



CHC/NYS DEFINING NEW DIRECTIONS

Community Health Care Association of New York State www.chcanys.org



Behavioral Health Subcommittee Presentation:

Strategies for Integrating Behavioral Health and Oral Health

Amanda Felice, LMHC NCC | Finger Lakes Community Health

Marla Schick, MSSA LCSW | Ezras Choilim Health Center Inc.

February 4th, 2021

Behavioral Health Subcommittee

Chairs

- Shonny Capodilupo, LCSW | Open Door
 - David Guggenheim, PsyD | Callen-Lorde
-
- **When:** 1st Thursday each month
 - **Time:** 11am-12pm
 - **Where:** Via zoom (Registration link in the chat)





Dental and Behavioral Health Integration: Screening for Depression in Dental Patients

Amanda Felice, LMHC, NCC

Why we did this

- Program from National Network for Oral Health Access (NNHOA) to integrate BH and Dental
- Integrate BH and Dental by:
 - Using depression screenings (PHQ2/PHQ9) to patients age 18 and up receiving dental services from a dentist.
 - The dental patient has the ability to meet with a behavioral health professional or receive BH services.
 - 1 hallway model

Setting the Tone

- CEO- Leadership- Management- Supervisors- Clinical Teams
- Geneva site- Chief of Dental Services, Director of BH
 - Dentists, Dental Hygienist, Dental Assistants, Interns
- Team Based Care
 - Inclusiveness
 - Caring for 1 patient= Finger Lakes patient



PHQ2 and PHQ9

What are the PHQ2 and PHQ9?

The PHQ-9 and PHQ-2, components of the longer Patient Health Questionnaire, offer psychologists concise, self-administered tools for assessing depression. They incorporate DSM-IV depression criteria with other leading major depressive symptoms into a brief self-report instruments that are commonly used for screening and diagnosis, as well as selecting and monitoring treatment.

PHQ2

Patient Health Questionnaire-2 (PHQ-2)

Over the last 2 weeks, how often have you been bothered by any of the following problems?	Not at all	Several days	More than half the days	Nearly every day
1. Little interest or pleasure in doing things	0	1	2	3
2. Feeling down, depressed, or hopeless	0	1	2	3
<i>For office coding:</i> _____ 0 _____ + _____ + _____ + _____				
= Total Score _____				

PHQ2

PHQ-2 Scores and Proposed Treatment Actions

The PHQ-2 consists of the first 2 questions of the PHQ-9. Scores range from 0 to 6. The recommended cut point is a score of 3 or greater. Recommended actions for persons scoring 3 or higher are one of the following:

- Administer the full PHQ-9
 - Conduct a clinical interview to assess for Major Depressive Disorder
1. Kroenke K, Spitzer RL, Williams JB. The Patient Health Questionnaire-2: Validity of a Two-Item Depression Screener. *Med Care*. 2003, Nov;41(11):1284-92.
 2. Kroenke K(1), Spitzer RL, Williams JB, Löwe B. The Patient Health Questionnaire Somatic, Anxiety, and Depressive Symptom Scales: a systematic review. *Gen Hosp Psychiatry*. 2010 Jul-Aug;32(4):345-59.

PHQ9

PATIENT HEALTH QUESTIONNAIRE (PHQ-9)

NAME: _____ DATE: _____

Over the last 2 weeks, how often have you been
bothered by any of the following problems?
(use "✓" to indicate your answer)

	Not at all	Several days	More than half the days	Nearly every day
1. Little interest or pleasure in doing things	0	1	2	3
2. Feeling down, depressed, or hopeless	0	1	2	3
3. Trouble falling or staying asleep, or sleeping too much	0	1	2	3
4. Feeling tired or having little energy	0	1	2	3
5. Poor appetite or overeating	0	1	2	3

PHQ9

6. Feeling bad about yourself—or that you are a failure or have let yourself or your family down	0	1	2	3
7. Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
8. Moving or speaking so slowly that other people could have noticed. Or the opposite —being so fidgety or restless that you have been moving around a lot more than usual	0	1	2	3
9. Thoughts that you would be better off dead, or of hurting yourself	0	1	2	3

add columns

+ +

(Healthcare professional: For interpretation of TOTAL, please refer to accompanying scoring card). TOTAL:

PHQ9

10. If you checked off *any problems*, how difficult have these problems made it for you to do your work, take care of things at home, or get along with other people?

