



Periscope Outreach Lessons Learned

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Tactics that have Worked

Face time with Perinatal Psychiatrist

- Providers must vet expertise

Target Medical Hubs

- Offer didactic to residency programs: OB/GYN, Family Medicine, Psychiatry
- Federally Qualified Health Centers (FQHCs)

Statewide Conferences

- ACOG, perinatal associations, lactation conferences, midwives associations, psychiatric conferences
- Offer didactics and formal educational opportunities
- Vendor table

Attend regularly scheduled meetings

- Grand Rounds, staff meetings

Top down, bottom up

Use connections

- Peer to peer support groups
- Advisory council members

Focus on your Frame:

Our Program Makes your Job Easier

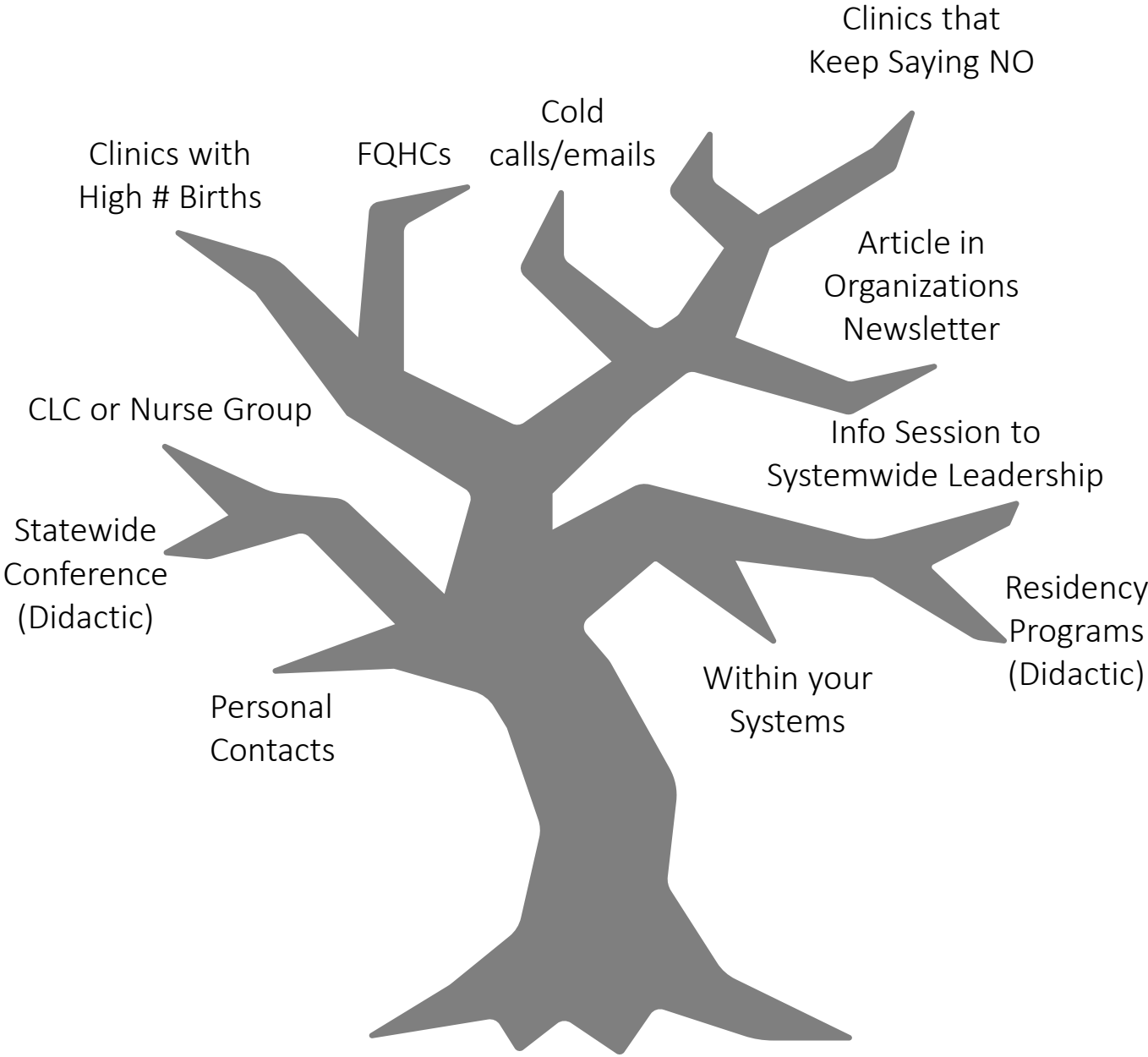
Framing the access program as a benefit to the clinic

