

Tips For IBH

- Communicating with Team
 - Discuss clear and concise: *goal, improvement of symptoms and screening scores, if need change of treatment*
 - Talk in a medical setting language (*patients are there to discuss physical symptoms therefore adapt your language in the same way “symptoms”; “connect physical Dx to behavioral health symptoms and Dx”*)
 - Adapt your communication to each provider’s style
 - Communicate always: *Do not assume team is reading your notes or looking for information in the E.H.R*
 - Communication is in real time (*in between patients, huddles, before and after seeing patients, during a patient visit in your exam room or providers room*)
- Treat to Target
 - Screening – Measurable goal - Monitor symptoms for Improvement – Change of Treatment
 - Follow Up on goals and symptoms
 - How do you know they are improving? Measure! Measure! Measure!
- Share Space
 - Sit and follow providers (stalk if you need to! Do not get stuck in your office move, move, move)
 - Remember communication happens in real time
 - Build rapport and relationships with providers! Get to know your providers and their style and do your notes beside them and visit with them
- Be Adaptable and comfortable with change
 - If something in your IBH is not working change it (you can make it your own)
 - Don’t get stuck in how you do things. Learn to adapt as your IBH grows and as team dynamics change
- Remember PATIENT CENTERED
 - Team should be wrapped around the patient and work for the patient
 - It is about where the patient is and their motivation to change; meet them at this place
 - Treatment should include patient and patient should be the moving piece
 - IT IS ALWAYS ABOUT THE PATIENT! What is best for the patient is the only thing that should matter. Please adapt to the patient’s needs.