



**Yakima Valley
Farm Workers Clinic**

somos **familia**

Integrated Behavioral Health in Primary Care: Our story in engaging the underserved

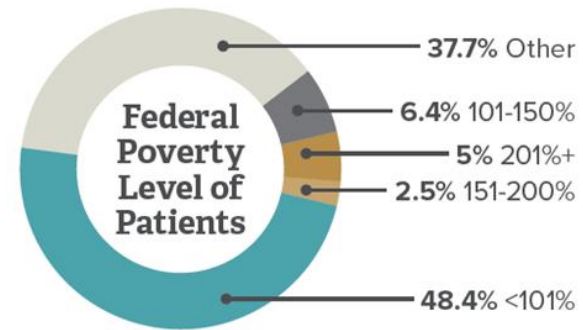
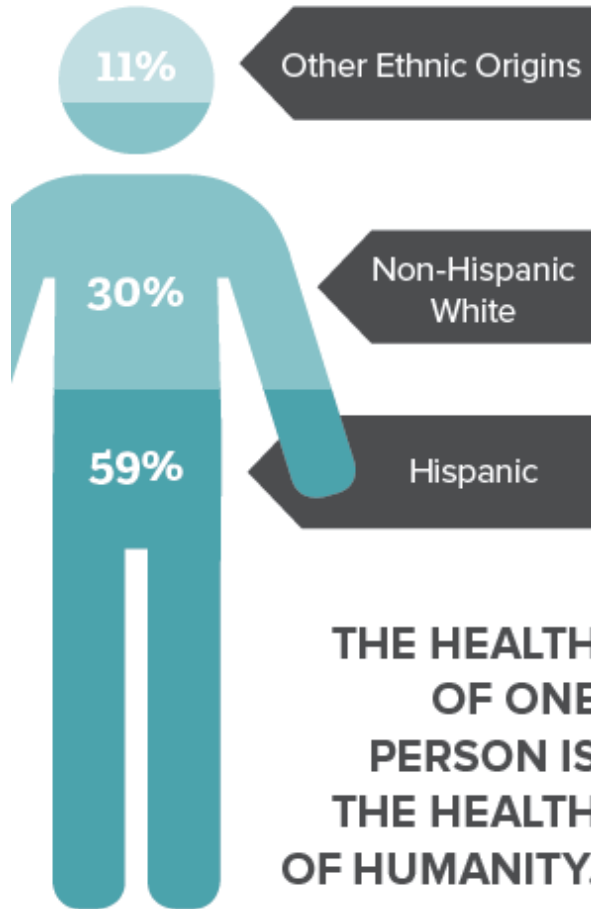
Brian E. Sandoval, Psy.D.

Program Manager, Primary Care Behavioral Health

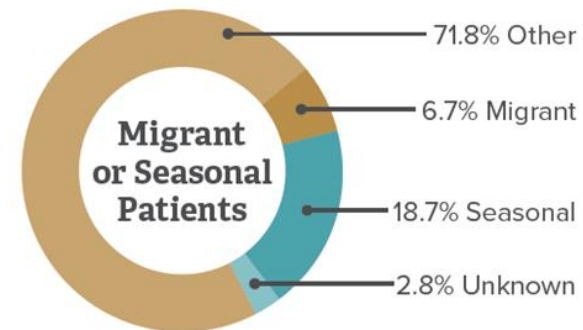
Dinorah Lopez

Patient, Salud Medical Center

Our Population



46.4% of our patients speak Spanish as their primary language.