Ensure you're not looking to "steal" patients

Make it clear there is no cost associated with the program – for providers and patients

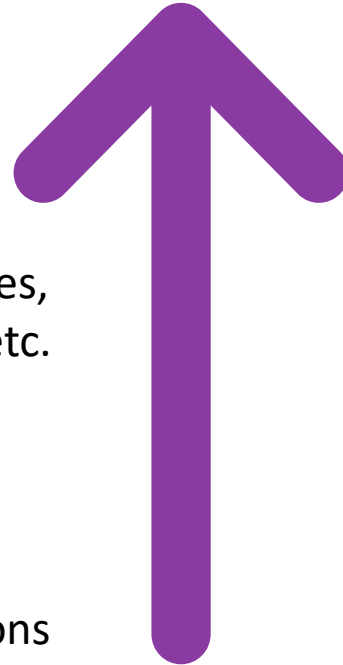
Put yourself in their shoes – what would make you hesitate and address that in your correspondence

Start with Low Hanging Fruit



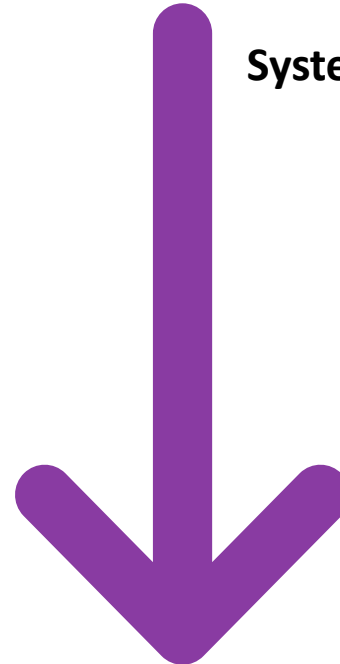
Top Down and Bottom Up Simultaneously

Provider level : Prescribers, Nurses,
Lactation Consultants, trainees, etc.
E-mails
One-on-one meetings
Grand Rounds
Staff meetings
Conference presentations



System Leadership

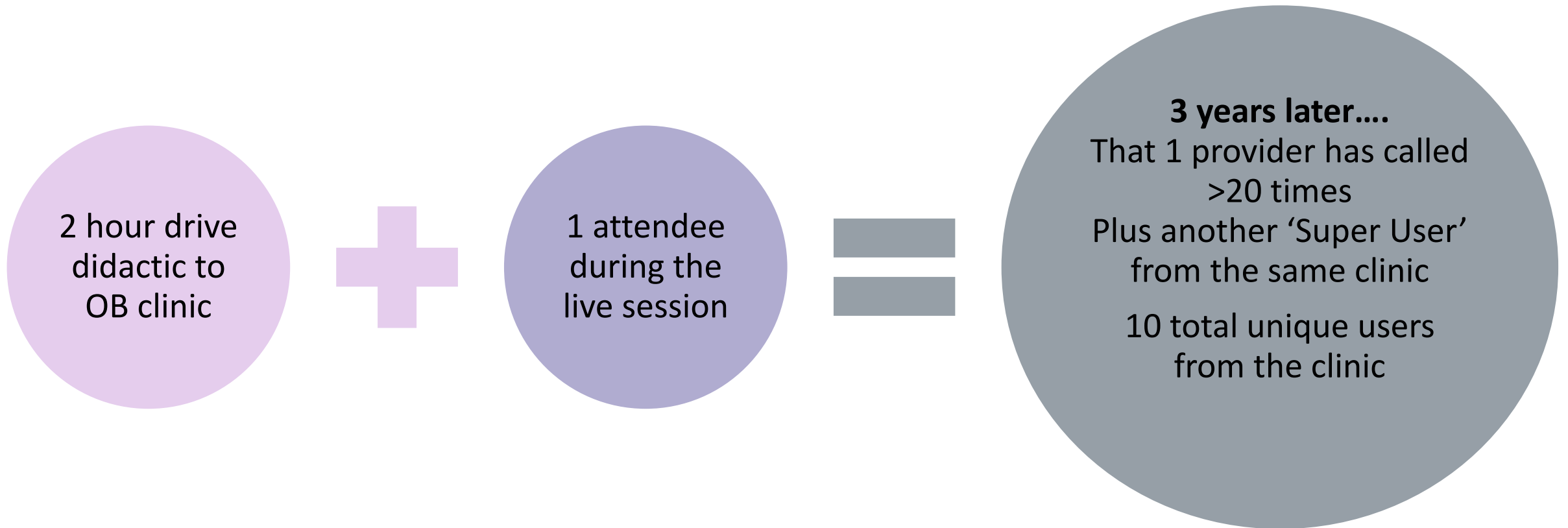
E-mails
One-on-one meetings
Attend large meetings



