efficiency across your system. A correlation exists between health systems that have structure and processes around innovation and the ability to implement and scale innovation quickly, the study found.

Empower decision-makers: Allocate a dedicated budget and appoint an executive with decision-making power for innovation strategy. This person typically reports to the CEO. Survey data showed that large health systems are most likely to have a separate innovation department, compared with that of small- and medium-sized systems.

Simplify signoff: If you want to speed scaling of innovation, reduce the number of people involved in decision-making for this area. Organizations that report being able to reach decisions somewhat quickly around innovation scaling did not list board members as stakeholders in the process.

Maximize strengths: Innovative health systems recognize their strengths and capabilities and supplement areas where they need help by partnering with others. The most common external partners, respondents said, are tech firms and academic institutions.

We want to hear from you! Please send your feedback to Bob Kehoe at rkehoe@aha.org.

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