Yakima Valley Farm Workers Clinic

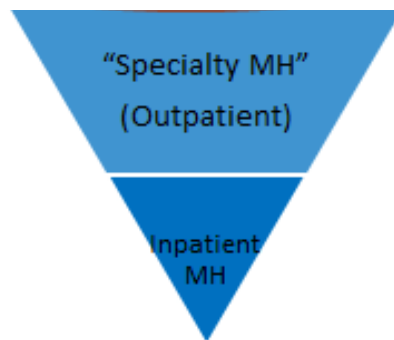
- Large FQHC with 16 clinics in Oregon and Washington
- **2012**
 - Began process of PCPCH and NCQA
 - Primary Care BH Pilot – 2 sites
- **2013**
 - Primary Care BH expanded to 4 sites
- **2014**
 - PCPCH and NCQA achievement
 - Primary Care BH expanded to 8 sites



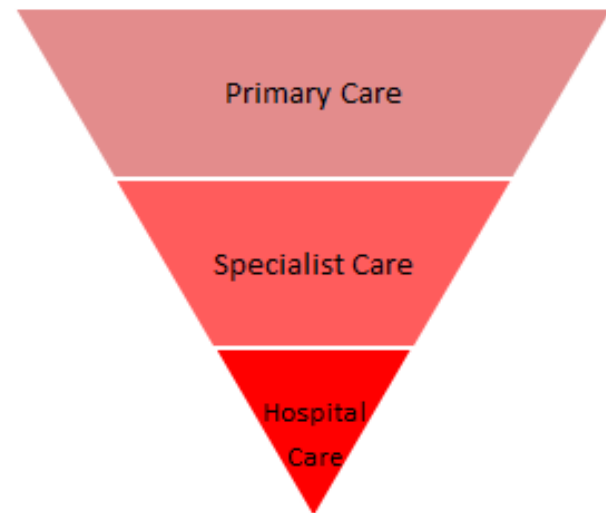
Why Integrate?

