



CALIFORNIA INSTITUTE for BEHAVIORAL HEALTH SOLUTIONS

Cultivating Outcomes through Equity in Behavioral Telehealth (COE-BT)

COLLABORATIVE KICKOFF


July 21, 2022

Made possible with support from the California Health Care Foundation










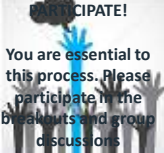
1

WELCOME, INTRODUCTIONS, AND OVERVIEW OF THE DAY



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WELCOME AND TECHNOLOGY SLIDE

<p>Use your video, if possible</p> 	<p>If you have headphones and a mic use them</p> 	<p>Keep yourself muted unless you are speaking</p> 	<p>Make sure your name is listed, include your pronouns</p> 
<p>Materials for this meeting will be sent following the meeting.</p> 	<p>If you need some support, use the chat feature</p> 	<p>If you lose connection, just log back on. We will be waiting for you</p> 	<p>PARTICIPATE!</p> <p>You are essential to this process. Please participate in the breakouts and group discussions</p> 



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LAND & LABOR ACKNOWLEDGMENT

We acknowledge that the COE-BT Collaborative members exists on the occupied territory of over 100 tribes. This land has been stewarded by Indigenous people since time immemorial. We also acknowledge that much of what we know of this country today has been made possible by the labor of enslaved Africans and their descendants.



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TIME	AGENDA ITEM	FACILITATOR
9:00 – 9:10 AM	Coaches, Faculty, and Staff Introductions	Jennifer Clancy, CIBHS
9:10 – 9:20 AM	Why This Collaborative Now?	Jennifer Clancy, CIBHS
9:20 – 9:50 AM	Meet the COEBT Faculty for Foundational Training	Keris Jän Myrick, Developer/Host for Podcast <i>Unapologetically Black Unicorns</i> Elizabeth Morrison, EM Consulting Ruth Shim, UC Davis School of Medicine
9:50 – 10:20 AM	COE-BT Team Introductions	COE-BT Teams
10:20 – 10:30 AM	BREAK	
10:30 – 11:20 AM	Breakout Sessions: COE-BT Teams Meet with Coaches and CIBHS Project Staff	Ebony Chambers McClinton, Stanford Sierra Youth & Families Luis Garcia, Luis Garcia PsyD Consulting Services LLC David Salinas, CIBHS / Jim Meyers, Meyers Health Consulting Elizabeth Morrison, EM Consulting Jennifer Clancy, CIBHS Samantha Spangler, CIBHS
11:20 – 11:35 AM	Program Overview and Timeline	Jennifer Clancy, CIBHS
11:35 – 11:50 AM	Introduction to the Telehealth Maturity Assessment and Client Survey	Jim Meyers, Meyers Health Consulting
11:50 AM – 12:00 PM	Next Steps and Adjourn	Jennifer Clancy, CIBHS

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COE-BT SPONSOR: CHCF



Catherine Teare, MPP
Associate Director
People-Centered Care



California Health Care Foundation
HEALTH CARE THAT WORKS FOR ALL CALIFORNIANS




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CIBHS



Percy Howard, LCSW
CIBHS President & CEO



Jennifer Clancy, MSW
Director, Strategic Initiatives



Samantha Spangler, PhD
Research and Evaluation Director



David Salinas, MPH
Sr. Associate



Kelly Bitz, BA
Associate



Robin Texeira, BA, CHPC
Associate / HIPAA Privacy Officer



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CORE DESIGN TEAM



Jennifer Clancy, MSW
Director, Strategic Initiatives, CIBHS



David Salinas, MPH
Sr. Associate, CIBHS



Keris Myrick, MBA, MS, CPMC
Podcast Developer and Host,
Unapologetically Black Unicorns



Samantha Spangler, PhD
Research and Evaluation Director, CIBHS



Jei Africa, PsyD, MSCP, CATC-V
Director, Behavioral Health and Recovery Services, Marin County



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FACULTY



Tamu Green, PhD
CEO, Equity and Wellness
Institute/Nolfo Consulting



Adèle James MA, CPC
Founder/Principal, Adele
James Consulting



**Keris Myrick, MBA,
MS, CPMC**
Podcast Developer
and Host,
*Unapologetically
Black Unicorns*



John Torous, MD, MBI
Director
Digital Psychiatry Div.,
Beth Israel Deaconess
Medical Center



Elizabeth Morrison, PhD
CEO, EM Consulting




Ruth Shim, MD, MPH
Associate Dean
UC Davis School of Medicine




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COACHES




Luis Garcia, PsyD,
Principal, Luis Garcia
Consulting Services




Alli Moreno, BA
Operations Manager,
Counselor, Consultant
EM Consulting




David Salinas, MPH
Sr Associate, CIBHS




Ebony Chambers McClinton, BA
Chief Equity & Partnership Officer,
Stanford Sierra Youth & Families



Elizabeth Morrison, PhD
CEO, EM Consulting




Jim Meyers, PhD, MHA, LFACE
Principal/Owner, Meyers Health Consulting
(Coaching Technical Advisor)




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WHY THIS PROJECT NOW?




