

This document is for behavioral health care manager (BHCM) self-report and for BHCM supervisor(s) to complete, if applicable. Answers will help tailor the training plan to each BHCM's needs. This should be completed once pre-training and again post-training, prior to the launch of the collaborative care (CoCM) program. Please note your name below (and BHCM's name, if different).

BHCM Skill Assessment						
Name:	BHCM Name:	Site:	Date:	Needs Training	Approaching Proficiency	Proficient
Collaborative Care Basics						
Collaborative Care model				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Collaborative Care team member roles (BHCM, Psychiatric Consultant, PCP)				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Collaborative Care workflows				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pitching the program to patients and providers				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patient registry				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Collaborative Care Intermediate Skills						
Collaborative Care Intake: Assessment content and format				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Systematic Caseload Review: Format, case presentation, documentation				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Documentation templates				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outcome measures: Screening and monitoring, specifically using the PHQ-9, GAD-7, AUDIT-C, and CIDI				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Levels of Care: Triage, assigning level and contact frequency, discussing with both patients and psychiatric consultant				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-management plans: Creating and monitoring plans with patients				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relapse Prevention Plans				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clinical Skills						
Risk Assessment and Safety Planning				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Legal obligations: Petitioning for care, filing a 3200, duty to warn				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diagnostic assessments for common behavioral health conditions (depression, anxiety, SUD, bipolar disorder, etc.)				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Psychoeducation for common behavioral health conditions (depression, anxiety, SUD, bipolar disorder, etc.)				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Knowledge of psychotropic medications seen in primary care (SSRIs, SNRIs, benzodiazepines, mood stabilizers, etc.)				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Behavioral Activation				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Screening, Brief Intervention, and Referral to Treatment (SBIRT)				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Problem-Solving Therapy				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivational Interviewing				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Referrals and resources in the community (e.g., psychotherapy, SUD treatment, housing, transportation, etc.)				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

This document will help BHCMs and their supervisors plan for completing training. Based on results from the skill assessment, the curriculum should be tailored to each BHCM's needs. This training plan is laid out chronologically, though tasks may be shifted as needed.

For self-paced options, the training specialist will follow up with the BHCM via videoconference or in person to answer questions and assess whether further training is indicated. The BHCM also has the option to request live training in lieu of self-paced options if more comprehensive overview is needed.

Training Tasks	Time	Format	Self-Paced
Collaborative Care Basics			
Collaborative Care Overview: Team member roles	45 min.	Recorded webinar	<input checked="" type="checkbox"/>
Review MCCIST and UW AIMS websites, including "Care Manager Essentials"	3 hrs.	mccist.org , aims.uw.edu	<input checked="" type="checkbox"/>
Panel review: Format, case presentation, documentation	1 hr.	Recorded webinar, online materials	<input checked="" type="checkbox"/>
	1-2 hrs.	Live shadowing or videoconference	<input type="checkbox"/>
Clinical workflow	20 min.	Online materials	<input checked="" type="checkbox"/>
Pitching the program to patients and providers: Script and practice	15 min.	Online materials	<input checked="" type="checkbox"/>
	30 min.	Videoconference	<input type="checkbox"/>
Time Needed for Training	Self-Paced: 5.5 hrs.	Scheduled: 1.5-2.5 hrs.	Total: Approximately 7-8 hrs.