Multiple Approaches Builds Notoriety



Don't Say No Because a Group is 'too small'



Give Choices to Fit their Needs



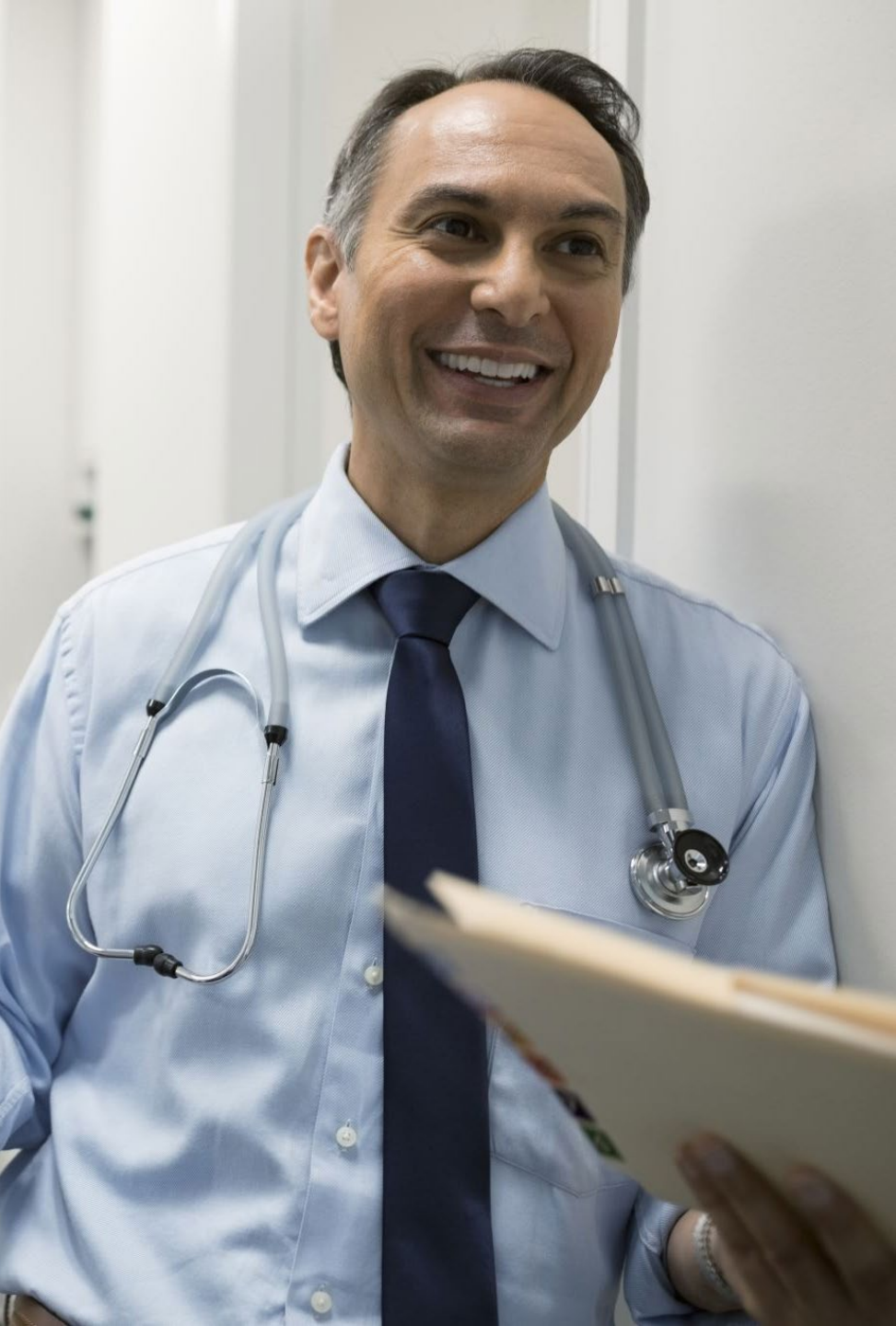
Didactic + brief information session



Information session alone



Ask to come to an existing meeting time



Vetting Psychiatry is Key to Utilization

Health care providers will not use a
service they do not trust

Education Bolsters Action

Aurora West Allis Women's Pavilion Example



Sorry for all the consults. Just so many patients with psychiatric problems peripartum and so difficult to get them in with a psych provider in a timely fashion. This service is so great and I am very grateful for it!