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MEET THE COE-BT FACULTY FOR FOUNDATIONAL TRAINING




Elizabeth Morrison, PhD
CEO, EM Consulting



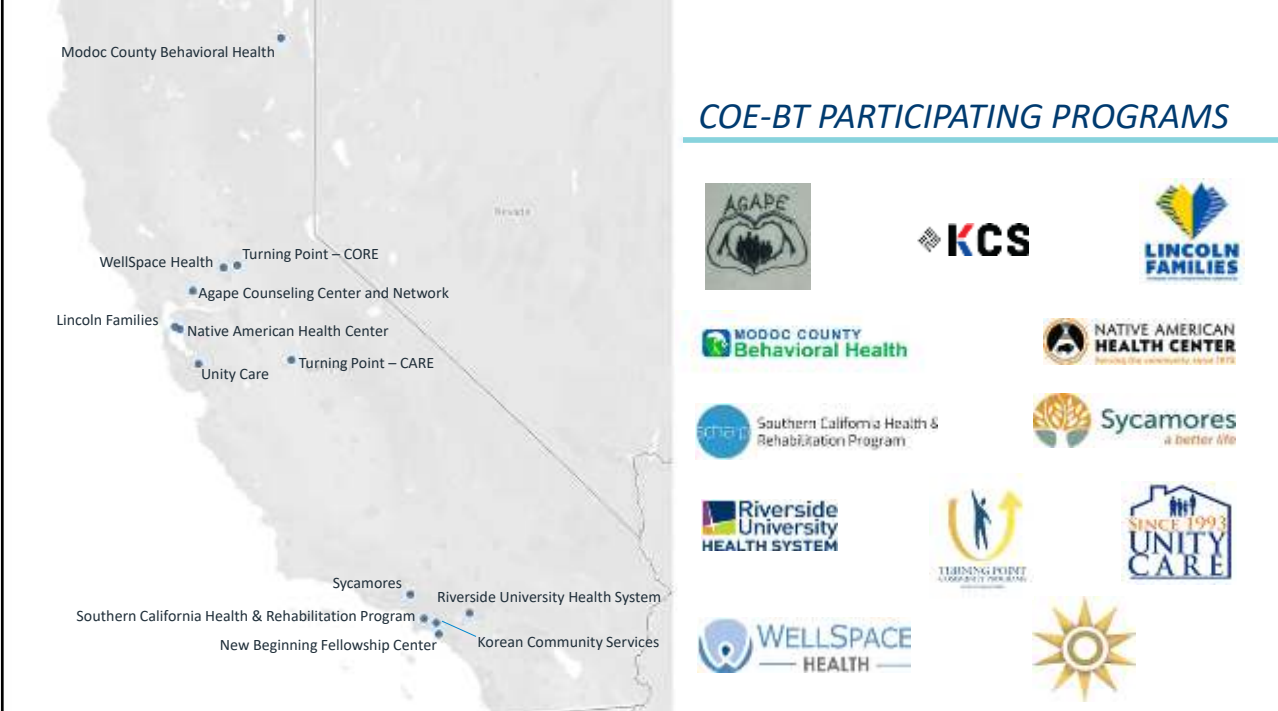
Ruth Shim, MD, MPH
Associate Dean, UC David School of
Medicine



Keris Myrick, MBA, MS, CPMC
Podcast Developer and Host,
Unapologetically Black Unicorns



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The image displays a map of California with several locations marked by blue dots and labeled with the names of participating programs. To the right of the map, the title "COE-BT PARTICIPATING PROGRAMS" is followed by a grid of logos for each program.