Traditional system does not support patient needs

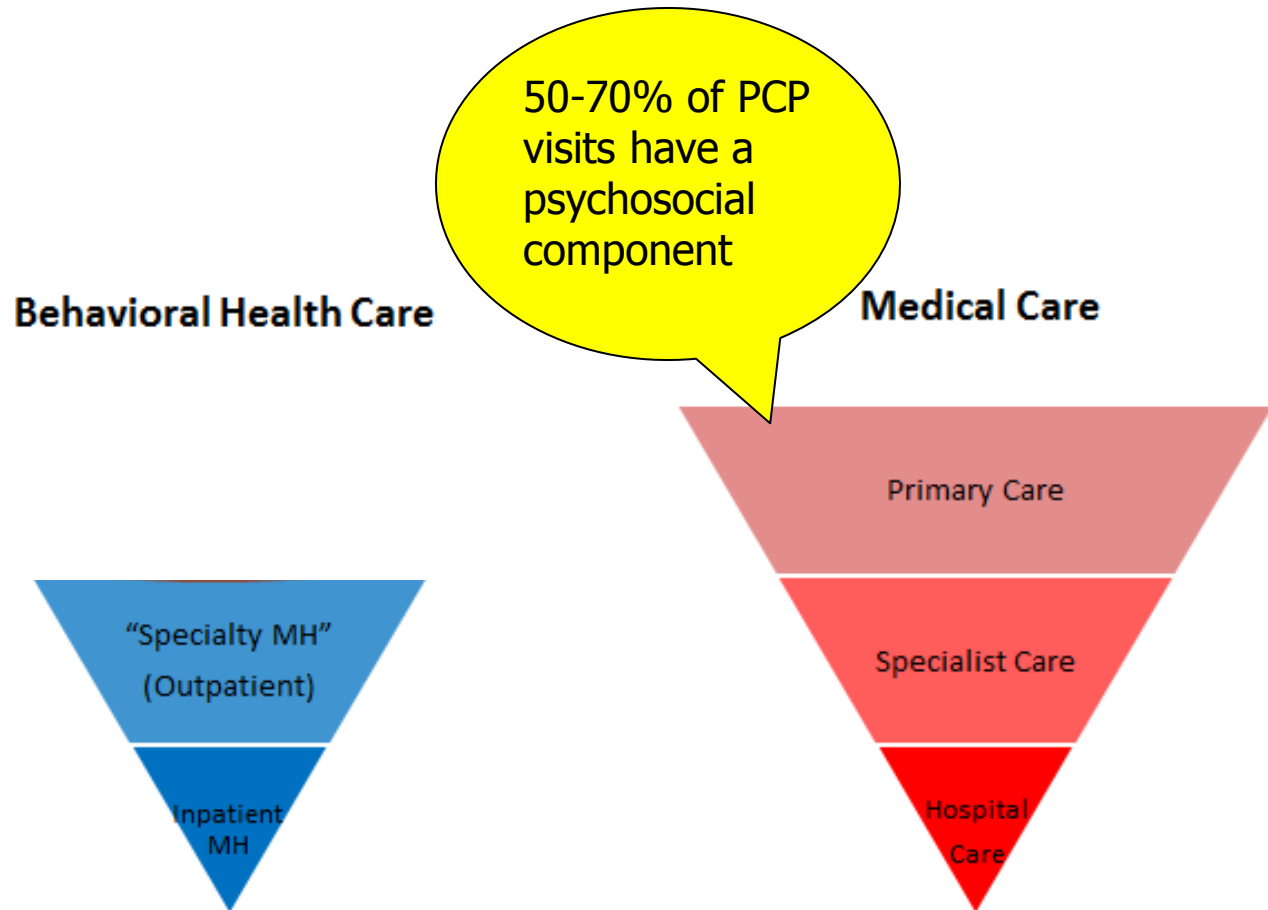
