



AIMS CENTER

**W** UNIVERSITY of WASHINGTON

Psychiatry & Behavioral Sciences

**UCDAVIS**  
**HEALTH**

# California Learning Collaborative RFP Q & A

*Care Partners: Bridging Families, Clinics, and Communities to Advance Late-Life Depression Care*

*We would like to acknowledge funding from the Archstone Foundation in support of this project.*





# Welcome and Introductions

- **Introductions**
- **Agenda**
  - **Late-life depression overview**
  - **Care Partners project background**
  - **Learning Collaborative**
    - **Goals**
    - **Structure**
    - **Participant expectations**
  - **RFP details**
- **Q & A**



# Care Partners Team



**Laura Rath, PhD, MSG**  
**Archstone Foundation**  
**Senior Program Officer**



**Jürgen Unützer, MD, MPH, MA**  
**University of Washington**  
**Investigator**



**Ladson Hinton, MD**  
**University of California, Davis**  
**Investigator**



**Theresa Hoeft, PhD**  
**University of Washington**  
**Investigator**



**Mindy Vredevoogd, MS**  
**University of Washington**  
**Project Manager**

**John Kern, MD**  
**University of Washington, AIMS**  
**Practice Coach**



**Rita Haverkamp, MSN, CNS**  
**University of Washington, AIMS**  
**Practice Coach**



**Patrick Raue, PhD**  
**University of Washington, AIMS**  
**Practice Coach**



**Lesley Steinman, MSW, MPH**  
**University of Washington**  
**Practice Coach**



**Kat James, BA**  
**University of Washington**  
**Research Coordinator**





# Archstone Foundation

**The Archstone Foundation is a private grant-making organization whose mission is to improve the health and well-being of older Californians and their caregivers.**



<http://archstone.org/>



# Major depression in late life

- **More than having a bad day, week, or month**
- **Pervasive depressed mood / sadness**
- **Loss of interest / pleasure**
- **A miserable state that can last for months or even years**





# How good is current depression care?



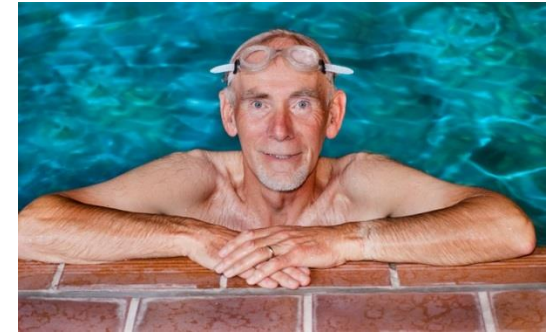
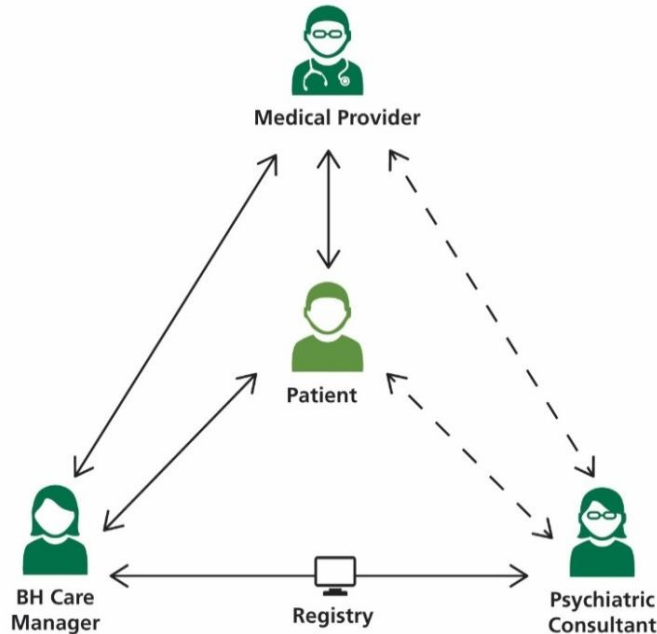
Annually, 4 to 5 million older adults receive an antidepressant Rx – However only **20% improve**

*“Of course you feel great. These things are loaded with antidepressants.”*

# Collaborative Care



Prepared, Pro-active  
Practice Team



Informed,  
Active Patient



Outcome  
Measures

[ACTIVE PATIENTS]						
Plan	[Patient ID]	[Name]	[Encounter Date]	[Status]	[Initial Assessment Date]	[Page]
	0001	Test, Test	2/8/2013	[T]	8/24/2013	
	0008	Test, Suzy	4/2/2013	[T]	5/21/2013	12
	0010	Test, Test	4/17/2012	[T]	4/25/2013	18
	0035	Test, Rpp Reminder	1/10/2013	[T]	1/10/2013	
	0038	Test Patient, Mhcc	1/23/2014	[T]	1/23/2014	22
	0041	Test, Test	3/4/2014	[T]	3/4/2014	
	0042	Test, Test	3/7/2014	[T]	3/7/2014	