COE-BT PARTICIPATING PROGRAMS

- AGAPE
- KCS
- LINCOLN FAMILIES
- MODOC COUNTY Behavioral Health
- NATIVE AMERICAN HEALTH CENTER
- Southern California Health & Rehabilitation Program
- Sycamores a better life
- Riverside University HEALTH SYSTEM
- TURNING POINT COMMUNITY SERVICES
- SINCE 1993 UNITY CARE
- WELLSPACE HEALTH
- WellSpace Health
- Turning Point – CORE
- Agape Counseling Center and Network
- Lincoln Families
- Native American Health Center
- Unity Care
- Turning Point – CARE
- Sycamores
- Southern California Health & Rehabilitation Program
- New Beginning Fellowship Center
- Riverside University Health System
- Korean Community Services

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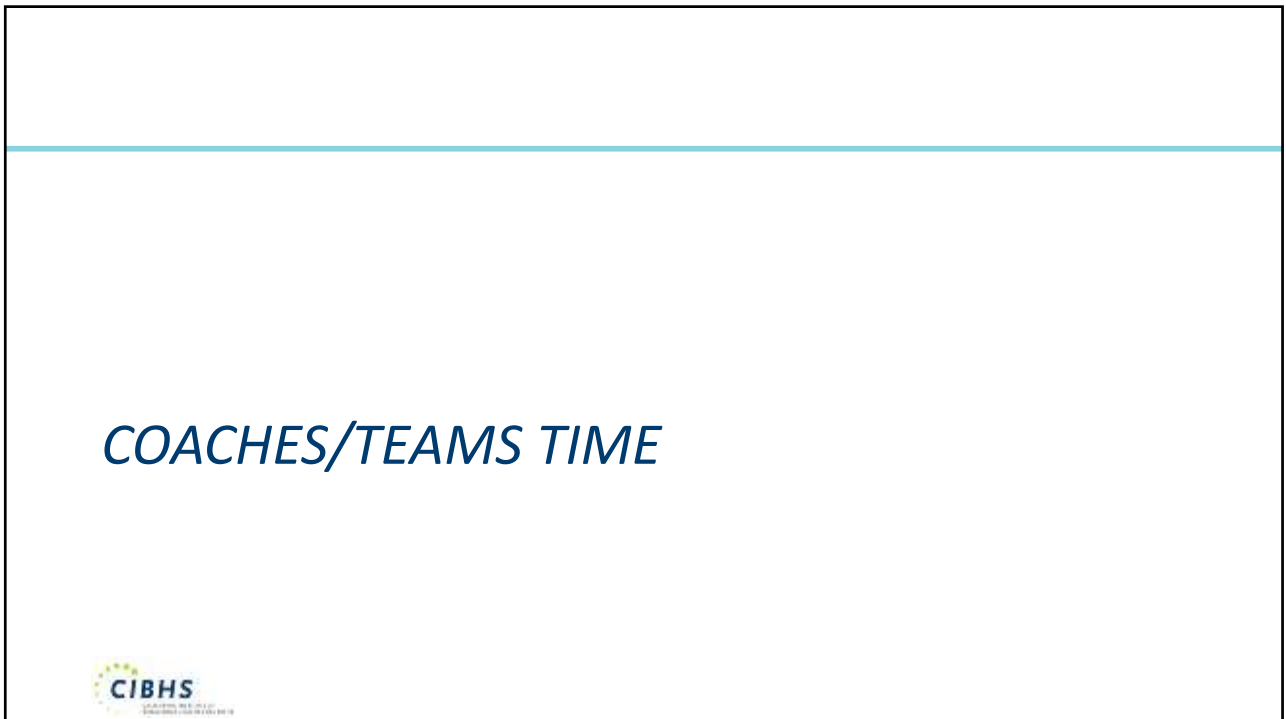
TEAM INTRODUCTIONS:

- 1 team member introduces all other team members
- What is one reason your organization joined COE-BT?

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TIME WITH COACHES/STAFF: BREAKOUT SESSIONS

There will be 3 rounds of 15-minute breakouts, 2-3 teams in each round meeting with 1 coach/staff. Teams stay together for each round and coaches will rotate.

Each member of the team answers different questions in each round.

Round 1:

- The last few years have been very hard for behavioral health and social service staff. What has been one of your sources of strength?

Round 2:

- When you learned that this project focused on equity in telehealth, what excited you the most? What is one thing about advancing equity that is worrying you?

Round 3:

- What is one thing your team does not know about you that you would like to share?