Behavioral Health Care



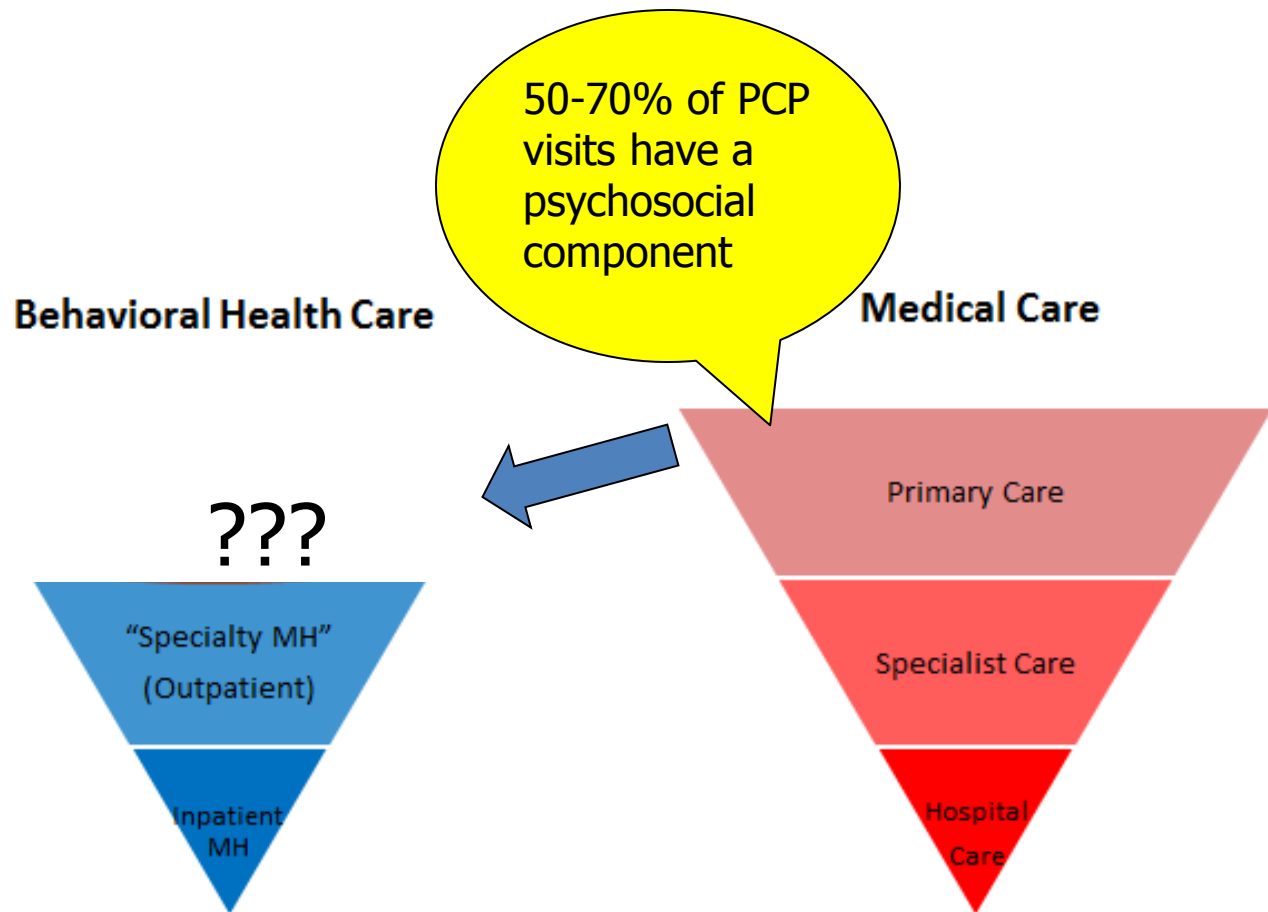
Medical Care



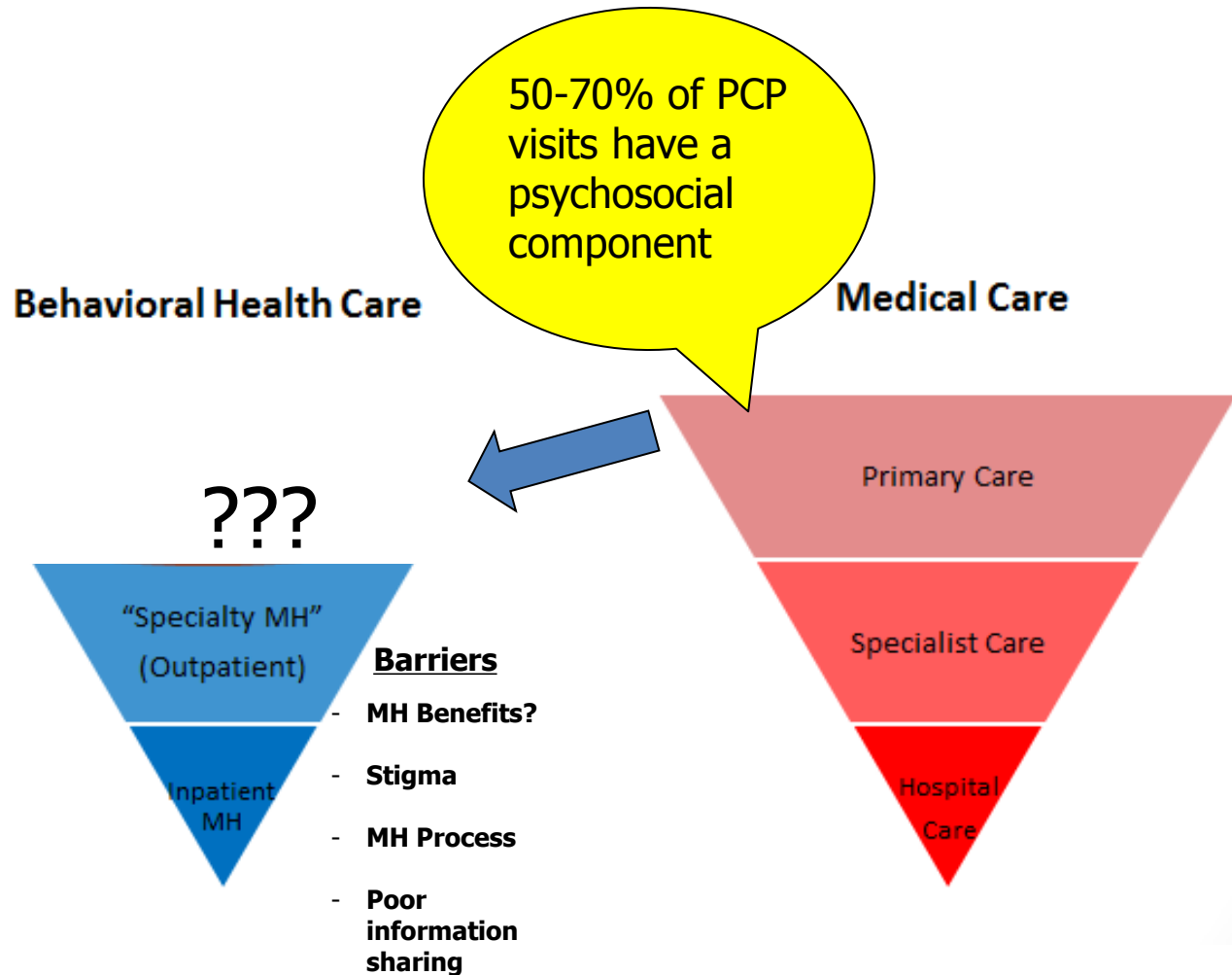
