



Is your Practice Ready to Launch Measurement-Based, Integrated Behavioral Health Care?

Milestones Checklist to Evaluate Your Practice Team's Readiness

The questions and links below can help you to determine if your organization is ready to launch the transformative changes in your integrated practice or update your current integrated care strategies to meet Bree recommendations and/or incorporate the collaborative care model described in Project 2A.

1. Do you have the involvement and organized support of key senior leadership and clinic leadership?
2. Are PCPs and other medical providers well informed and involved? Do you have a [primary care champion](#) involved in planning and training?
3. Is a staffing plan for [behavioral health care managers](#) and other providers in place? Are these staff hired or under contract?
 - Is there dedicated space for integrated staff to meet with patients?
 - If planning to offer mostly telephone-based services, is there a plan in place for close communication and regular "face time" for BHPs with their primary care teams and patients?
4. Is a psychiatrist or [psychiatric consultant](#) hired or under contract for consultation and other services? Does your organization have a plan for how you will provide or access these services on site or virtually (i.e., through telemedicine)? Does your psychiatric provider have access to your Electronic Health Record and your behavioral health registry?
5. Do you have a registry in place with the functions you need to track patients and make sure no one falls through the cracks? Many WA state integrated programs have launched with simple registry tools like a [patient tracking spreadsheet](#) or the [AIMS Depression Tracker](#), while they evaluate other IT options.
6. Does leadership have a preliminary plan in place to [finance and sustain your model](#) over time, including plans to generate revenue to support integrated staffing resources?
7. Do your program lead(s) and/or behavioral health supervisor(s) have enough time and resources to adequately support practice change and implementation?
8. Is there a plan in place to offer [evidence-based brief behavioral interventions and psychotherapies](#) to your patients? Psychiatric medications alone often are not the best treatment or an effective treatment; medications may not be the preferred option for some patients.
9. Do you have a reliable, well-tested workflow in place for [behavioral health screening](#)? Is your screening workflow described in writing /diagram or otherwise reflected in clinic protocols and staff training materials?
10. Do you have a [protocol and plan](#) in place to manage a patient who is at risk of suicide?