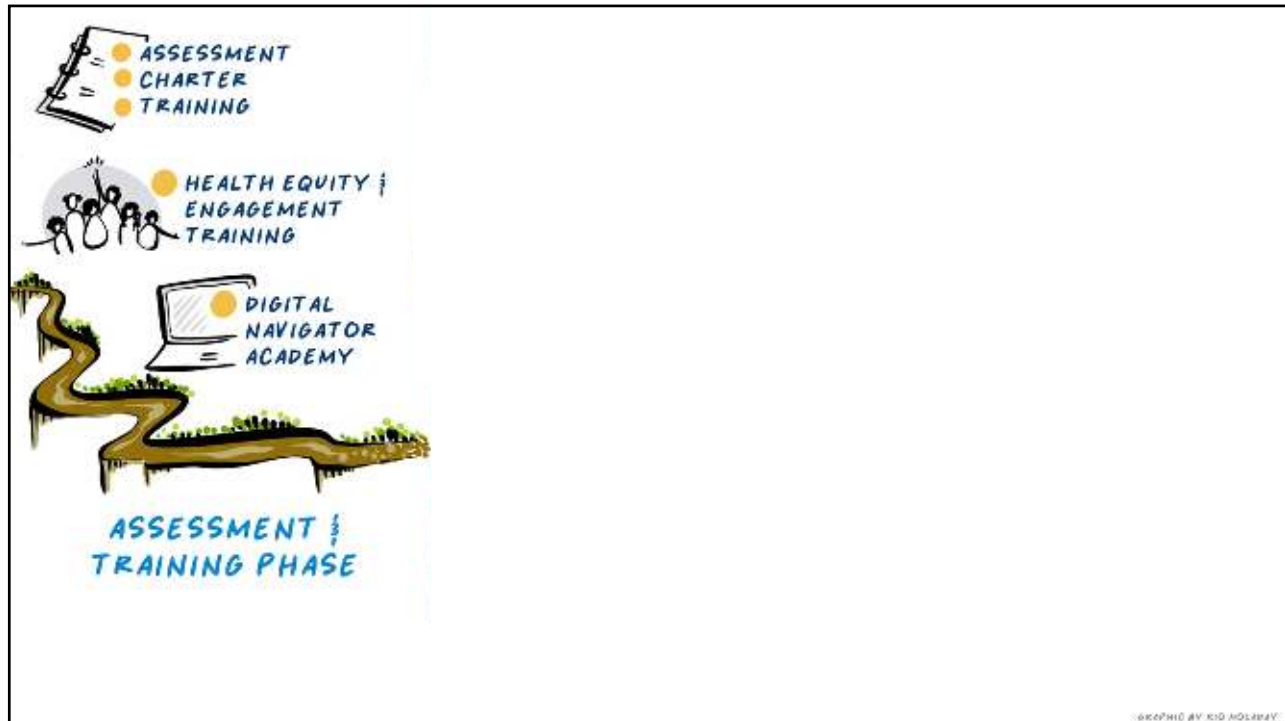


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PROGRAM OVERVIEW



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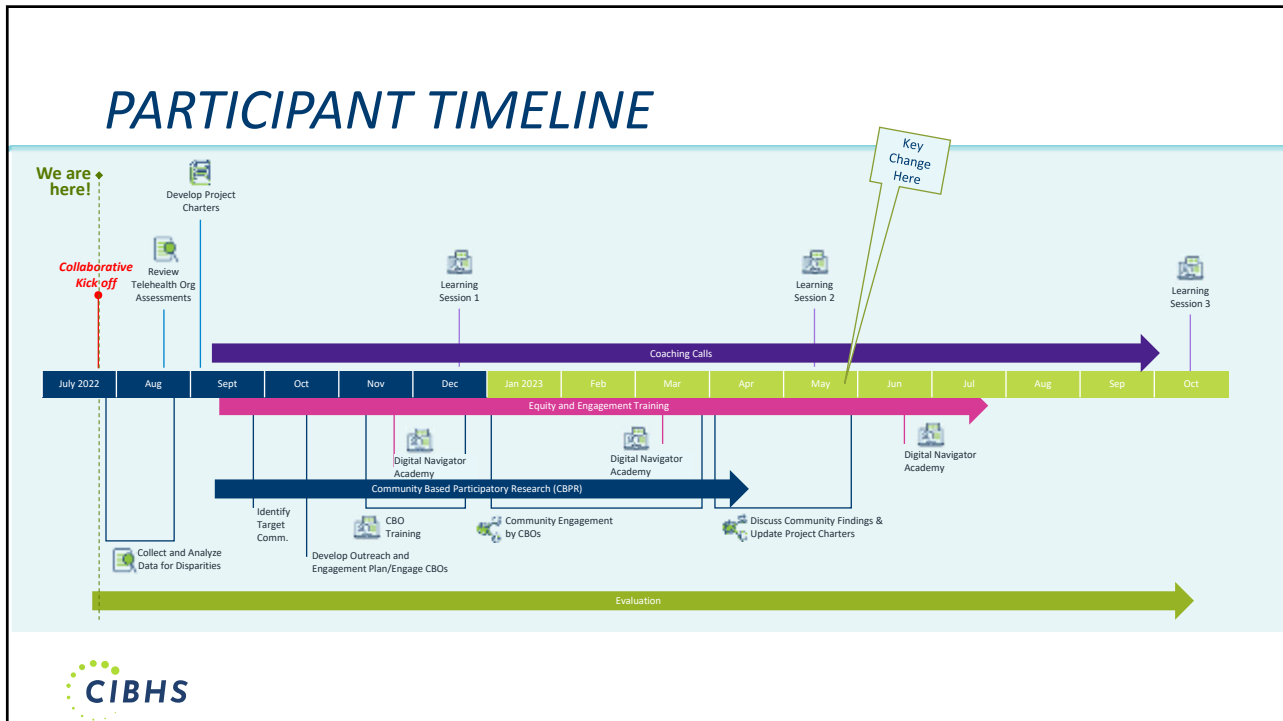
