Sample language for CCC BHP performance plans:
The following have been identified as essential elements of clinical duties for a CCC PC-MHI provider. The CCC PC-MHI is expected to obtain and maintain mastery within the following domains of core competency developed by Robinson and Reiter (2007)

- **Clinical Practice Skills:**
  - Applies principals of population based care as measured by monthly number of patient contacts, number of 30 minute appointments, number of encounters per patient, and range of interventions provided.
  - Percentage of all appointments are 30 minutes (will vary by setting, should range from 60-100%)
  - Maintains daily open access slots by alternating scheduled with open appointments
  - Next available "scheduled" appointment is within two weeks
  - Interventions and documentation focus on functional assessment as reflected in brief, focused notes and number of contacts per patient
  - Uses time-limited, evidence based, interventions that are simple and concrete, such as relaxation training, cognitive behavioral techniques
  - Uses self-management/home-based practice
  - Uses brief assessments routinely (e.g., PHQ-9, PCL, AUDIT C, etc)
  - Uses intermittent visit strategy and flexible patient contact strategies
  - Triage appropriately and efficiently to specialty mental health services
  - Provides behavioral medicine interventions (including but not limited to- stepped care level 2 tobacco cessation, alcohol misuse, weight management, coping with chronic illness, stress management, sleep hygiene, and Other interventions will be provided as clinically appropriate, based on patient need.)
  - Leads MOVE! Group, or co-leads with other team members
  - Conducts individual MOVE! appointments

- **Documentation Skills:**
  - Writes clear concise notes, generally ½-1 page long, with explicit impression, recommendations and plan for PCP use adds PCPs as co-signers
  - Completes relevant Clinical reminders
  - Completes suicide risk assessment note
  - Notes document curbside consultation results
  - Notes are completed within 24 hours

- **Consultation Skills:**
  - Uses warm-hand off strategy with PCPs
  - Routinely provides feedback (verbal and/or written) to PCP and other PACT members same day as referral
  - Routinely Consults with PCPs and other PACT team members about plan of care for patients
  - Conducts effective curbside consultations
  - Integrates within primary care team and works closely in collaboration with PACT team
  - Attends PACT meetings and daily huddles
  - Provides education to PACT on BH issues as well as consultation on tips for successful care management and patient facilitation, even when no direct patient contact.

- **Continuing Education:**
  - Participates in monthly IPC phone calls and maintains knowledge of IPC literature
  - Attends trainings in EBP for brief therapies
  - Conducts self-assessment using Robinson and Reiter (2007) core competency checklist and seeks additional training as needed