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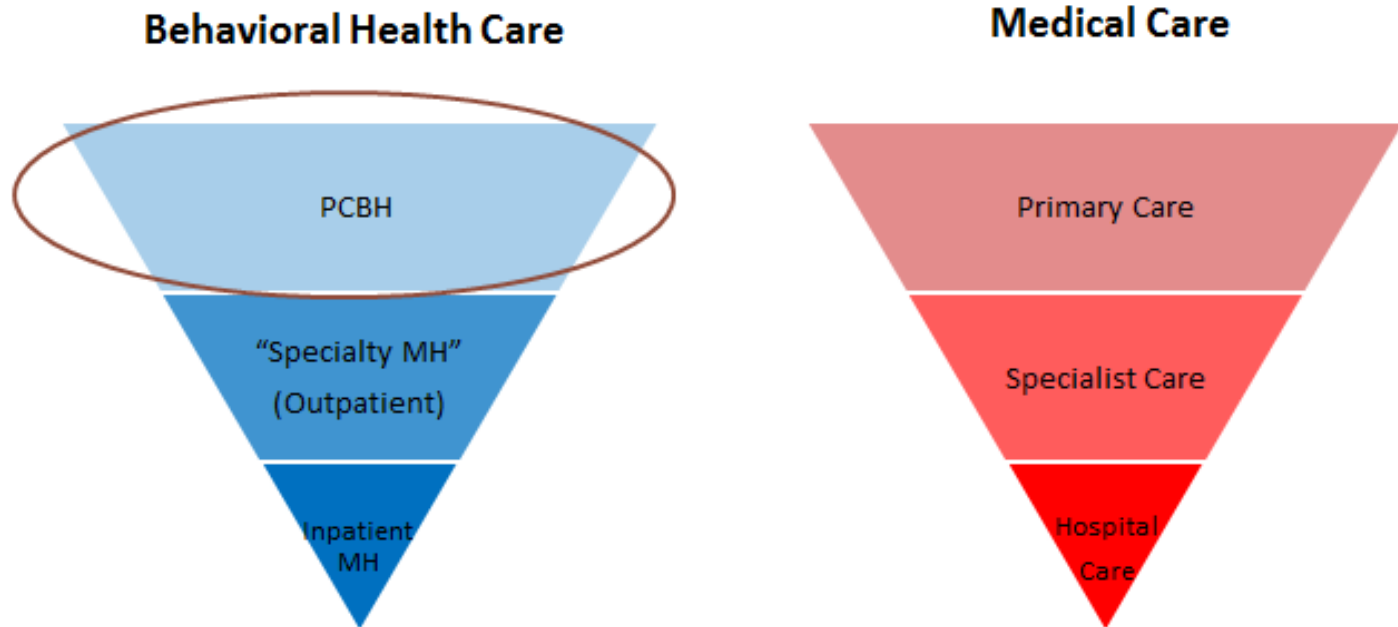