Population  
Registry

Problem Solving Treatment (PST)  
Behavioral Activation (BA)  
Motivational Interviewing (MI)  
Medications

Treatment  
Protocols

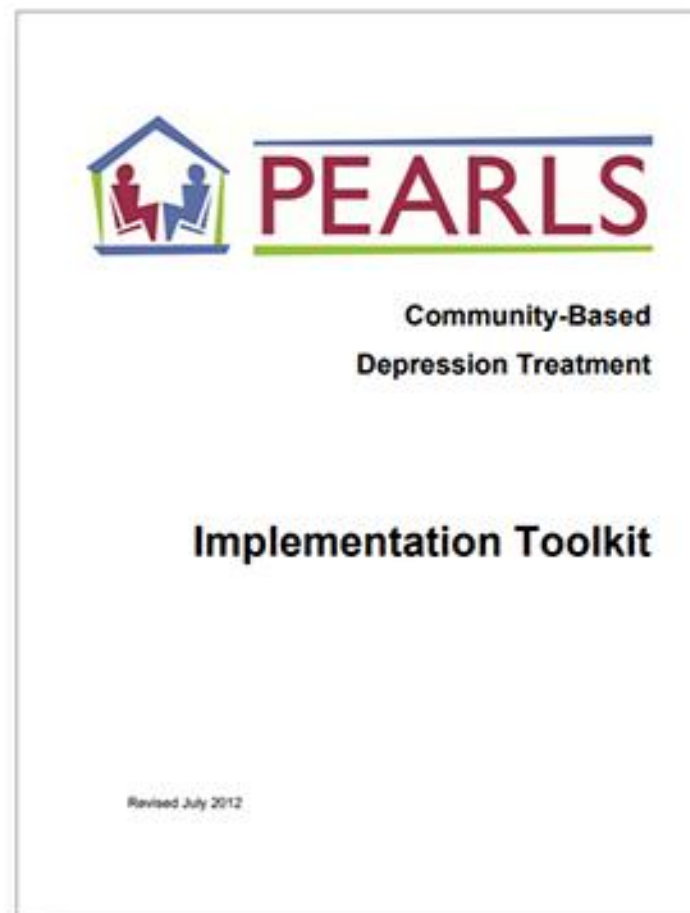


Psychiatric  
Consultation



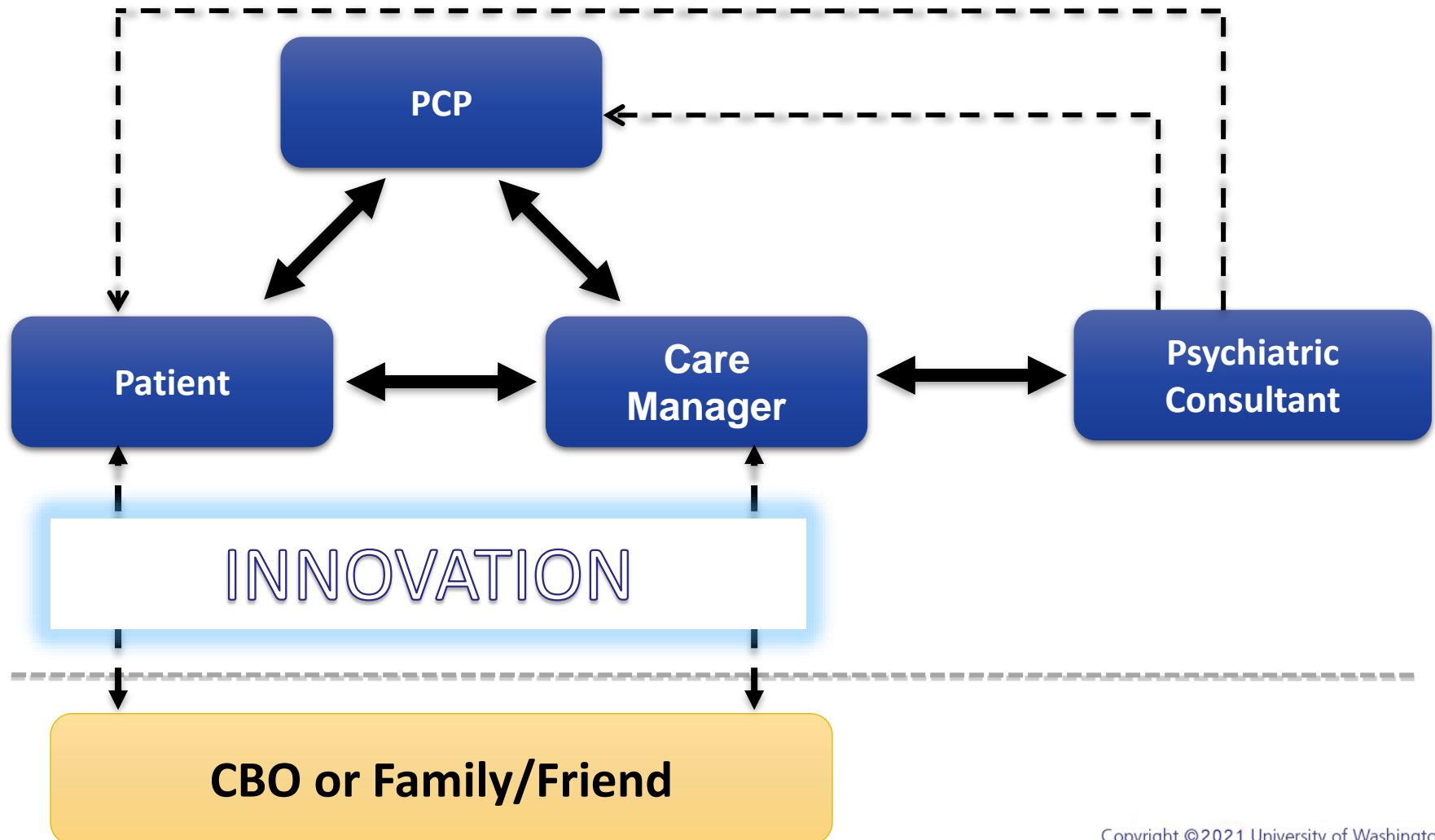
# PEARLS

- A national evidence-based treatment program for depression
- Community-based collaborative care
- 6 to 8 free in-home sessions focused on brief behavioral techniques
- Uses Home Visitors / Program Counselors to empower older persons to take action
- Addresses social determinants of health (e.g., food, transportation, legal services)





# Engaging CBO or family/friend(s)





# Promise of involving care partners



- Involving CBOs and family/ friend(s) in care can improve:
  - Access to care
  - Engagement in treatment
  - Patient care experience
  - Quality of care
  - Support if/when depression relapse
  - Addressing social determinants of health



# Care Partners Initiative (July 2015 – June 2021)





# Quote

*“... actually offering those services really forces us to look around to say, are we the best person to do that, or is someone else in the community already doing it and really excelling at it? So this grant was really an opportunity for us to formally partner with a community agency that we knew was offering amazing services to our patients, actually, in somewhat of a silo.....*

*I think the importance of community partnership really can't be overstated. So health centers are never really going to have the ability to offer every single service to our patients without having those collaborations are really critical for community health.”*

**- CMO at primary care clinic**



# Website and LMS

UW Medicine  
DEPARTMENT OF PSYCHIATRY  
AND BEHAVIORAL SCIENCES

Care Partners

CONTACT US

Search



[Home](#) / [About Care Partners](#) ▼ / [Learning Collaborative](#) ▼ / [Dissemination](#) ▼ / [Resources](#) ▼



## Care Partners

Bridging families, clinics, and communities to advance late-life depression care

Through Archstone Foundation's Depression in Late-Life Initiative, the Care Partners project seeks to improve depression care for older adults by building innovative and effective community partnerships between primary care clinics and either community-based organization (CBO) or family care partners. These partnerships can improve access to care, patient engagement, patient and provider satisfaction, quality of care, and the team's ability to address social care needs.