Not difficult at all _____
Somewhat difficult _____
Very difficult _____
Extremely difficult _____

Scoring: add up all checked boxes on PHQ-9

For every ✓ Not at all = 0; Several days = 1;
More than half the days = 2; Nearly every day = 3

Interpretation of Total Score

Total Score	Depression Severity
1-4	Minimal depression
5-9	Mild depression
10-14	Moderate depression
15-19	Moderately severe depression
20-27	Severe depression

Patient is seated for a dental appointment and PHQ2/9 is introduced by DDS. (see script)

PHQ2 is asked to patient. Does the patient answer positively to either or both of the questions?

YES

NO

Continue to ask Questions on PHQ9

Calculate scores on PHQ2/9 when done asking questions.

DA reviews with patient, enters scores into smart note and into vitals.

Score between 1 and 13:

Explain to patient that they screened positive for some symptoms of depression. We can make a referral to connect them with someone from our behavioral health team.

Score 14 and Higher:

Explain to patient that they screened positive for some symptoms of depression. Would they like to speak to someone from our behavioral health department today?

Patient is Visibly Upset / in Crisis:

Explain to patient that they have screened positive for some symptoms of depression and that they will connect them with a member of our behavioral health team before moving on with their dental treatment.

Score between 1 and 13:

Explain to patient that they screened positive for some symptoms of depression. We can make a referral to connect them with someone from our behavioral health team.

Score 14 and Higher:

Explain to patient that they screened positive for some symptoms of depression. Would they like to speak to someone from our behavioral health department today?

Patient is Visibly Upset / in Crisis:

Explain to patient that they have screened positive for some symptoms of depression and that they would like to connect them with a member of our BH team before moving forward with dental treatment.

They Accept:

Send TE to Amanda Felice with PHQ2/9 score and ask for connection to services.

Record PHQ2/9 in vitals, and in smart note. DDS records that a referral was made to BH services in dental note.

They Decline:

Record PHQ2/9 in vitals, and in smart note. DDS records that a referral to BH services was declined and in dental note.

*****If a patient has any mention of hurting themselves or suicide, the patient must see a BH provider before they leave.*****

Score between 1 and 13:

Explain to patient that they screened positive for some symptoms of depression. We can make a referral to connect them with someone from our behavioral health team.

Score 14 and Higher:

Explain to patient that they screened positive for some symptoms of depression. Would they like to speak to someone from our behavioral health department today?

Patient is Visibly Upset / in Crisis:

Explain to patient that they have screened positive for some symptoms of depression and that they would like to connect them with a member of our BH team before moving forward with dental treatment.

They Accept:

Connect with BH provider on site. If not BH provider is on site, connect with Amanda Felice, Karen Jensen, or Nicole Fess to get connected via telehealth.

Do not leave patient alone in the room. Move to a counseling room if available.

Record PHQ2/9 in vitals, and in smart note. DDS records that a connection was made with BH services in dental note.

They Decline:

Record PHQ2/9 in vitals, and in smart note. DDS records that a referral to BH services was declined and in dental note.

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Patient is Visibly Upset / in Crisis:

Explain to patient that they have screened positive for some symptoms of depression and that they would like to connect them with a member of our BH team before moving forward with dental treatment.

They Accept:

Connect with BH provider on site. If not BH provider is on site, connect with Amanda Felice, Karen Jensen, or Nicole Fess to get connected via telehealth.

Do not leave patient alone in the room. Move to a counseling room if available. Remove any sharps from the room

Record PHQ2/9 in vitals, and in smart note. DDS records that a connection was made with BH services in dental note.

They Decline:

Record PHQ2/9 in vitals, and in smart note. DDS records that a referral to BH services was declined and in dental note.

Wait for patient to calm down before starting any dental treatment.

*****If a patient has any mention of hurting themselves or suicide, the patient must see a BH provider before they leave.*****

Where to put scores in vitals.

The screenshot shows a window titled "Vitals (Test, Af - 11/19/2020 11:30 AM, EMG)". The interface includes a navigation bar with "Pt. Info", "Encounter", "Physical", and "Hub". Below this is a toolbar with various icons. The main area is a table with the following columns: Date, BMI(Index), BMI Percent, SaO2(%), Head Circum, PHQ2, PHQ9, and GAD 7. The first row, dated 11/19/2020, is highlighted in yellow. A red box is drawn around the PHQ2 and PHQ9 columns in this row. A red arrow points from the right side of the table towards the PHQ2 and PHQ9 columns, indicating that the user must scroll to the right to see these columns.