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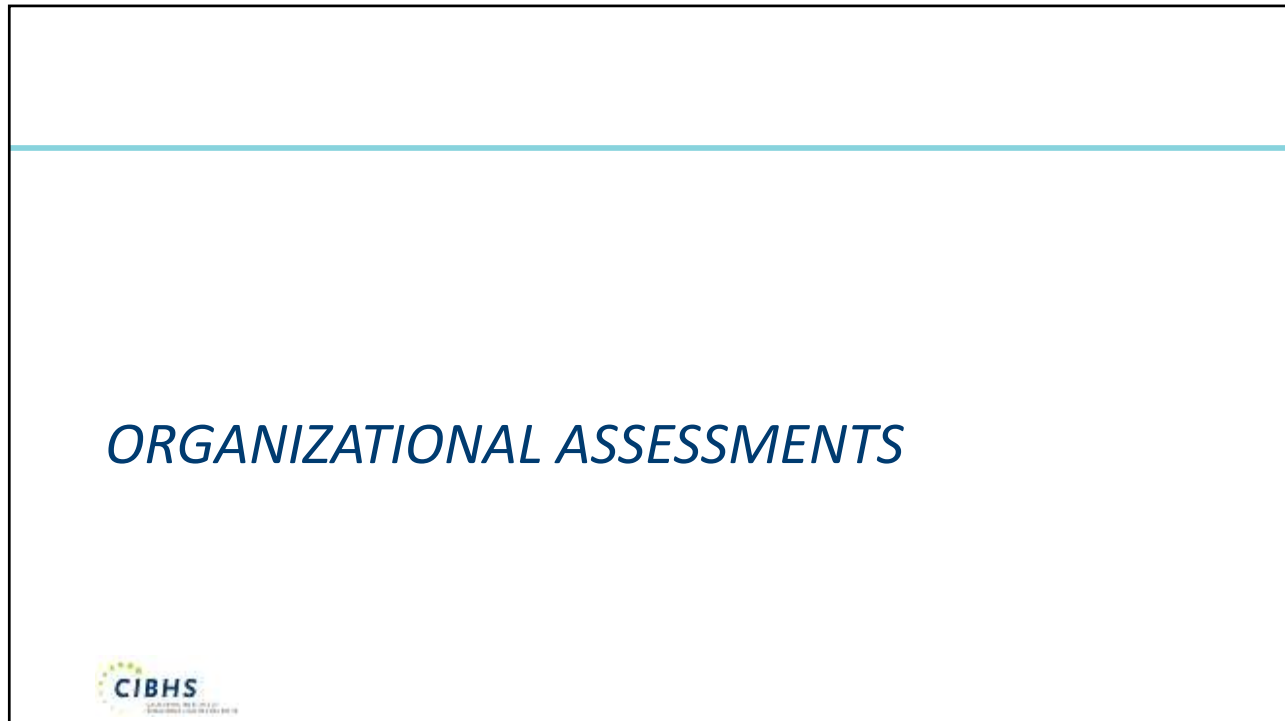
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**INTRODUCTION TO:
THE TELEHEALTH MATURITY ASSESSMENT
AND CLIENT SURVEY**