<https://cp.psychiatry.uw.edu>

Copyright ©2021 University of Washington







# Opportunities available via the Care Partners Learning Collaborative

- **Improve care for older adults with depression**
- **Further partnerships between primary care clinics and community-based organizations**
- **Innovate to address patients' medical, behavioral, social needs**
- **Build capacity for implementation, practice change**
- **Become part of a community of learning and practice**
- **Access expert, customized training and support**



# California Learning Collaborative

## Community Partnerships to Improve Depression Care

### Learning Goals

Explore how clinic-community partnerships can enhance depression care across different patient care domains (medical, behavioral and social)

- Find and engage patients and family in depression care
- Develop and implement a treatment plan to address patient care
- Monitor, adjust, adapt, sustain, quality improvement for depression care
- Adapt evidence-based practices for diverse and underserved populations, helping to reduce mental health disparities



# California Learning Collaborative: July 2021 – June 2022

## RFP

- Call for proposals: January 1, 2021
- Q&A Webinar: January 28, 2021, 9-10am Pacific
- Application review: January 1 – May 31, 2021 or until filled

## Awards to sites

- Site selection by June 2021
- 10 sites will be awarded \$20,000 each

## Learning Collaborative Structure

- Kickoff call July 2021
- 4 webinars
- In-person/virtual meetings:
  - October 2021
  - June 2022
- Monthly technical assistance calls and discussion board



# Creating a Learning Community

- All learn together
  - “All teach, all learn” [ECHO]
- Regular support
- Open communication



# Learning Collaborative Content

- **Building partnerships to improve depression care**
- **Implementation/practice change**
- **Quality improvement (QI)**
- **Health disparities/social needs**
- **Telepsychiatry**
- **Brief behavioral interventions for primary care**
- **Health care policy/population health**
- **Evidence-based practice (e.g. collaborative care, PEARLS)**
- **Sustainment**





# Pre-Launch Activities

- **Kickoff webinar July 2021**
- **Webinars on partnership building evidence-based depression care – Aug-Sept 2021**
  - **Approaching depression care through partnership and addressing social needs**
  - **Collaborative care and PEARLS basics**
  - **Basics of QI and Plan-Do-Study-Act (PDSA) in partnership**
- **Assess opportunities for learning and program development**
- **Prepare for Action Periods**



# In-Person Sessions

- **Oct 2021 and June 2022, Long Beach CA\***
- **All day sessions including:**
  - **Didactic content**
  - **Quality improvement work**
  - **Group work**
  - **Networking opportunities**

*\*In-person if feasible, virtual if needed due to COVID*

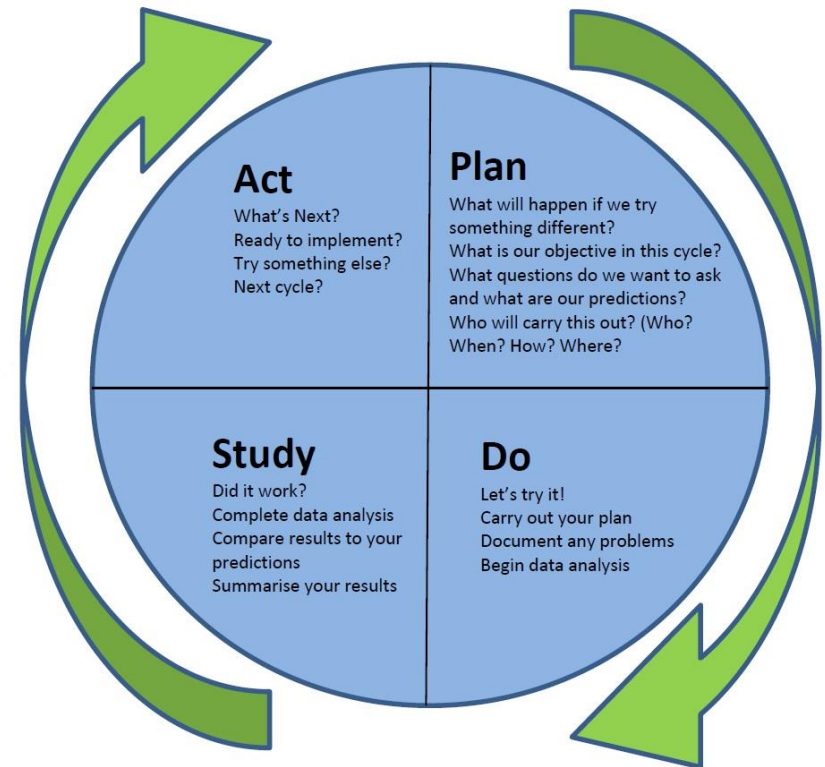


# Action Period Monthly Calls

- **Quality improvement PDSAs**
  - Monthly 60 min video calls
  - Active learning
  - Group support of implementation and quality projects from other learners
- Self-paced didactic learning between calls
- Social contact via Learning Collaborative LMS
- LMS discussion board postings prior to calls
- Opportunity to customize training/learning

# Why is this learning opportunity focused on QI?

- Poor patient outcomes and experience, and high costs of care result from gaps within healthcare systems
- QI provides a mechanism to improve system functioning



