

CHCF CHIP Summary

Name, Degree: Anh Thu Bui, M.D.

Professional Title, Organization Medical Consultant, Behavioral Health, California Department of Health Care Services. Associate Medical Director of Psychiatry, LifeLong Medical Care (2015-2021).

CHIP Title: Managing Mental Health Crises on the Telephone (an interim report from my leadership journey)

The CHIP was a focal point of the CHCF program, but my true CHIP came through learning about myself as a leader during challenging times. Fueled by burning questions and supported by mentors, friends and family, I managed to thrive during the past two years. Given all the crises in the world, and given my personal and professional investment in mental health, what could I do to contribute? How might we improve our communities' health and wellbeing? (In the face of problems that pre-dated but exacerbated by the pandemic, from health disparities, to social inequities and structural racism.)

LifeLong Medical Care has co-located psychiatrists since the 1990s, including advanced practice professionals, and also well set up with several primary care providers (PCPs) who have completed psychiatry mini-fellowships. Many PCPs were open to prescribing antidepressants and other psychotropics; screening tools such as PHQ-9 and SBIRT were becoming routine, and the 2020 adoption of Epic EHR seemed promising for data collection and follow-up. However, the pandemic upended all available resources, and PCPs became too busy to expand their workload. I switched my CHIP focus to using group models of care to balance out high patient demand vs low staff supply, and identified several types of groups: shared medical visits/education, support groups for BH conditions and substance use recovery. I also found several barriers to scale up virtual groups: billing methods in FQHC precluded group visits; staff time was limited, and patients were reluctant to join groups, partly due to technology barriers.

It took another year of reflection, including a career change to health policy work, for me to realize that I did complete CHIPS on an accelerated timeline. In March 2020, our BH workforce switched to telehealth. Soon, frontline staff reported a flood of crisis calls, without BH staff in the clinic for warm hand-offs. In addition to creating urgent workflows for dealing with mental health crises on the telephone, our leadership team increased support and training for staff. I organized a series of training sessions that were also recorded for staff who could not attend the live training, on topics of suicide prevention, intimate partner violence and child abuse assessment on telehealth. Between April and August of 2020, we trained 80 front-line staff, 10 nurses, and 22 PCPs (7 applied for and received CMEs). I created several resources: workflow for Crisis Situations during Telehealth visits, and community resources for mental health support during COVID-19. Anything I did felt small, in the context of global crises, but in the words of my pod advisor, doing projects in an FQHC proved creativity and persistence.

As a psychiatrist, and beneficiary of many years of Jungian therapy, I must tell this story via an archetypal framework: in this case, the Heroic Journey. Every heroic journey entails the call to adventure, meeting mentors, entering the Unknown, enduring trials and challenges, hitting bottom, going through transformation and returning with solutions or wisdom. My call to action was the 2016 election and ensuing socio-political chaos; my mentors came from multiple communities, particularly women of color (thanks to CHCF for supporting me with a Latina leadership coach). I entered an unknown world of political activism, learned through trials and tribulations, found strength from my Vietnamese heritage and transformed my refugee experience into a source of strength, finding a place among like-minded progressives seeking a way to use our collective strength and experience to build a more just and equitable society. I learned that leadership is a lifelong journey within ever-expanding communities; and like becoming a mental health clinician, everything I do matters, from taking care of the fundamentals of life (food, family, friends, fun) to maintaining faith, holding meaning and purpose, being part of a whole. Thank you to CHCF, Cohort 19, and Podemic-19 colleagues!