Collaborative Care Intermediate Skills			
Collaborative Care Intake and Assessment: Content, format, documentation, shadow clinician if possible	1 hr.	Recorded webinar, online materials	<input checked="" type="checkbox"/>
	30-60 min.	Live shadowing or videoconference	<input type="checkbox"/>
Documentation: Forms, sharing, and customizing	1 hr.	Online materials	<input checked="" type="checkbox"/>
Outcome measures: PHQ-9, GAD-7, AUDIT-C, CIDI, and MoCA	30 min.	Videoconference	<input type="checkbox"/>
Levels of Care: Triage, assigning level and contact frequency, referrals	15 min.	Online materials	<input checked="" type="checkbox"/>
Patient registry: If applicable, training specialist will support BHCM in piloting the registry, exploring functionality, and entering test patients	1 hr.	Live shadowing or videoconference	<input type="checkbox"/>
	1 hr.	Self-practice	<input checked="" type="checkbox"/>
Self-Management Planning from a Motivational Interviewing Perspective	45 min.	Recorded webinar	<input checked="" type="checkbox"/>
Relapse Prevention Planning	30 min.	Recorded webinar, online materials	<input checked="" type="checkbox"/>
Time Needed for Training	Self-Paced: 5 hrs.	Scheduled: 1-2 hrs.	Total: Approximately 6-7 hrs.

Clinical Skills			
Risk Assessment and Safety Planning: Didactic, skills assessment, role play, legal obligations (e.g., petitioning for care, filing a 3200, duty to warn)	1 hr.	Online materials	<input checked="" type="checkbox"/>
	30-60 min.	Role-play as needed	<input type="checkbox"/>
Psychopharmacology and Medication Monitoring	2 hrs.	Recorded webinar and follow-up quiz	<input checked="" type="checkbox"/>
Diagnostic knowledge of common behavioral health conditions seen in CoCM settings (e.g., depression, anxiety, SUD, bipolar disorder); role play assessments if needed	30 min.	Online materials	<input checked="" type="checkbox"/>
	1 hr.	Role-play as needed	<input type="checkbox"/>
Psychoeducation for common behavioral health conditions seen in CoCM settings (e.g., depression, anxiety, SUD, bipolar disorder)	30-60min.	Online materials	<input checked="" type="checkbox"/>
Behavioral activation: Basic training	1 hr.	Recorded webinar	<input checked="" type="checkbox"/>
Motivational Interviewing: Basic training; plan for further training as needed	1 hr.	Online materials, suggested texts	<input checked="" type="checkbox"/>
Problem-Solving Therapy: Basic training	30 min.	Recorded webinar	<input checked="" type="checkbox"/>
SBIRT: Basic training	2 hrs.	Recorded webinar	<input checked="" type="checkbox"/>
Referrals and resources in the community (e.g., psychotherapy, SUD treatment, housing, transportation, etc.)	20 min.	Online materials	<input checked="" type="checkbox"/>
Time Needed for Training	Self-Paced: 9-10hrs.	Scheduled: 1.5-2 hrs.	Total: Approximately 10.5-11.5 hrs.

Behavioral Health Care Manager: Clinical Supervision Plan

This document outlines a supervision plan that has been seen to promote good patient outcomes, fidelity to the evidence-based model, and a fluid caseload. The BHCM and clinical supervisor should use this guide to provide recommended monitoring as a new BHCM becomes more comfortable in their role.

Shadowing	Training Stage	Time	Format
Shadow existing BHCM in clinic, if possible	Pre-implementation	1 day	In person, if possible
Shadow 2-4 systematic caseload reviews	Pre-implementation	2-4 hrs.	Videoconference

Initial Supervision and Training	Training Stage	Time	Format
Training specialist and/or clinical supervisor shadow intermittently in first few weeks with decreasing frequency	First month of implementation	4-6 hrs.	In person if possible, or calls via videoconference
Training specialist coaches 4-6 systematic caseload reviews	First 1-2 months of implementation	4-6 hrs.	Videoconference
Weekly caseload review and coaching with training specialist and/or clinical supervisor: Discuss all new referrals and intakes	First 1-2 months of implementation	1 hr./week for 4 weeks	Videoconference

Ongoing Supervision and Training	Training Stage	Time	Format
Monthly caseload review and individual clinical supervision with training specialist and/or clinical supervisor	Months 4+ of implementation	1-2 hrs./month	Videoconference
Monthly group supervision	Months 4+ of implementation	1 hr./month	Videoconference
Quarterly caseload review with training specialist and/or clinical supervisor: Benchmarks, adjustment, flow	Months 4+ of implementation	1-2 hrs./quarter	Videoconference