Date	BMI(Index)	BMI Percent	SaO2(%)	Head Circum	PHQ2:	PHQ9:	GAD 7:
11/19/2020							
11/12/2020							
10/21/2020							
09/30/2020							
09/30/2020							
08/26/2020							
08/19/2020							
08/19/2020							
08/19/2020							
08/13/2020							
08/04/2020							
07/22/2020							
07/20/2020							
07/15/2020							

You will need to scroll over to the right to see where you are able to enter these scores.

How to access Smart Form

eClinicalWorks (Fess,Nicole)

File Patient Schedule EMR Billing Reports CCD Fax ePayment Tools Community Meaningful Use Lock Help

eClinicalWorks¹¹

Admin Progress Notes

Practice

Resource Sche...
Achilles,Stepha...
Allen,Marlene
Alshareef,Ahmed
Blitz,Leah
Bolinger,Jessica
Brink,Janine

PHM
healow
Registry
Referrals
Messages

Test, Af, 40 Y, M Info Hub Allergies Billing Alert

CONFIDENTIAL
Geneva, NY 14456
H:585-370-2861
M:585-370-2861
DOB:01/01/1980
mason.offen2001@q

Wt:10/01/20: 149lb
Appt(L):11/12/20(EH)
Appt(N):11/19/20(LB)
Language: English
Translator: No

Ins: COVID19
Acc Bal: \$0.00
Guar: Af Test
Gr Bal: \$0.00

CLICK TO EDIT

Medical Summary | CDSS | Alerts | Labs | DI | Procedures | Growth Chart | Imm/T.Inj | Encounters | Pa

SF

AUDIT
Audit-C
CAGE-AID
GAD-7

PHQ-9
PHQ-2 (2015 Ed)

PHQ-9

DOB: 01/01/1980 Age: 40 Y Sex: Male

Primary Insurance: COVID19 Self-pay Payer ID: PAPER

Account Number: 3102457 Encounter Date: 11/19/2020 Provider: Leah Blitz, DMD

Appointment Facility: Geneva Community Health

Subjective:

[Chief Complaint\(s\):](#)

[HPI:](#)

[Current Medication:](#)

[Medical History:](#)

[Dental History:](#)

[Allergies/Intolerance:](#)

[Surgical History:](#)

[Hospitalization:](#)

[Family History:](#)

[Social History:](#)

Scribe Orders

Quick Search

Smart Forms - Patient : (Test, Af) - ID : (3102457)

Pt. Info Encounter Physical

Depression Screening PHQ2 (2015 Edition)

Name: Af Test Date: 11/17/2020

Little interest or pleasure in doing things?

Not at all
 Several days
 More than half the days
 Nearly every day
 Declined to specify

Feeling down, depressed, or hopeless?

Not at all
 Several days
 More than half the days
 Nearly every day
 Declined to specify

