Arizona Center for Rural Health State Office of Rural Health Webinar Series

Partners:







MEL & ENID ZUCKERMAN COLLEGE OF PUBLIC HEALTH

Webinar notes:

Audience is muted during the presentation. Please enter your questions into the chat box. Please fill out the post-webinar survey. Webinar is being recorded. A link to the recording will be posted on: AzCRH www.crh.arizona.edu



THE UNIVERSITY OF ARIZONA MEL & ENID ZUCKERMAN COLLEGE OF PUBLIC HEALTH Center for Rural Health



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Psychiatric Mental Health (PMHNP) Clinical Assistant Professor at the University of Arizona

A Novel Approach to the Behavioral Health Workforce Expansion Grant



Mel & enid zuckerman college of public health Center for Rural Health



A Novel Approach to the BHWET Grant Program at UA

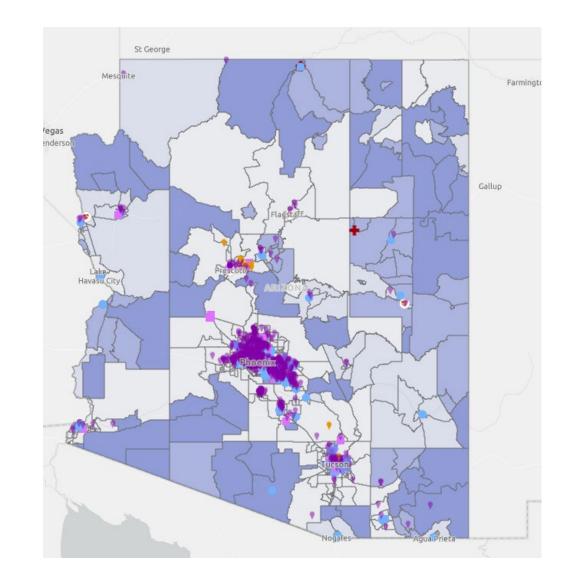
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Associate Clinical Professor College of Nursing – Tucson University of Arizona

Adapted from J.Karp, MD presentation

Objectives

- Discuss HRSA and the BHWET Program Overview
- Describe the Program Variation Focused on Interdisciplinary Practice at the U of AZ



Health Resources & Services Administration

- Part of Department of Health and Human Services.
- Primary federal agency responsible for improving access to health care and enhancing health systems for the tens of millions of people who are geographically isolated a/o economically or medically vulnerable.
- Mission: To improve health outcomes and achieve health equity through access to quality services, a skilled health workforce, and innovative, high-value programs.

BHWET Behavioral Health Workforce Education and Training

- Aims to increase the supply of behavioral health professionals while also improving distribution of a quality behavioral health workforce and thereby increasing access to behavioral health services.
- A special focus is placed on the knowledge and understanding of children, adolescents, and transitional—aged youth at risk for behavioral health disorders.

Goals of our BHWET Program at UA

- 1. Improve access to care in rural, border, and medically underserved communities in Arizona through new and enhanced community partnerships that integrate primary and behavioral healthcare services to educate psych NP students and psychology interns during their clinical training.
- 2. Improve behavioral health treatment through online didactic and clinical training activities for psych NP students and psychology interns related to telehealth and interprofessional, team-based, and trauma-informed care.
- Increase the number and diversity of practicing psych NPs and psychologists who will practice in rural, border, child, adolescent, and transitional age youth, and medically underserved communities.

Training Mental Health Care Teams of the Future

- Focus on training in integrated care delivery models
- Shift from reactive acute care to comprehensive/coordinated care.
 - Recommended for treating patients with comorbid medical and physical conditions.
- Train PMHNP and psychology intern as dyads participating in shared didactics.
 - 5 PMHNPs and 5 psychology interns every year for 4 years.
- The trainee dyads meet in small group discussions with faculty mentors to discuss their clinical experiences and skills acquired during the clinical rotation at each site.
 - Whenever possible, trainee dyads will see patients together and develop interdisciplinary treatment plans.