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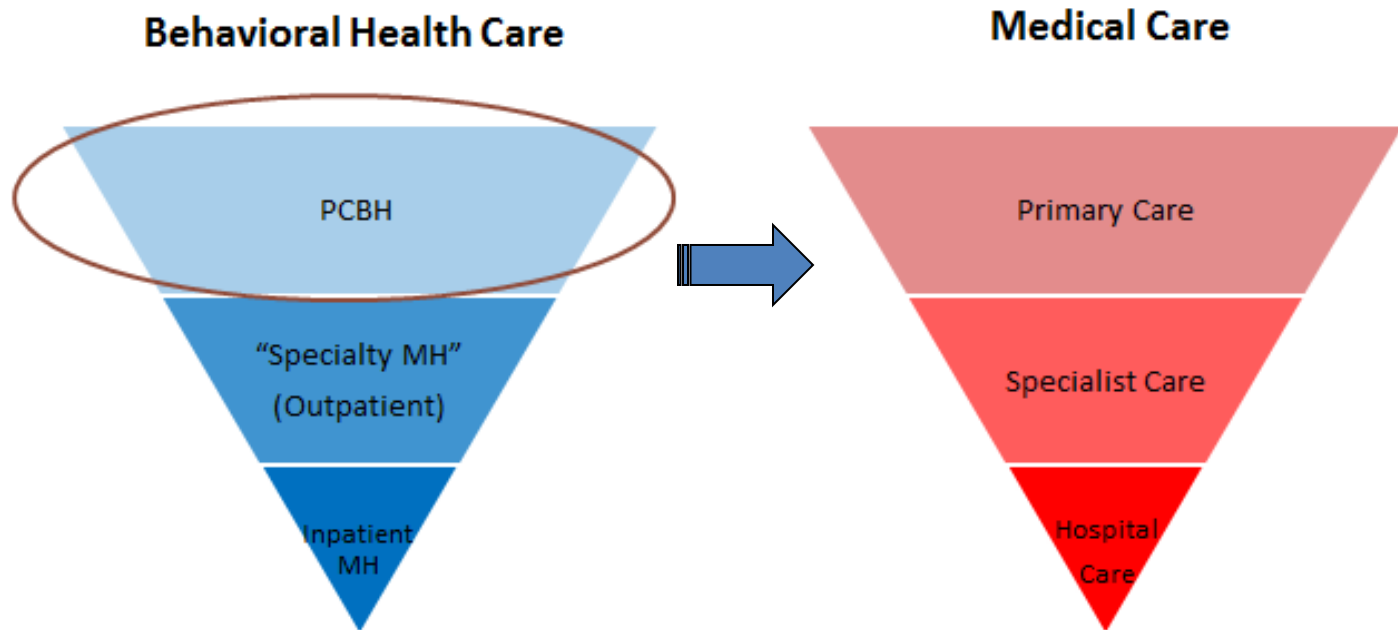
Primary Care Behavioral Health: The logical solution

Population-based BH service delivery to match community need



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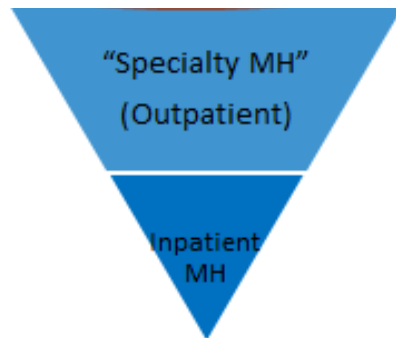
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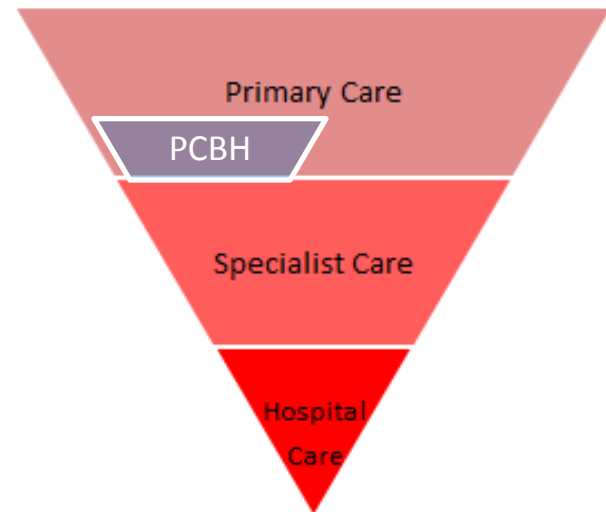
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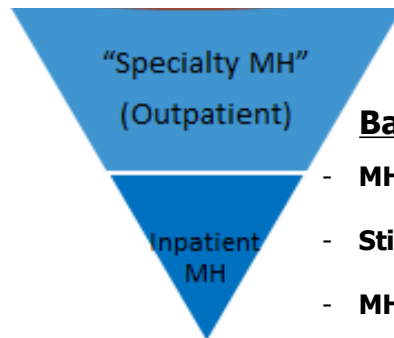
"Health" Care