OB/GYN Frequent Utilizer
from Aurora West Allis
Women's Pavilion





Triage

- Provider contacts Periscope and speaks to triage
 - Less than 5 minutes



Provider to Perinatal Psychiatrist Consultation

- Perinatal psychiatrist returns providers call
 - Average return call time: **6 minutes**, mode: **2 minutes**
- Two providers have case base discussion
 - Average 8-10 minute conversation



Provider Discusses with Patient

- Provider discusses treatment options with their patient
- Typically patients remain in the care of the inquiring provider

Tell them What to Expect

Clear expectations of how the consultation will take place

Use case examples from real consultations

Highlight your strong points

- Response time
- Provider testimonials

Frame it as a benefit to them

- Saves time
- Improves patient outcomes

Don't Give Up on High Birth Clinics

Clinic with highest annual number of births in Wisconsin

Turned down 4+ times

- VP of OB introduction – failed
- Peer to peer support group introduction – failed
- Cold emails and calls to clinic staff – failed
- Warm handoff to midwife – failed

Nurse heard presentation at a Statewide nursing conference by evaluation partner and reached out to us – success!

Thank you.

THEPERISCOPEPROJECT@MCW.EDU



MCPAP for Moms: Clinician and Practice Engagement

Massachusetts Child Psychiatry Access Program

MCPAP

For Moms

We used a proactive approach with purposeful engagement and tracking

Dedicated efforts

Tracked engagement and enrollment

Direct outreach (F2F vs. remote)

Went to where the providers were

Engaged at conferences (presentations & tabling)

We created an inventory and knew our denominator

State agencies

Board of Registration in Medicine

Birth hospital privileges

'Yellow Pages'

Google



We created a practice inventory

Massachusetts Hospitals and OB Practices								
Hospital	Location & Region	Affiliated Practices	Practice Location	Contact	Births (2012 Data) Total: 72,828	Enrolled	Trainings/ Grand Rounds	Region MD Assigned
Cambridge Health Alliance	Cambridge (Boston)				1,311		November 2016	
		Malden Community Health Center (Family Medicine that does OB)	Cambridge	Phone: 781-338-0500				Boston, Leena
		Somerville/Union Square (Family Medicine that does OB)	Cambridge	Phone: 617-665-3370				Boston, Leena
Fairview Hospital	Great Barrington (Western)				153			
		Community Health Programs & Great Barrington OBGYN	Great Barrington	Practice Manager: Jeannette Phone: 413-528-1470		PENDING	Non-response Dec. 2015	Western, Carolyn
Good Samaritan Medical Center	Brockton (Southeast)			Phone: 508-427-3700	883		Sept. 2015	
		Vikas <u>Merchia</u>	Brockton	Phone: 508-897-4790		ACOG		Southeast, Leena
		<u>Zwi</u> Hoch	Brockton	Phone: 508-251-9624		ACOG		Southeast, Leena
Holy Family Hospital & Medical Center	Methuen (Northeast)			Contact: Sherrill Davis E-mail: sdavis@pediatricspro.com Contact: Leonard <u>Sarapas</u> E-mail: lsarapas@comcast.net	1,029		Oct. 2015	
		Javed Siddiqui, MD	Methuen	Phone: 978-689-0033		ACOG		Northeast, Carolyn

We tracked engagement and enrollment

Created a systematic way to document any practice-level activity for engagement and enrollment

Documented for every practice:

Called

Visited

Surveyed

Trained

Enrolled

This all became data over the denominator

This was all reportable as encounters

Outreach team and roles (2014)