JIM MEYERS, DRPH
MEYERS HEALTH CONSULTING



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**ORGANIZATIONAL
TELEHEALTH MATURITY
ASSESSMENT**



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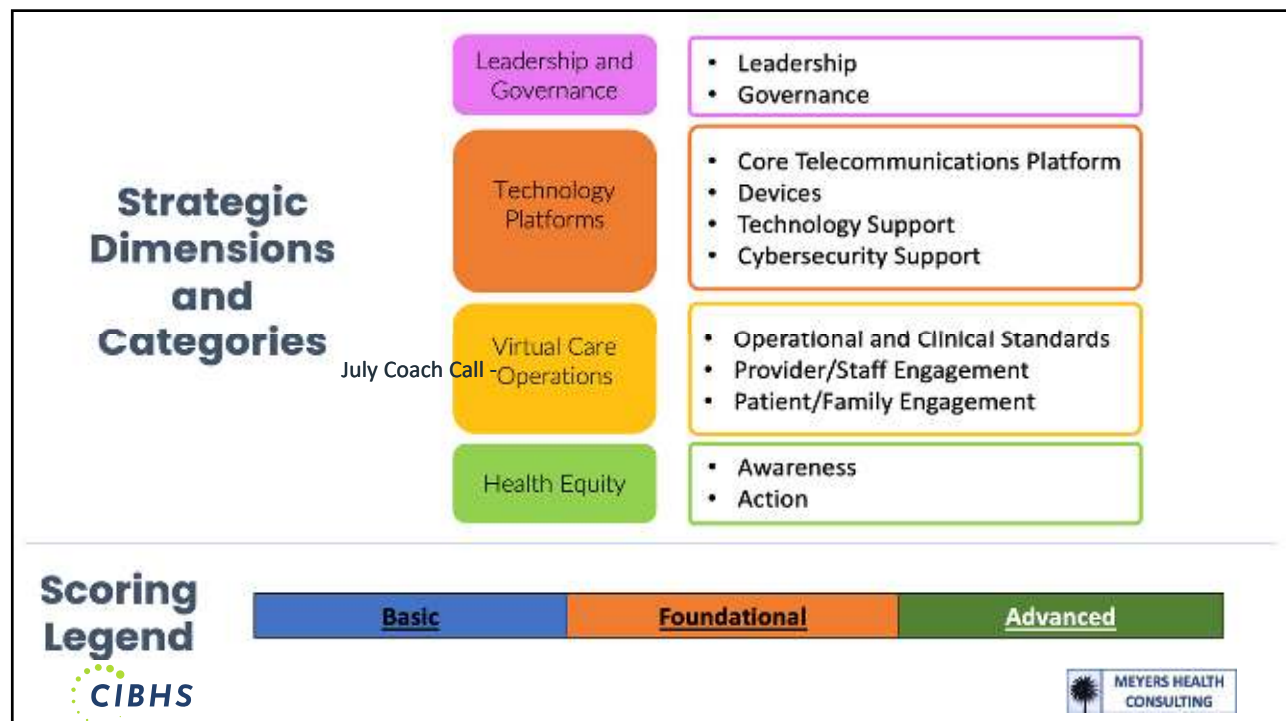
ORGANIZATIONAL ASSESSMENT

- **What is the Assessment?**
 - Commissioned by the Safety Net Institute of California and Authored by Jim*, it was curated by Safety Net Telehealth experts throughout California and then edited by Dr. Ritchie Rubio, Director of Practice Improvement and Analytics at SF Dept. of Public Health, to reflect specific behavioral health equity content.
 - “Top-to-bottom” baseline assessment of where they are today and build awareness where they might go in the future
 - Across strategic dimension (Leadership, Governance, Technology Platform, Operations Deployment, Equity)
 - Across Tactical Activities (Pre-visit, Visit, Post-visit)
 - Designed to assist teams build knowledge, take action and inform strategic planning



* Meyers, JF. (2021) Virtual Care Strategic and Tactical Deployment Maturity Self-Assessment Model. Oakland, CA: Commissioned by The California Health Care Safety-Net Institute. Contact jim@meyershealthconsulting.com with any inquiries for free use.

