

READY TO DEVELOP OR DEEPEN YOUR SKILLS?

Take our questionnaire to assess your practice. Continue to explore the Core Competencies and dive into our publications and resources. You are on your way to building integrated care into practice, and together, we will Make Health Whole.

COMPETENCY 1

identify assess

HOW OFTEN DOES YOUR PRACTICE...	ALWAYS	SOMETIMES	NEVER
1 identify behavioral or psychological factors in common primary care medical conditions (e.g., depression comorbid with diabetes and how blood sugar levels may affect cognition and mood)?			
2 interview effectively to identify problem, degree of functional impairment, and symptoms?			
3 obtain information from caregivers and parents in the assessment process (e.g., help a caregiver identify health risks for a child with asthma residing with a smoker, and engage the parents in a conversation about change)?			
4 recognize the effect of acute and chronic illness on physical and mental health of caregivers, parents, siblings, and other family members?			
5 select measures to identify common problems (e.g., depression, anxiety, substance use, sleep difficulties, disruptive child or adult behavior), and understand strengths and limitations of screening tools?			

NOTES:



COMPETENCY 2

engage + empower

HOW OFTEN DOES YOUR PRACTICE...	ALWAYS	SOMETIMES	NEVER
1 use interpersonal skills to help patients feel comfortable and motivated?			
2 use interpersonal skills and approaches that help address stigma and overcome barriers to accessing behavioral health services?			
3 engage patients to understand their choices and encourage an active role in their care?			
4 explain to the patient and family the roles and responsibilities of each team member and how all will work together to provide services?			
5 evaluate readiness-to-change, and emphasize patient-driven change?			

NOTES:

COMPETENCY 3

create + implement

HOW OFTEN DOES YOUR PRACTICE...	ALWAYS	SOMETIMES	NEVER
<p>1 implement evidence-based interventions (e.g., cognitive behavior therapy, parent–child interaction therapy, motivational interviewing, family psychoeducation, and problem-solving therapy)?</p>			
<p>2 offer interventions for patient self-care, symptom reduction, and functional improvement—with self-regulation such as deep breathing, relaxation, sleep hygiene, increased exercise, problem solving, and assertive communication?</p>			
<p>3 help care team engage challenging patients in a manner that enhances care?</p>			
<p>4 plan care that takes into account relevant physical, behavioral, cognitive, environmental, and social factors, and considers health literacy and cultural beliefs?</p>			
<p>5 monitor patient progress on behavioral health factors to ensure improvement of clinical symptoms?</p>			

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COMPETENCY 4

collaborate + strengthen

HOW OFTEN DOES YOUR PRACTICE...	ALWAYS	SOMETIMES	NEVER
<p>1 promote effective collaborative decision-making in care teams, including the facilitation of team members communicating their own observations and perspectives?</p>			
<p>2 regard patient care as the responsibility of a team of professionals, not that of a single provider?</p>			
<p>3 clarify the various roles of the behavioral health provider to team members, recognizing when and how to use other team members' specific disciplinary expertise?</p>			
<p>4 work with clinical leaders and care team to design, implement, and evaluate quality improvement initiatives regarding integrated behavioral health?</p>			
<p>5 facilitate team process when there are professional disagreements by focusing on shared goals?</p>			

NOTES:

COMPETENCY 5

connect communicate

HOW OFTEN DOES YOUR PRACTICE...	ALWAYS	SOMETIMES	NEVER
<p>1 proactively help team members better understand their interpersonal and communication styles, and how to work together more effectively?</p>			
<p>2 communicate effectively with team members and patients or families in a manner that is sensitive to power differentials present in a clinical setting?</p>			
<p>3 write clear, concise EHR notes with key information and short, specific recommendations and plan?</p>			
<p>4 encourage patients and families to use the patient portal of the EHR?</p>			
<p>5 tailor team recommendations at the pace and flow of the medical clinic?</p>			

NOTES:

COMPETENCY 6

prioritize + design

HOW OFTEN DOES YOUR PRACTICE...	ALWAYS	SOMETIMES	NEVER
<p>1 use appointment time efficiently (e.g., in a 30-minute appointment—identify problem(s), degree of functional impairment, and symptoms early in the visit)?</p>			
<p>2 measure outcomes of behavior change or goals at every visit, developing alternative treatments when indicated?</p>			
<p>3 stay on time when conducting consecutive appointments?</p>			
<p>4 use intermittent visit strategy to support home-based practice model and self-management?</p>			
<p>5 choreograph behavioral health visits within existing medical services, appointments, and processes?</p>			

NOTES:



COMPETENCY 7

employ provide

HOW OFTEN DOES YOUR PRACTICE...	ALWAYS	SOMETIMES	NEVER
1 ask patients, families, and team members about cultural identities, health beliefs, and illness history that affect health behaviors?			
2 modify interventions for behavioral change in response to social and cultural factors?			
3 recognize the relationships among ethnicity, race, gender, age/ cohort, religion, sexual orientation, culture, disability, and health behavior in primary care?			
4 provide health education materials appropriate to the communication style and literacy of the patient and family, and that reinforce information provided verbally during healthcare visits?			
5 recognize and manage personal biases related to patients, families, health conditions, and healthcare delivery?			

NOTES:

COMPETENCY 8

understand adapt

HOW OFTEN DOES YOUR PRACTICE...	ALWAYS	SOMETIMES	NEVER
<p>1 convey to other team members and patients the typical roles, skills, and activities of behavioral health providers in primary care?</p>			
<p>2 adapt role and activities in the best interest of patient care (e.g., serving as treating provider, consultant, team leader, advocate, care manager, health educator, or community liaison —depending on situation and need)</p>			
<p>3 evaluate own competencies and determine need for continuing education?</p>			
<p>4 act in best interest of the patient by seeking consultation or professional support in situations when needed?</p>			
<p>5 engage the organization and its leaders at key times in making change that promotes integrated behavioral health, and ensure necessary resources for effective integrated behavioral health practice?</p>			

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