Program Director

Kate Biebel, PhD

Medical Director

Nancy Byatt, DO, MS, MBA, FACLP

OB Champion

Tiffany Moore Simas, MD, MPH, MEd, FACOG

Program Coordinator

Gifty Debordes-Jackson, MA

5 Psychiatrists

Carolyn Broudy, MD, MS

Nancy Byatt, DO, MS, MBA, FACLP

Deborah Knudson González, MD

Wendy Marsh, MD, MSc

Leena Mittal, MD, FACLP

3 Resource and Referral Specialists

Liz Spinosa, LMHC, Lead R&R Specialist

Alyssa Kratze, MPH

Quilana Rivera, BA

Accountability among team was critical

Dedicated time

Clear expectations

Strategic assignment of practices

Goal setting and regular monitoring of progress

Follow up

Clinicians valued a clear enrollment process

What do practices have to do to enroll?

What does it mean to be an enrolled practice?

Can unenrolled practices engage with program?

Yes, this is an opportunity to engage them



Clear messaging about services was needed

Face to Face

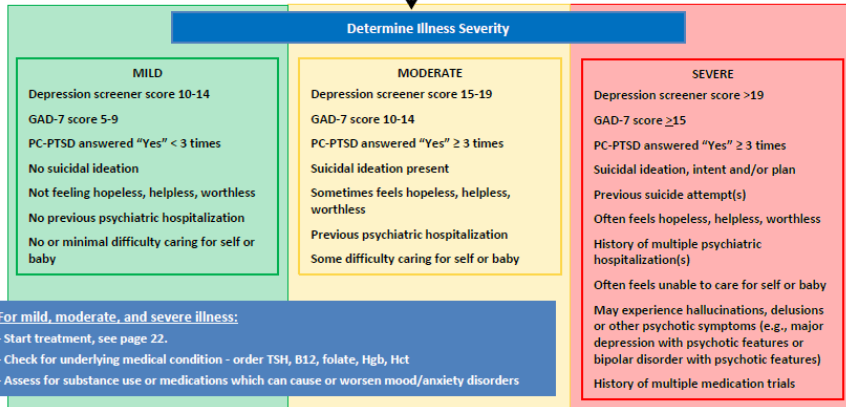
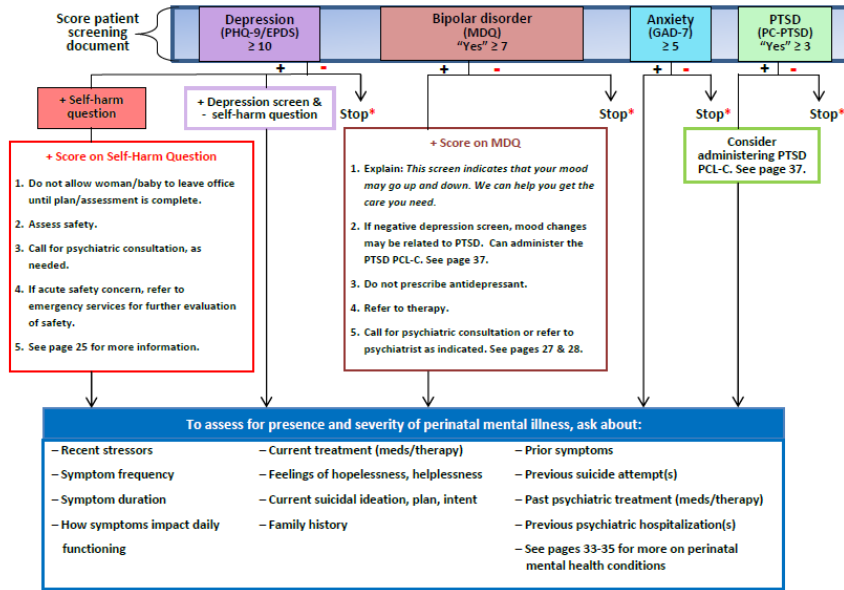
Webinars

Toolkits

Websites

Other resources

Assessing Perinatal Mental Health



*If all screens are negative, tell her they were negative and say, "If something changes, please let us know. We are here." Continue to other side →

EPDS - Edinburgh Postnatal Depression Scale; GAD - Generalized Anxiety Disorder; MDQ - Mood Disorder Questionnaire; PHQ - Patient Health Questionnaire; PTSD - Posttraumatic Stress Disorder; PC-PTSD - Primary Care Post Traumatic Stress Disorder; PCL-C - PTSD Checklist-Civilian

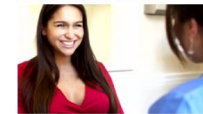
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Promoting Maternal Mental Health During and After Pregnancy