# Learning Collaborative Structure

Pre-launch activities  
Aug 2021 – Sept 2021

In-Person\*  
Meeting  
#1  
Oct 2021

Action  
Periods

In-Person\*  
Meeting  
#2  
June 2022

- Webinars on evidence-based depression care and partnership building
- Assess opportunities for learning / program development
- Engage partners

- Orient to learning collaborative
- Community / site intros
- Develop change skills by creating PDSA's on learning goals
- Plan for Action Periods

*Teams meet regularly to:*

- *Share learning tasks and skill building with other teams,*
- *Report progress on action plans*
- *Develop a Learning Community*

- Monthly group calls



- Discussion board postings



- Site presentations

Group  
Discussion



- Final update on progress on overall learning collaborative goals
- PDSA lessons learned and successes on learning goals
- Plans going forward

*\*In-person or virtual as feasible*





# Website and LMS

UW Medicine  
DEPARTMENT OF PSYCHIATRY  
AND BEHAVIORAL SCIENCES

Care Partners

CONTACT US

Search



[Home](#) / [About Care Partners](#) ▾ / [Learning Collaborative](#) ▾ / [Dissemination](#) ▾ / [Resources](#) ▾



## Care Partners

Bridging families, clinics, and communities to advance late-life depression care

Through Archstone Foundation's Depression in Late-Life Initiative, the Care Partners project seeks to improve depression care for older adults by building innovative and effective community partnerships between primary care clinics and either community-based organization (CBO) or family care partners. These partnerships can improve access to care, patient engagement, patient and provider satisfaction, quality of care, and the team's ability to address social care needs.

<https://cp.psychiatry.uw.edu>

Copyright ©2021 University of Washington





# Application Timeline

**January 1, 2021**

**January 28, 9-10am Pacific**

**January 1 - May 31, 2021**

**May 31, 2021 or until filled**

**January 1 - May 31, 2021**

**June 2021**

**~July 15, 2021**

**RFP opens**

**RFP Q & A Webinar**

**Intent to apply email**

**Full proposals accepted**

**Review process - ongoing**

**Notification of awards - rolling**

**Kickoff Webinar**

*Submit to [uwcp2@uw.edu](mailto:uwcp2@uw.edu)*



# Award Details and Requirements

- **\$20,000 total award:**
  - **\$10,000 payment August 2021 and \$10,000 payment May 2022**
- **Second payment dependent on:**
  - **Active participation and attendance of monthly action period sessions**
  - **Submission of monthly PDSA reports and discussion board posts**
  - **At least 2 attendees at first in-person/virtual meeting**



# Expectations for Participating Sites

- **Identify core team of 3 – 4 members representing different roles (e.g., leadership and clinicians) from both the primary care clinic and community partner**
- **Designate one point person to manage team's participation**
- **Create, implement, and measure a plan for depression care and partnership improvement**
- **Actively participate in the 12-month Learning Collaborative**
- **Complete a short online survey in June 2022 reflecting on your experience and progress toward learning collaborative goals**



# Who Should Participate

- **California primary care clinics and community partners committed to improving depression care for older adults ( $\geq 60$  years old)**
- **Clinics serving large older adult populations such as Medicare Advantage**
- **Urban, suburban, and rural clinics and CBOs are encouraged to apply**







# Application Information

- **Eligibility Criteria**
  - CA for-profit or non-profit 501(c)(3) primary care clinics and CBOs with an established or developing partnership
  - Capacity to manage award activities
- **Intent to Apply**
  - Email brief summary of goals for attending the learning collaborative
  - Request to schedule an inquiry call with UW/UCD (*recommended*)
- **Proposal (*3 – 4 pages*)**
  - Background partnership and plans to sustain partnership
  - Goals for attending
  - Letter of support from partnering organization

*For more information on proposal requirements, please visit:*  
<https://cp.psychiatry.uw.edu/learning-collaborative/>



# Application information

- **Evaluation Criteria**
  - Strength of the partnership to support the proposed work
  - Capacity to deliver evidence-based depression care to older adults
  - Experience addressing patient social needs
  - Experience and commitment to quality improvement
  - Organizational capacity and readiness to implement proposal
  - Potential for innovation and/or dissemination
  - Overall quality of proposal
- **Selection**
  - Proposals will be reviewed by UW in partnership with UCD and the Archstone Foundation
- **Questions?**
  - Please contact us at [uwcp2@uw.edu](mailto:uwcp2@uw.edu)



**Thank you!**

**Questions?**