Total Score

Interpretation

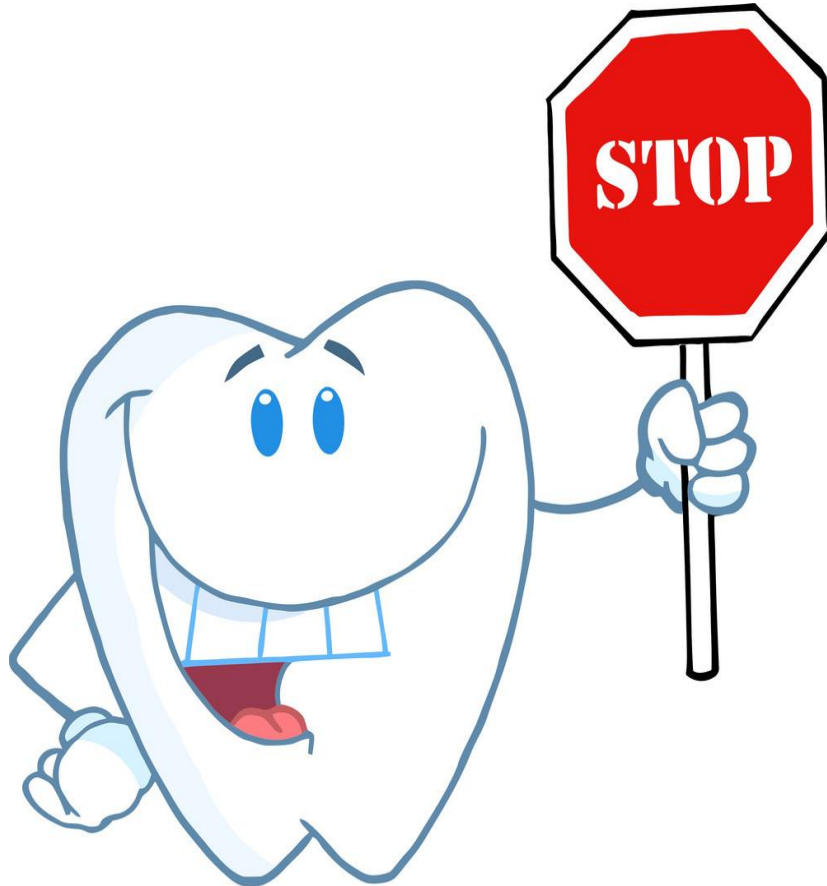
Score	Probability of major depressive disorder (%)	Probability of any depressive disorder (%)
1	15.4	36.9
2	21.1	48.3
3	38.4	75.0
4	45.5	81.2
5	56.4	84.6

Print Preview... Print... Save Close

Details

- Paper screenings vs conversation
- eCW allowed for easy access
- Small test group= 10.
- Feedback from patients/staff

Hold up- Wait a Minute



**Depression screening isn't within a
NYS dentist's scope of practice.**

Sincerely,

**NYS Chiropractic, Dental & Optometry
Board Office**

Plans

Plans for the future at FLCH (that don't involve COVID 19! 🙅)

- BH staff growth
- Motivational Interviewing training
- BH training at the start of new hire orientation for dental employees



Ezras Choilim
HEALTH CENTER

Dental/BH Integration

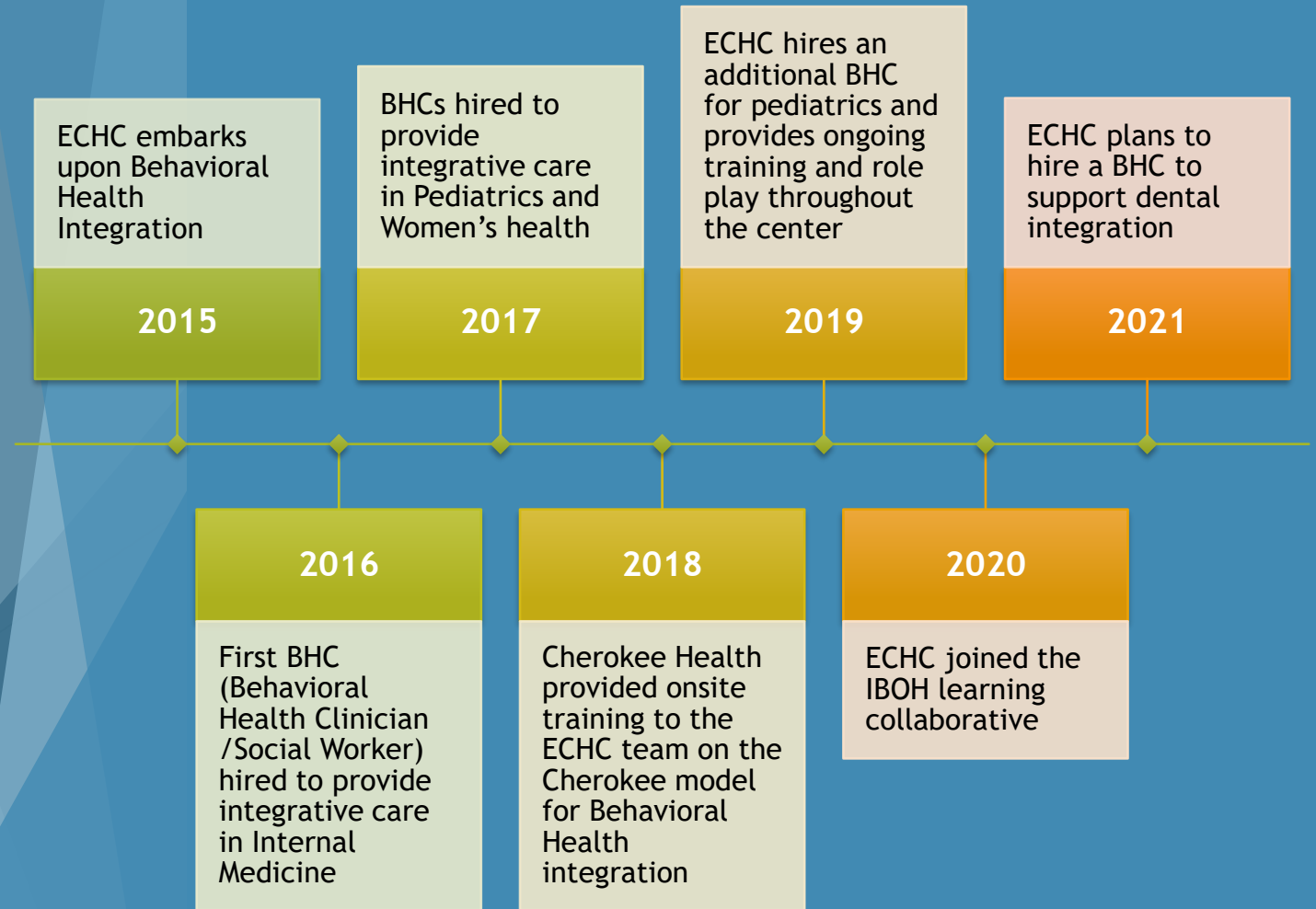
Otherwise known as IBOH-integration of behavioral and oral health