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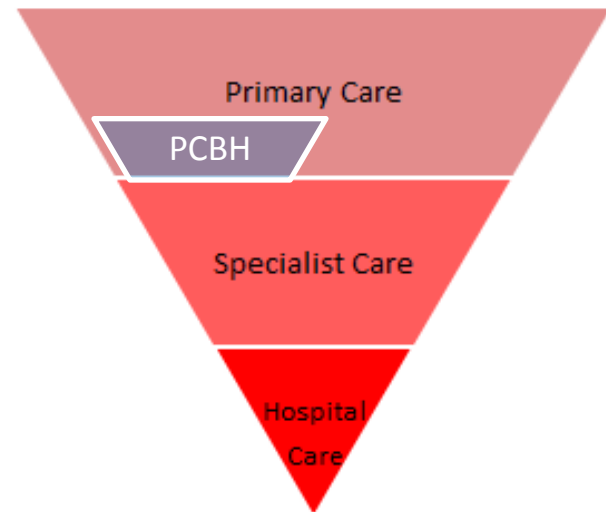
Behavioral Health Care



Barriers

- MH Benefits?
- Stigma
- MH Process
- Poor information sharing

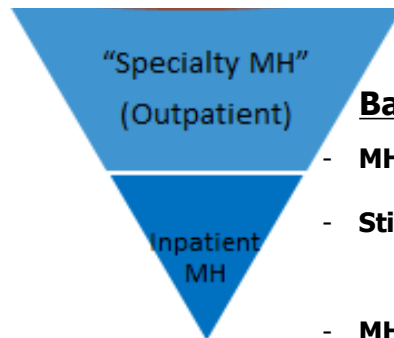
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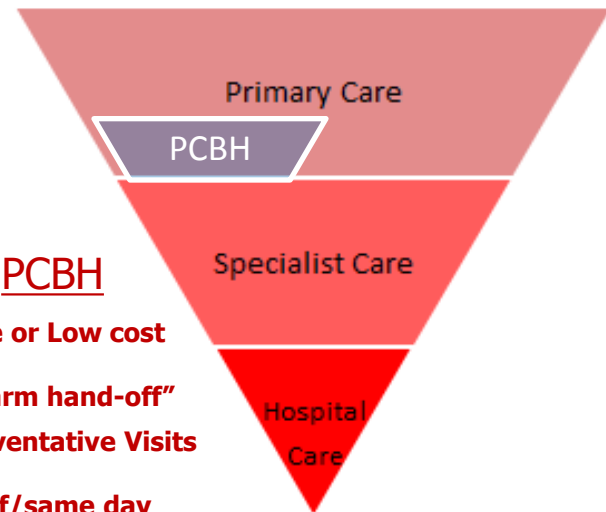
Behavioral Health Care



