Host Site:

- Referrals and Intake
- Housing
- Case Management
- Education and Workforce Development
- Spiritual Support
- Additional Supportive Services

Community Partner:

- Substance use assessments
- Outpatient (OP) and Intensive Outpatient (IOP) services

Fully Integrated Care

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- Health assessments and care
- Referral services
- Prescribing services

Community Partner:

- Mental health assessments
- Group therapy
- Individual therapy

Integrated Care Partners and Roles

<u>**Roles: Host Organization**</u>

<u>**ADMINISTRATIVE SUPPORT**</u>

I. **Executive Director,** assisted by the Host Site's Leadership Team, shall be responsible for:
   - Stakeholder in support of implementation of integrated care plan
   - Leverage program data to inform strategic organizational decision making
   - Collaborate with program partners on strategic plan development, implementation, and sustainability

II. **Program Director(s),** as leaders of Host Site's programs and staff, shall be responsible for:
   - Participation in or designation of staff to participate in integrated care planning meetings.
   - Communicate with integrated care partners of mental or physical health concerns.
   - Onboarding of staff to the integrated care process
   - Managing program staff accountability in upholding agreed upon integrated care processes (team meetings, crisis calls, etc), records maintenance, and communications
   - Relay scheduling, programming, and resource alterations to integrated care partners

III. **Director of Grants, Contracts, and Quality Improvement; Or other Designee,** as member of the Host Site's Leadership Team, shall be responsible for:
   - Ensure the host site's EHR is adequate and organized to track data pertinent to Integrated Care.
   - Ensure staff training in integrated care occurs and expectations set
   - Engage integrated care partners to ensure information sharing is HIPPA compliant and efficient
   - Assess data, goals, and outcomes of the integrated care process and integrity of the framework

<u>**CLINICAL/CLIENT FACING**</u>

IV. **Case Manager (s),** serving as lead care coordinator and representative of each individual community member, will be responsible for,
   - Participation/ Co-facilitation of integrated care meetings.
   - Perform timely and accurate documentation
   - Communicate client needs and schedules with integrated care partners
   - Communicate mental and physical health concerns to the integrated care partners.

V. **Clinical Care Coordinators, Clerks, Intake manager** staff overseeing safety and movement of community members, will be responsible for,
   - Participate in integrated care meetings when warranted
   - Communicate mental and physical health concerns to the case manager(s)
   - Coordinate intakes and communicate essential information about required level of care.

VI. **Ancillary supports (chaplains, educators, interns),**
   - Participate in integrated care meetings when warranted
   - Communicate community member scheduling with integrated care partners
   - Communicate with integrated care partners of spiritual, educational, mental, or physical health concerns.

<u>**Roles: Behavioral Health (Therapist, non-prescribing)**</u>

I. **Director/ Manager/ Supervisor**
   - Stakeholder in support of implementation of integrated care plan
   - Leverage program data to inform staffing and funding
   - Collaborate with program partner leadership on contracting and liability

II. **Mental Health Provider(s),** conducts psychological assessments, facilitate group/ individual therapy
   - Participate in integrated care meetings
   - Sharing of initial intake documentation as allowed/ appropriate
   - Sharing of significant changes in client status in a timely manner
   - Evaluate service quality and update workflow as needed
   - Provide mental health services (therapy and psychological assessment) to community members
   - Create and coordinate service schedules
   - Maintain ethical codes and laws

Roles: Healthcare Provider(s)

I. **Director/ Manager/ Supervisor**
   - Stakeholder in support of implementation of integrated care plan
   - Leverage program data to inform staffing and funding
   - Collaborate with program partner leadership on contracting and liability

II. **Primary Care Provider (Nurse Practitioner)** provides medical/ healthcare services and coordination
   - Participate in integrated care meetings
   - Sharing of initial intake documentation as allowed/ appropriate.
   - Sharing of significant changes in client status in a timely manner
   - Provides assessment, diagnosis, medication management, referrals, and care coordination as appropriate
   - Integrated care team education regarding harm reduction, Narcan administration, and emergency response

III. **Psychiatric Provider (Nurse Practitioner)** provides psychiatric services, coordination, and referral
   - Participate in integrated care meetings
   - Sharing of initial intake documentation as allowed/ appropriate.
   - Sharing of significant changes in client status in a timely manner
   - Provides assessment, diagnosis, medication management of psychiatric needs and referrals and care coordination as appropriate
   - Integrated care team education regarding harm reduction, Narcan administration, and emergency response

Roles: Substance Use Treatment Provider/ Program

I. **Substance Use Counselor,** as partner providing outpatient and intensive outpatient treatment for substance abuse, shall be responsible for:
   - Participate in integrated care meetings
   - Sharing of initial intake documentation as allowed/ appropriate.
   - Sharing of significant changes in client status in a timely manner
   - Facilitate therapy sessions including individuals, intensive outpatient, and group sessions.

Sample Schedule of Meetings

Host Organization

Information	Frequency	Route and Responsibility
Client List/ Census	Organizational Standard (Ex: Weekly)	Electronic Delivery: Auto-run by EHR
Pending referrals, intakes, transfers	Organizational Standard (Ex: As Needed)	Electronic Delivery Intake manager
Discharges	Organizational Standard (Ex: 30 Days)	Case Manager, Care Manager, Team Designee

Behavioral Health Component

Information	Frequency	Route and Responsibility
Initial assessment	Organizational Standard (Ex: Within 7 days)	
Diagnoses and implications for care	As changes	
Medications, implications, and changes		

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Information	Frequency	Means for Sharing
Initial assessment	Within 7 days	
Diagnoses and implications for care	As changes	
Medications, implications, and changes	As changes	

HAS

Information	Frequency	Means for Sharing
Initial assessment and recommendations	Within 7 days	
Changes in care	As changes	