Presented by Marla “Malkie” Schick, LCSW
Director of Behavioral Health Services

Discussion Framework

- ▶ Integration at ECHC
- ▶ Setting the stage for Integration in Dental
- ▶ What is integration
- ▶ What types of patients will benefit from integration
- ▶ Workflow for dental integration
- ▶ Documentation for dental integration
- ▶ Q and A

Integration at ECHC



Setting the Stage for Integration in Dental

- Create a **patient centered environment**.
- Screening for mental health in all departments helps **increase access to timely counseling and services**.
- To provide timely dental care which can help **improve quality of life**
- To **improve acceptance** to oral health services (sometimes limited by anxiety, or lack of knowledge).
- Help patients feel as if they are being treated as a whole person and not just for a condition they present with and look at the **entire wellbeing of the patient**

Successes

- Screenings for behavioral health problems assist the dentist with **identifying possible barriers** to care and look beyond just oral health.
- BHC involvement with dental patients who have elevated scores allows the dental team to continue to **provide focused care**.
- **Improves compliance** to dental care overall, specifically so among patients with dental anxiety.
- Screening in the dental department provides **access** to behavioral health services for all patients at our Health Center.
- Looked at as another opportunity to help **normalize** behavioral health care and open conversations that might be otherwise overlooked.



Why Integration is the ECHC model of Above and Beyond Care?

- ▶ Anyone
- ▶ Anywhere
- ▶ Any time
- ▶ Any problem

Which patients will benefit from integration?

- ▶ Patients with known depression and or other behavioral health challenges
- ▶ Patients with unknown or undiagnosed behavioral health challenges
- ▶ Patients with situational stress
- ▶ Patients with chronic medical conditions such as hypertension and diabetes
- ▶ Patients with dental anxiety
- ▶ Patients with substance use disorders
- ▶ Patients with bruxism
- ▶ Patients with eating disorders
- ▶ Patients who have hyperemesis due to pregnancy or another medical condition
- ▶ All ages/gender

ANYONE

Starting with depression screening PHQ2

- ▶ Depression is a major contributor of suicide
- ▶ Dental health professionals, as primary care providers, may be the first providers in a health system to identify depression.
- ▶ Major Depressive Disorder (MDD) may affect as many as 20.9 million adults per year in the U.S. and up to 25% of people will experience MDD in their lifetime.
- ▶ Behavioral health has a direct relationship with oral health status and oral health outcomes. The presence of uncomfortable chewing problems or speaking difficulties associated with poor oral health are associated with stress, depression, and even suicidal ideation.
- ▶ Similarly, the more depressed patients were, the more decayed teeth they had, the fewer restored teeth they had, the less saliva they had, the worse poor oral hygiene they reported, and the worse self-reported oral health status they reported, all conditions that led to even more disease.
- ▶ These physiological consequences of depression - leading to xerostomia, cariogenic diet, impaired immune function, increased oral infections - start a cascade of events that results in further detriment in the oral cavity

How does PHQ2 screening work?