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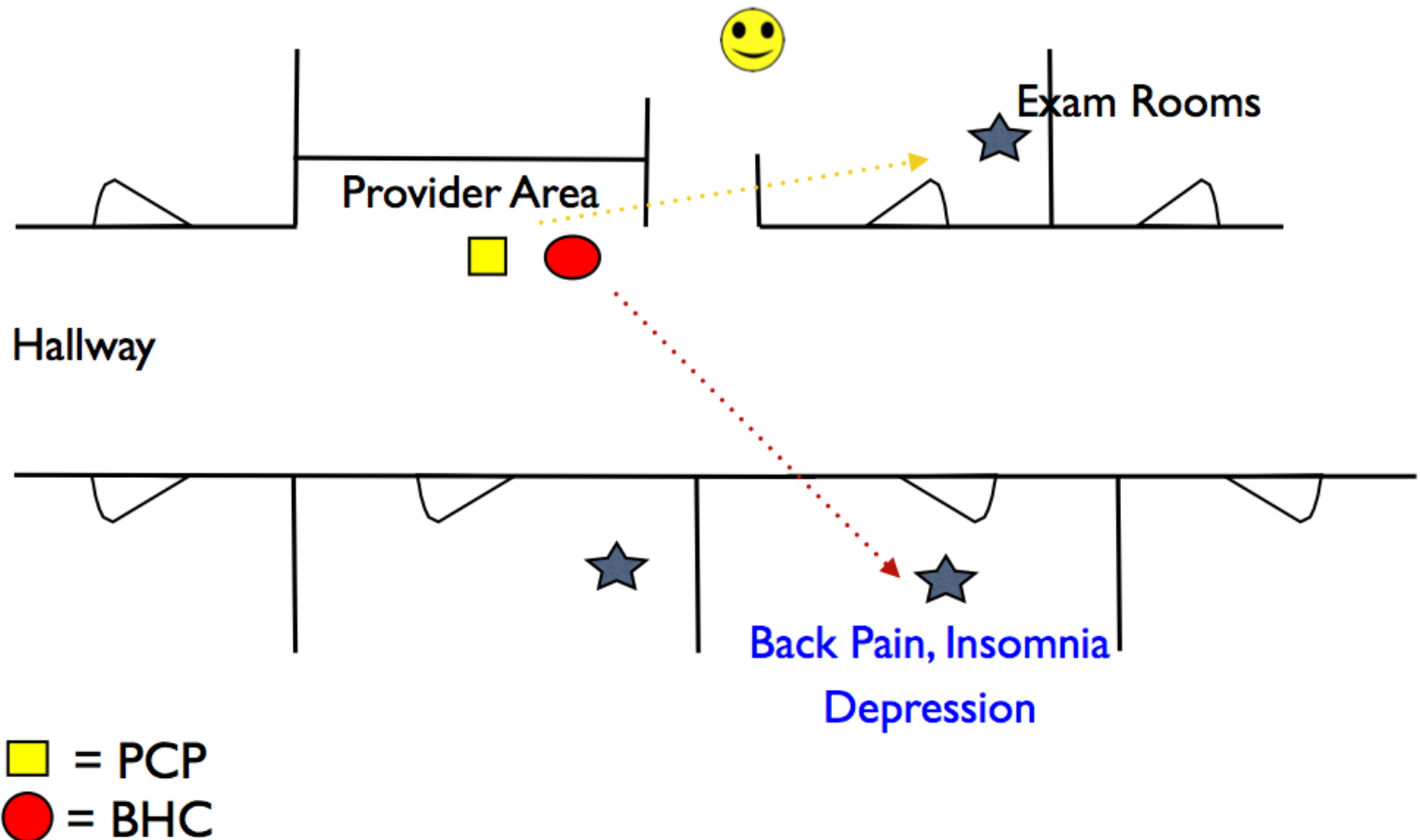
"Health" Care



PCBH

- Free or Low cost
- "Warm hand-off"
- Preventative Visits
- Brief/same day intervention
- Short/episodic care
- Verbal consultation with care team
- Shared documentation in EMR

PCBH Workflow



Does it Work?

- Population Impact

Our BHCs Average:

≈ 1300 Patient visits per year

≈ 800 Unique patients seen per year

≈ 8-12% of clinic population seen

- Outcomes (PHQ-9, GAD-7, ORS)

- 81% "Treatment Response" (1 measure/1 visit)

- 60% "Global Improvement" (2+ measures/ 1 visit)

- 88% "Sustained Global Improvement"

The Patient Perspective:

Dinorah Lopez