About MCPAP for Moms | How We Help Providers | Toolkits and Resources | Our Team | For Mothers and Families



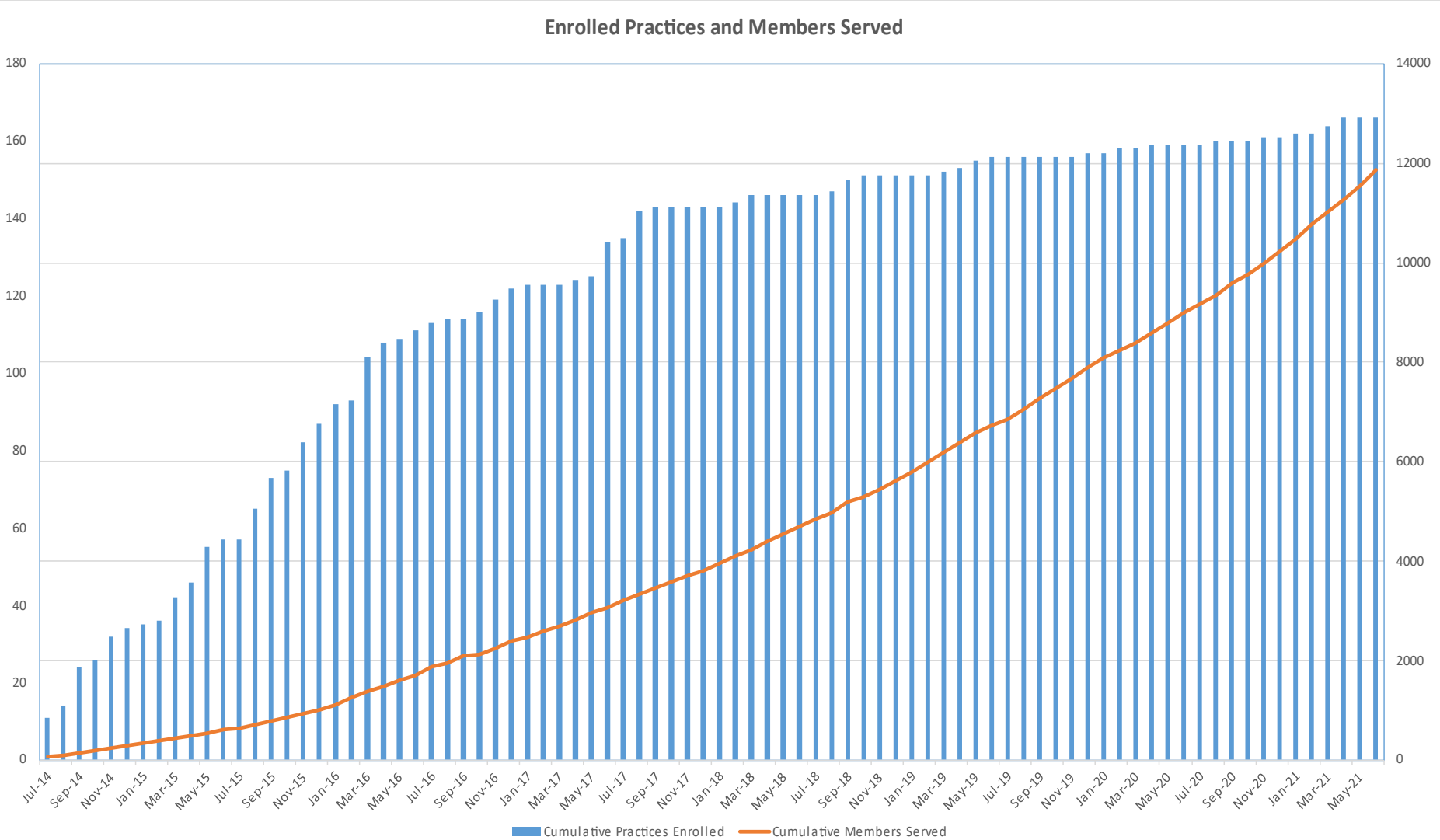
Click Below For Video



MCPAP for Moms promotes maternal and child health by building the capacity of providers serving pregnant and postpartum women and their children up to one year after delivery to effectively prevent, identify, and manage mental health and substance use concerns.



Calls were directly correlated with the number of practices enrolled



Enrollment, training, & utilization were synergistic