Patient completes self report screening.

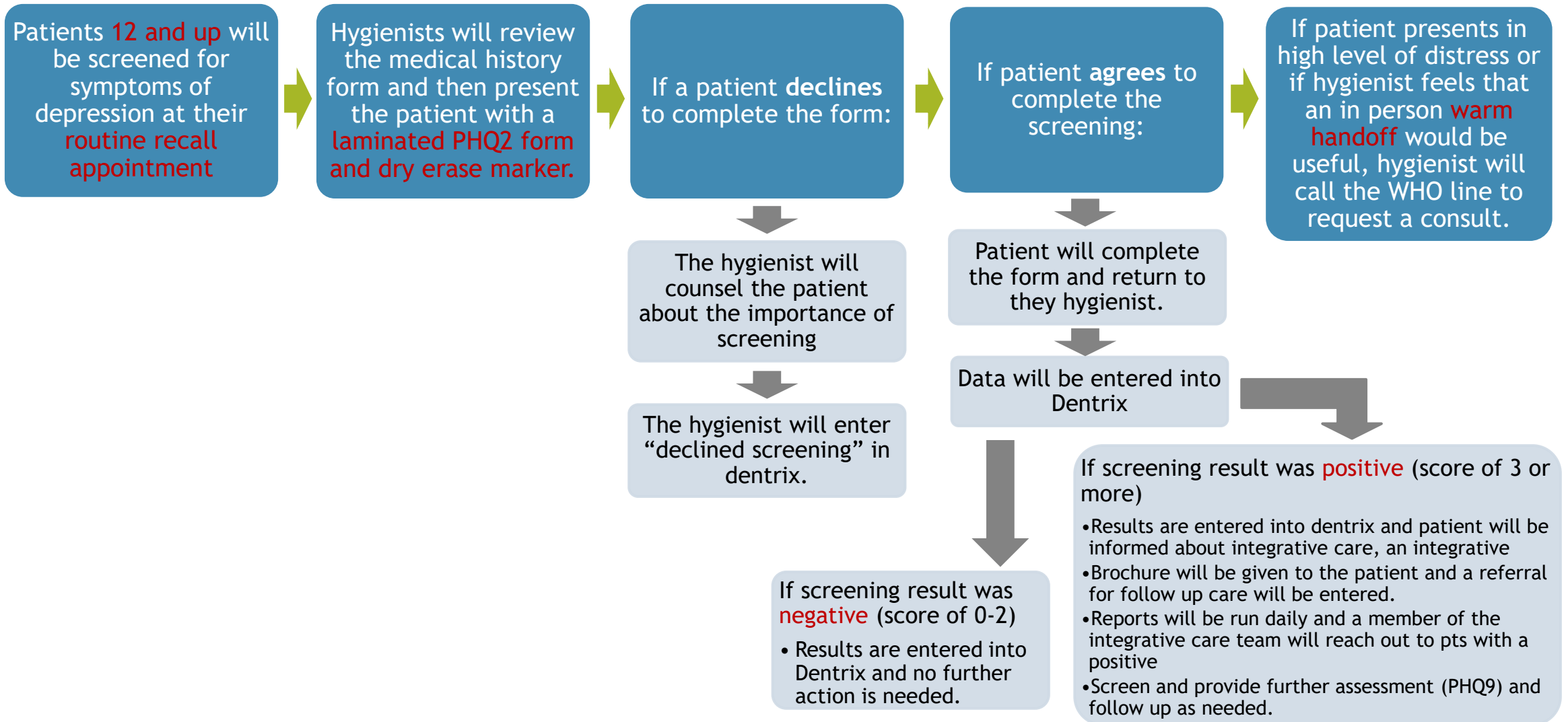


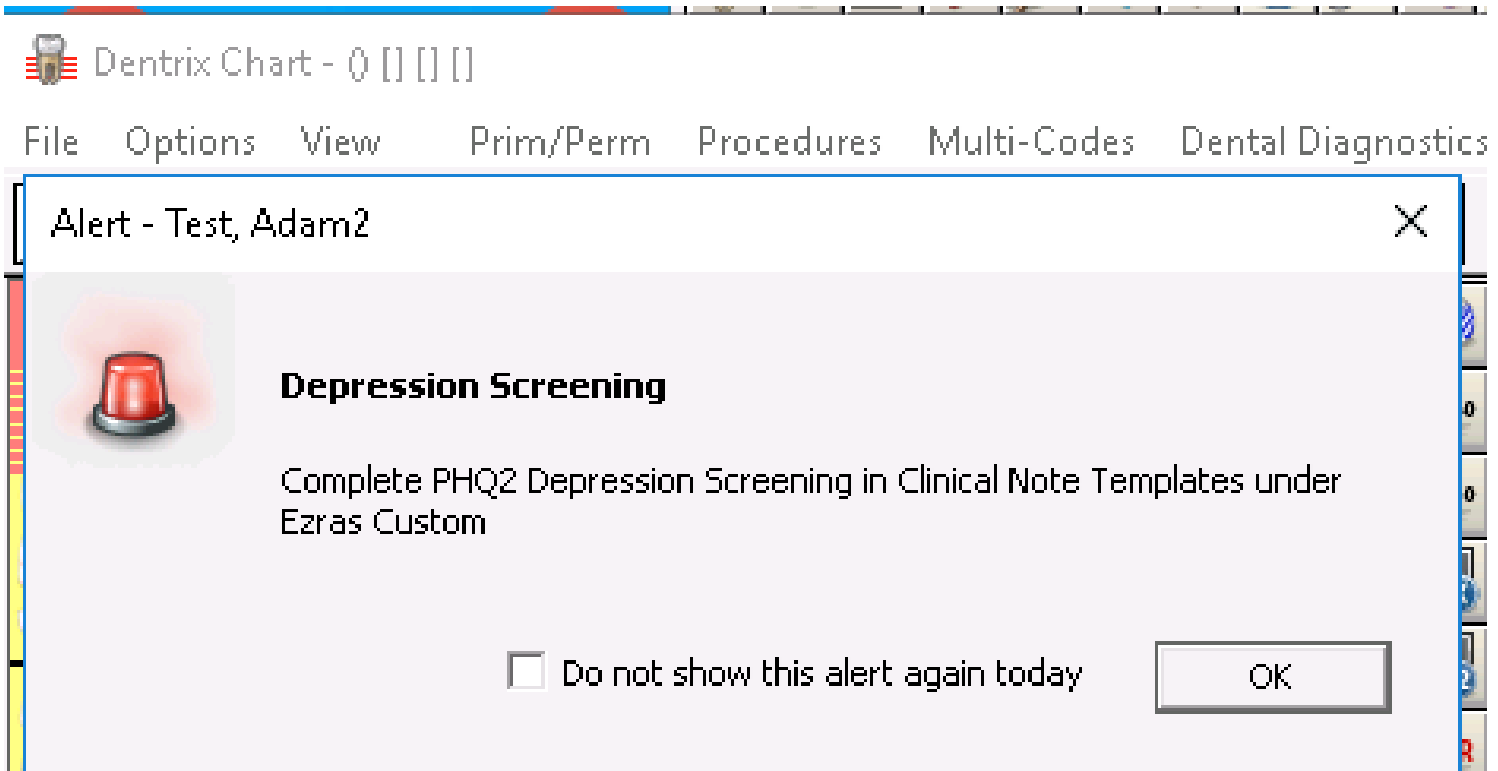
If patient screens positive follow up screening will be completed. Can include PHQ9, EPDS, MDQ, GAD7 and other tools as needed

Reasons Patients may Decline Screening? What to Respond

- ▶ Why do I have to do this?
- ▶ I have to meet my child at the bus in 5 minutes.
- ▶ I don't understand. I am confused.
- ▶ I don't want to do this.

Workflow in Dental Department





Depression Screening Alert

PHQ2 Depression Screening Workflow in Dentrix

This quick reference guide outlines the intended workflow for administering/documenting the Personal Health Questionnaire (PHQ2) Depression Screening in Dentrix.

