



COMPASS-PH/BH™

The COMPASS-PH/BH™ is a program self-assessment tool for primary health/behavioral health integration, commonly used in the context of CCISC implementation. The COMPASS-PH/BH™ can be used by all types of primary health and behavioral health clinics and treatment programs, whether working in their own integration process or in partnership with others, to develop core capability to provide integrated programs, interventions, and services to meet the needs of service populations with all types of physical health and/or behavioral health issues, as well as other complex human services needs. The tool helps programs begin the process of developing integrated PH/BH capability with high regard for the values of person-centered, self-directed, trauma-informed, and holistic care, coupled with the provision of welcoming, hopeful, and integrated screening and assessment, collaborative partnerships, effective treatment and disease management services, and positive recovery supports.

The COMPASS-PH/BH™ is for programs offering physical health care to individuals and families, and equally for programs offering behavioral health care.

The COMPASS-PH/BH™ is designed to produce a number of important outcomes:

- Create a common language and understanding of integrated PH/BH-capable services.
- Create a foundation for an improvement process through an empowered conversation that involves many people partnering to improve the integration of the program and its services.
- Establish an organizational baseline of integrated PH/BH capability as a rational foundation for a continuous quality improvement change process.
- Empower organizations and staff to accomplish step-by-step goals to create integrated care for people and families with complex needs.
- Create a shared process using a common tool that can be used in any system for any array of diverse programs working in partnership on integrated PH/BH capability development.

The COMPASS-PH/BH™ is organized by sections that address aspects of integrated PH/BH-capable program design:

1. Program Philosophy
2. Program Administrative Policies
3. Quality Improvement and Data
4. Access
5. Screening and Identification
6. Integrated Assessment
7. Integrated Person-centered Planning
8. Integrated Treatment/Recovery Programming
9. Integrated Treatment/Recovery Relationships
10. Integrated and Welcoming Program Policies
11. Medication Management
12. Integrated Discharge/Transition Planning
13. Program Collaboration and Partnership
14. General Staff Competencies and Training
15. Specific Staff Competencies