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Self-Score:		Basic	Foundational	Advanced	Self-Rating-Choose	Optional Comments (1-2 Details You May Wish To Share To Explain Your Self-Assessment)	Optional Comments (1-2 Topics For Which You Wish To Receive More Support)
Category	Description	Indicators					
Provider/Staff Engagement	How proficient are providers and staff in using behavioral telehealth tools in terms of access (hardware, software, connectivity, setting, language), training, usability, and coordination across teams?	<ul style="list-style-type: none"> Reactive-response or ad hoc behavioral telehealth processes are in place less than optimal training, usability, and access for behavioral health/SUD providers and staff ... 	<ul style="list-style-type: none"> Behavioral telehealth operations provide a seamless client visit flow that is perceived by both behavioral health/SUD provider and clients as equal or better than previous in-person only ... 	<ul style="list-style-type: none"> The organization actively engages in reimagining equitable care across all professions and all types of client needs Improves health and care experience outcomes beyond that experienced by both behavioral health/SUD clients and providers in previous in-person only operations ... 	Click here then Choose From Dropdown Arrow to the Right of this Box →		

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TACTICAL ASSESSMENT

Tasks

Clients Receive Pre-visit Screening or Intake Surveys to Complete Prior to the Visit

Video Visit or Telephone Visit allows Multiple Participants (i.e., multidisciplinary team members) In/Out of the Connection Seamlessly

Client Psychoeducation Materials and Other Clinical Tools (e.g., digital worksheets) Can Be Shared During The Telehealth Visit

Assessment

We Would Like To Share Our Success	✓
Vendor	Zoom
Please Check Mark All Maturity Levels That Apply	
This column does not apply to our program or organization	
No planning or operations exist yet	
Have begun planning but not started implementing operations	
Have initiated ad hoc (as needed) or very basic operations	
Establish Secure and HIPAA-compliant Technology Platform	✓
Establish Workflow Protocols and Initial Staffing	✓
Establish More Permanent Staffing	✓
Establish Policies and Procedures	✓
Establish Quality Oversight Processes	✓
Establish Metrics for Operational Processes and Outcomes	✓
Establish Measures and Actions for Improving Equitable Access	✓
Complete Revenue Cycle/Reimbursement Workflows/Get Paid	✓



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ORGANIZATIONAL ASSESSMENT

- Why Is CIBHS Using An Assessment?
 - Teams can quickly assess where they are and build knowledge about where they might go next
 - Provides a baseline assessment
 - Results can be used to:
 - Build Equity-centering AIM Statements
 - Assist CIBHS with planning, coaching and project evaluation



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ORGANIZATIONAL ASSESSMENT

- How Do I Complete the Assessment?
 - Each team members completes the assessment
 - Assessment takes about 30-40 minutes to complete
 - Team leader completes the demographic and utilization data tab
 - Team Leader holds 1 hour meeting to reach consensus on one team response
 - Key definitions are provided in the assessment



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ORGANIZATIONAL ASSESSMENT

- **Timeline**
 - Today: teams receive their assessment (Excel document)
 - August 1st: team members complete assessment and send to team leader
 - August 12th: teams meet prior to the end of this day – team leader submits one team response to:
jim@meyershealthconsulting.com



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ORGANIZATIONAL ASSESSMENT

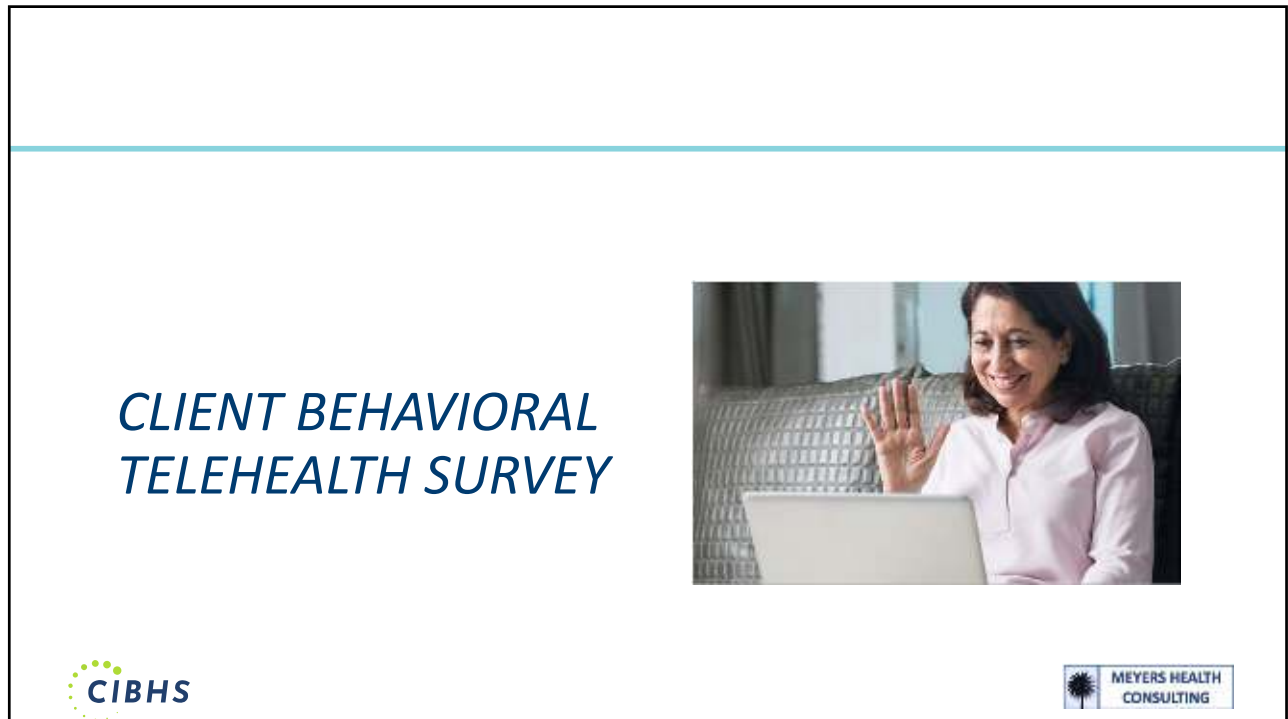
- **What You Will Get In Return**
 - Your data and a comparison to aggregated teams' data
 - Overall findings report
 - PowerPoint slide summary to show senior leaders
 - Presentation of findings and discussion on August 25th
- **Contact Person for All Questions**
 - Jim Meyers at jim@meyershealthconsulting.com or 510-761-1609 (cell)