1. The patient will be provided a laminated questionnaire to be filled out when roomed. The patient has the option to decline to answer screening questions; however, their response as “declined” still needs to be documented.
2. The Hygienist will transcribe patient PHQ2 responses into Dentrix via the **PHQ2 Clinical Note Template** (found on right side menu under the Ezras Custom tab):

The screenshot displays the Dentrix software interface. On the left, a 'Note Template' window is open, showing four sections for data entry:

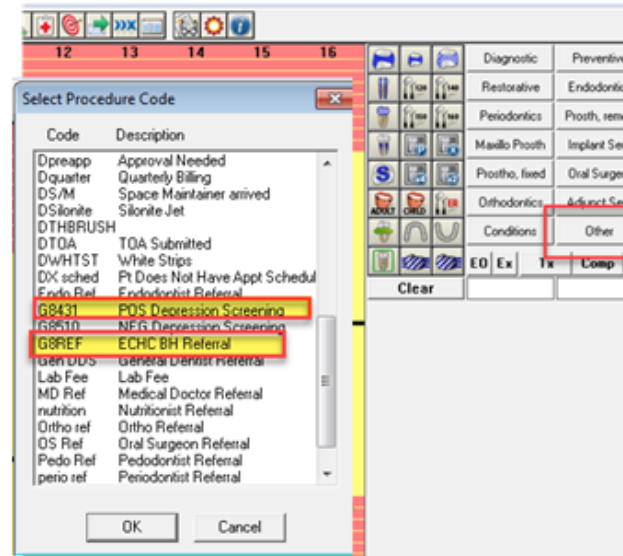
- [1] Patient Consent for PHQ2 Screening: Consented for screening, Declined to answer screening questions.
- [2] Over the past two weeks, have you had little interest or pleasure in doing things?: NOT AT ALL - 0, SEVERAL DAYS - 1, MORE THAN HALF THE DAYS - 2, NEARLY EVERY DAY - 3.
- [3] Over the past two weeks, have you been feeling down, depressed or hopeless?: NOT AT ALL - 0, SEVERAL DAYS - 1, MORE THAN HALF THE DAYS - 2, NEARLY EVERY DAY - 3.
- [4] Patient total score of 3 or greater requires referral to be treatment planned to ECHC Behavioral Health to further screening.

At the bottom of the Note Template window, there are 'OK' and 'Cancel' buttons. Below the Note Template window, a patient record is visible with the following text:

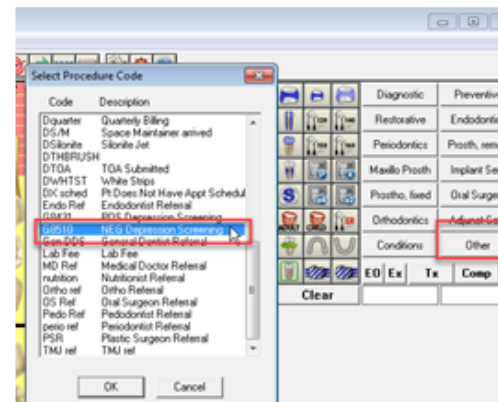
0/2020
Note#1
Pg1 - 2:36:03 PM [ECHC1]
PHQ-2 Depression Screening
Consent to screening: Consented for screening
Over the past two weeks, have you had little interest or pleasure in doing things? SEVERAL DAYS - 1

On the right side of the screenshot, the 'Ezras Custom' menu is open, showing a list of procedures. A red arrow points to the 'PHQ2' option, which is highlighted. Below 'PHQ2', there are sub-options: 'Add PHQ2 active', 'Hygiene', and 'Anesthetics'.

- If the patient has a positive score (≥ 3), **G8431 POS Depression Screening** and **G8REF ECHC BH Referral** procedure codes must be coded from the **Other** folder:



- If the patient has a negative score (< 3), the **G8510 NEG Depression Screening** procedure code must be coded from the **Other** folder:



Rapport



"Good morning, [pt name]. It's great to see you! How can I help you today?"



Explore



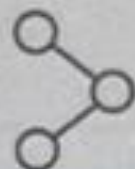
"I noticed some issues on the survey you filled out earlier. Is there anything going on recently causing you stress?"



Connect



"Addressing these feelings of stress can lead to improvements in [sleep problems, pain, fatigue, high blood pressure, other symptoms]."



Recommend



"I personally recommend seeing one of our behavioral health staff [show cards]. They are experts in the issues you are facing."



Reassure



*"Many people see counselors; it's pretty common."
"Conversations are confidential."*





