

Online Supplemental material for: Applying a model of stakeholder engagement to a pragmatic trial for people with mental disorders

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Appendix 1. Engagement strategies, roles, and results for the different stakeholders in a pragmatic trial of the Engaging Patients in Care program for people with mental disorders

Stakeholders	Engagement strategies	Role	Results
Patients			
<ul style="list-style-type: none"> Patients at community mental health centers, particularly those who have been to the ED 	<ul style="list-style-type: none"> Developmental focus groups Annual interviews with participants Members on Implementation Team 	<ul style="list-style-type: none"> Provide feedback on program design Provide feedback on program implementation Describe experiences with the program 	<ul style="list-style-type: none"> Revisions to Care Navigator program manual
Clinicians			
<ul style="list-style-type: none"> Certified peer specialists and mental health professionals at CMHCs 	<ul style="list-style-type: none"> Key informant interviews Site visits Member on Implementation Team Annual interviews with Care Navigators 	<ul style="list-style-type: none"> Provide feedback on program design Provide feedback on development and implementation of Care Navigator training Provide feedback on program implementation Describe experiences with the program 	<ul style="list-style-type: none"> Revisions to Care Navigator program manual Tailored program to fit with their work in the CMHC
<ul style="list-style-type: none"> Mental health professionals at EDs 	<ul style="list-style-type: none"> Key informant interviews Site visits 	<ul style="list-style-type: none"> Provide feedback on program design Inform recruitment strategies 	<ul style="list-style-type: none"> Refined recruitment protocols Developed a script for providers involved in referring patients to the study

Implementation Team

- Patient
- Provider: Certified peer specialist
- Patient advocacy organization
- Payer: State Department of Health and Human Services
- Policy maker: State Department of Mental Health
- Co-learning between Implementation Team partners and research team
- Open communication
- Develop protocol for ED staff to distribute study materials to participants once they enroll
- Refinement of recruitment and enrollment protocols
- Understanding of billing codes that apply to intervention activities
- Refinements to Care Navigator program manual
- Oversee program planning and implementation
- Facilitate access to sites
- Ensure appropriateness of the program for the CMHCs and EDs
- Ensure patient-centeredness
- Facilitate dissemination of results within South Carolina

Advisory Board

- Peer workforce non-profit organization/consumer
- Purchaser/consumer/patient advocate: Public sector behavioral health managed care company
- Provider/payer: Behavioral healthcare systems management
- Provider/Mental health workforce organization
- Provider
- Decisions by consensus
- Open communication
- Input on study proposal
- Input on program planning and implementation
- Oversee key study decisions
- Spearhead planning for program sustainability
- Facilitate dissemination of results to national audiences
- Addition of mental health recovery as an outcome measure
- Refinements to Care Navigator program manual

Abbreviations: CMHCs, Community Mental Health Clinics; EDs, Emergency Departments

Appendix 2. Changes to the Engaging Patients in Care Program based on stakeholder engagement and input

Component of the Engaging Patients in Care Program	Changes resulting from stakeholder engagement
Recruitment and Enrollment Process	<ul style="list-style-type: none">• Materials were developed for the mental health professionals who are involved in referring patients to the study team. These materials included cards with information about the study and the eligibility criteria.• Materials were developed to give to the patient when they were still in the ED. These materials include a figure describing the steps of the study, a card with the contact information for their Care Navigator, and directions to get to the CMHC.• Worked with stakeholders at each ED to establish a person who would be responsible for overseeing and storing study materials.
Care Navigators – Training	<ul style="list-style-type: none">• Incorporated more information on billing codes for professionals and peers.• Added an activity for Care Navigators to identify procedures for making appointments at their clinic.• Allowed for training of additional individuals who could serve as back-up Care Navigators in case the main Care Navigator was on vacation or medical leave.
Care Navigators – Program Manual	<ul style="list-style-type: none">• Ensured that the scripts for the Care Navigators clearly conveyed empathy and support. For example, the script emphasized that the Care Navigator was looking forward to meeting the patient and that the Care Navigator and the patient would be closely working together.• For the warm hand-off phone call between the Care Navigator and patient while the patient is in the ED, the script was revised to include information about what the patient can expect to happen at the first visit at the CMHC.• Added to the list of attitudinal and logistic barriers to care that Care Navigators discuss with patients. Example additions include: Symptoms bothering me too badly to come; Fear that staff will find out I am not taking my medication; Discomfort with sharing private details with strangers.• Revised the sheet that Care Navigators use with patients to guide them through the goal

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setting process to address a barrier to care. To make it more user friendly, the goal setting sheet was simplified and an example was included.

- Ensured that participant encounter documentation was brief and easy to complete, while capturing necessary information, to minimize the burden on Care Navigators.

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