Sample Peer Group Meeting Topics

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| Workforce Burnout and Combating the Culture of Busy in Health Centers |
| Financing the Non-Billable Encounter for the Care Team |
| Maximizing Billing for Care Team Encounters |
| Data Collection |
| Streamlining Screening Tools and Identifying Best Practices |
| Hiring and Onboarding |
| Multi-Disciplinary Workflows |
| Integrating Substance Use Disorder (SUD) Treatment into Behavioral Health and  Primary Care Services |
| Crisis Management and De-Escalation Techniques |
| Pain Points and Opportunities for Collaborative Care Teams (role flexibility, communication, huddles, overcoming resistance, time for case discussion) |

1. Integrated Behavioral Health (IBH) Training

* A full-day in-person (two-day or multiple sessions) foundational training on the IBH model. PCA to lead with content direction by Peer Group members and facilitation of particular sessions by Peer Group members if members are interested.
* Case discussions, where Peer Group brings complicated cases to the team to workshop how to best support complex patients
* Evaluating an IBH practice
* Billing for IBH
* Brief trainings on commonly seen issues in IBH settings
* Anxiety
* Depression
* Sleep issues
* Diabetes
* Medication changes
* Exercise and diet
* Eating disorders
* Chronic pain
* Use of tele-behavioral health to support IBH delivery
* Limiting emergency department usage
* Technology/mobile apps to support patients through change
* Human trafficking
* Policy Brief on IBH Model
* Paper would describe the IBH model in the community and document its impact, to be distributed to stakeholders to inform policy development and resource allocation
* State level policy discussions

1. Behavioral Health (BH) Workforce Development

* Share best practices for recruitment and retention of BH staff at health centers. Build relationships with schools and programs that can enhance the pipeline. Share information on staffing ratios and caseload to inform collective best practices.
* Processes for recruiting and supporting interns
* Discuss training needs and timelines

1. Substance Use Disorder (SUD) Topics

* SBIRT Training
* Stigma
* 42CFR Part 2
* Opioid Use Disorder (OUD) Workforce
* Support next steps from OUD Navigator
* Care Coordinator implementation
* Harm Reduction
* Understand current health center services for SUD harm reduction
* Share best practices and challenges
* Conduct training(s)
* Medication Assisted Treatment (MAT) Expansion
* Share current MAT best practices and challenges among Peer Group members to support further expansion of this service
* Review of state-level regulations on prescribing
* Pain Management Services
* Share best practices and resources for supporting patients in seeking pain management support
* Alcohol Abuse Services
* Understand current health center services for alcohol abuse, share best practices, and conduct training(s)
* Screening and Treatment for Pregnant Women
* Share best practices and conduct trainings on how to screen and treat SUD for pregnant women
* Compassionate Tapering

1. Families and Caregivers

* Share best practices, and conduct training(s) on how to help families and caregivers of those with mental health or substance use diagnoses

1. Chronic Disease Management via BH

* Explore short-term and billable interventions. Currently, behavioral modification and lifestyle modification is hard to do for clients without a mental health diagnosis.

1. Suicide Intervention
2. Providing School-Located BH Services
3. Adverse Childhood Experiences (ACEs)

* Share best practices on screening for ACEs and conduct training(s) on how to respond to the signs, symptoms, and risks of trauma

1. Social Drivers of Health (SDOH)

* Share best practices on how to assess for SDOH and act on assessment results

1. BH Quality Improvement
2. Cultural Humility

* Share best practices and conduct training(s) on caring for patients who identify as Tribal, Latinx, LGBTQIA+, etc.

1. Tele-behavioral Health

* Discuss use of external tele-behavioral health vendors

1. Trauma-Informed Care
2. Value-Based Care and BH Services
3. BH Team’s Support of Staff Wellness

* Tips and tricks to addressing burnout
* Compassion fatigue
* Psychological body armor
* Boundary setting

1. BH Coding

* Policy push for z codes to be used
* Training on BH coding best practices
* Training on billing dual eligible patients

1. Local Resources or Guest Speakers

* State needle exchange programs and local harm reduction options
* State level programs
* National, state, and local grant opportunities
* National, state, and local trainings and conferences
* Medicaid or local payers
* Crisis response supports