COMMUNITY PARTNERS

- MARANA HEALTHCARE
- BUMC-S BEHAVIORAL HEALTH CLINIC
 - ADULT
 - CHILD AND ADOLESCENT
- EPICENTER (EARLY PSYCHOSIS CENTER)
- JUVENILE DETENTION CENTER (PSYD)

- TUBA CITY REGIONAL HEALTHCARE
- BANNER ALZHEIMER'S INSTITUTE
- BUMC-T PEDIATRIC MEDICINE
- MARIPOSA COMMUNITY HEALTH
- GILA RIVER INTEGRATED HEALTH

ADDING NEW AGENCIES CONSISTENTLY

FIRST YEAR POSITIVE OUTCOMES AND OPPORTUNITIES

POSITIVE OUTCOMES

OPPORTUNITIES

- SIGNIFICANT CHANGE IN TREATMENT PATTERNS OF THE PMHNP STUDENTS
- DEEPER APPRECIATION OF THE SISTER DISCIPLINE
- NEW COHORT EVERY 6 MONTHS

- MORE DIFFICULT TO OBTAIN
 DYADS THAN ORIGINALLY
 ANTICIPATED
- APA GUIDELINES FOR PSY-D INTERNS
- SCHEDULE MATCHING

EXAMPLE OF AGENDA FOR INTERDISCIPLINARY MEETINGS

1. SCOPE OF PRACTICE FOR EACH ROLE, INCLUDING STATE/NATIONAL CONSIDERATIONS AND PRESCRIBING AUTHORITY

2. PSYCHOTHERAPEUTIC MODALITIES ADDRESSED IN EACH PROGRAM'S EDUCATIONAL AND CLINICAL EXPERIENCES

A. PSYCHOLOGY INTERNS REPORTED CBT, CBT-I, DBT, MOTIVATIONAL INTERVIEWING, FAMILY SYSTEMS, GROUP THERAPY, AND APPLIED BEHAVIOR ANALYSIS

3. COMMON AND RECOMMENDED STEPS AFTER GRADUATION FOR ADDITIONAL TRAINING AND EXPERTISE RELATED TO SPECIFIC THERAPEUTIC MODALITIES

4. ROLE AND APPROACH RELATED TO DIAGNOSING

6. PODCAST RECOMMENDATIONS

A. HIDDEN BRAIN, PSYCHIATRY BOOTCAMP, AND BACK FROM THE ABYSS

7. REACTION FROM PATIENTS AND PEOPLE SOCIALLY WHEN THEY SAY THEY ARE TRAINING TO BE A PSYCHOLOGIST OR PMHNP

Summary

- The public health need and opportunities to build behavioral health training programs across Arizona is vast.
- Finding education partners leverages expertise and resources and reflects the need for multidisciplinary solutions to complex behavioral health problems.
- Clinical departments in academic health systems have the education infrastructure needed for successful coordination and implementation and are eager to partner with community agencies and allied health specialties to grow the workforce.

Questions?

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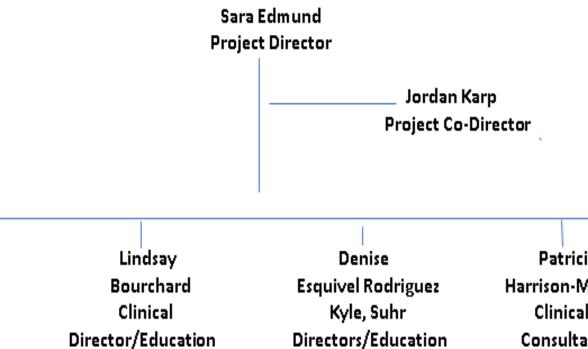
Program Organization

Janet

Rothers

Project

Evaluator



Psychology Interns

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PMHNP