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CLIENT SURVEY

- **What is the Survey?**
 - The survey was adapted by CIBHS from a survey published by the Policy Studies Center at the University of Texas*
 - The survey is intended to be taken by people who are served by the teams
 - It is voluntary, online, anonymously stored, analyzed only by CIBHS staff and takes approximately 10 minutes to complete



* Reddick, C., Harris, R., Enriquez, R., Sharma, B. (YYYY). *Digital Inclusion Survey and Assessment: A Report on Digital Connectivity Capabilities and Outcomes in San Antonio and Bexar County*. City of San Antonio's Office of Innovation and Bexar County Commissioner's Court. Retrieved from: https://hcap.utsa.edu/wp-content/uploads/2020/06/Measuring-the-Digital-Divide-Report_Final_City.pdf



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CLIENT SURVEY

- **Why Are We Using the Survey?**
 - Gain knowledge of how the people who use our services assess the value of our behavioral telehealth services
 - Results will be used:
 - By teams as they reflect on and build the best AIM statement to initiate project activities and,
 - Will assist CIBHS with learning community activity planning, coaching during the project and project evaluation.



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CLIENT SURVEY

- How Do We Deploy the Survey?
- CIBHS will provide an online survey link and an email introduction to be sent directly to clients.
- Teams are asked to have a minimum of 15 clients surveyed.
- Teams can decide how to sample their client population, but please try to distribute a survey to a representative group of individuals reflecting the demographic make-up of your served population



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CLIENT SURVEY

- Timeline
- Today: teams receive their survey link and introduction email
- August 1st: teams to distribute survey link to clients no later than this day
- August 12th: all surveys completed



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CLIENT SURVEY

- **What You Will Get In Return**
 - Aggregated responses from your clients and all who responded to the survey across all teams
 - PowerPoint slide summary to show senior leaders
 - Presentation of findings and discussion on August 25th
- **Contact Person for All Questions**
 - Samantha Spangler at spangler@cibhs.org or Robin Texeira at rtexeira@cibhs.org




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**ARE THERE ANY
QUESTIONS ON
ASSESSMENT OR SURVEY
PROCESS?**



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NEXT STEPS AND ADJOURN




The CIBHS logo is located in the bottom left corner of the slide. It features a circular icon with a sunburst pattern and the text 'CIBHS' in a bold, sans-serif font. Below the main text, there is smaller text that reads 'CALIFORNIA INSTITUTE OF BIOMEDICAL HEALTH SERVICES'.

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NEXT STEPS

- August 12: Return Completed Telehealth Maturity Assessment
- August 25: Analysis of Results
- Look for email from Robin Teixeira (rtexeira@cibhs.org) to schedule Monthly Coaching
- Take Stock of Needed Resources and Team Gaps to Shape your COE-BT Work
- Calendar Training Dates




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SEE YOU NEXT TIME!

**Thursday
August 25
9:00-12:00pm**



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