**Conversation starter**

Think of a recent patient whose outcomes might have been improved if you had engaged them sooner

**Lay of the land** – characterizing the state of C-L

What is your clinical setting? (*e.g.*, academic, VA, tertiary care, community hospital)

Who is looking to change or enhance C-L psychiatry at your institution? (*e.g.*, administration has identified needs, medical & nursing teams have been asking for more help, your department is looking for enhancing care, you recognize needs)

What is the institutional culture regarding mental health needs at your institution? How aware of the needs are primary teams and hospital leadership?

What is the current volume per practitioner at your hospital? (*e.g.*, number of new consults and follow-ups per day)

Have there been prior attempts at innovating C-L services at your institution? If so, what happened?

**Teamwork makes the dream work** – people working to solve the problem

Are there certain patient populations at your institution that might inform the selection of specialists? (*e.g.*, applied behavioral analyst for dementia with behavioral disturbance; recovery counselor for substance use disorders)

What allies might you have at your institution, both within and outside your department?

What personnel is currently available at your institution who might be able to “float” or even to transition their roles onto a proactive C-L service? (*e.g.*, an LCSW in the ED or inpatient psych unit interested in working on a consult service, residents/fellows who would be interested in working on a new project)

What educational programs for training health care professionals exist at your institution, and are there opportunities to develop a rotation site on your service? (This is another way to “grow” your service)

Are their existing grant funding opportunities (e.g., Americorp) who might support training for a team member?

**Looking for opportunities** – a needs assessment of patients and stakeholders

Has anyone at your institution ever conducted a mental health needs assessment? If so, what did it find?

Are you aware of any unmet mental needs on specific specialty service lines (*e.g.*, hospital medicine, surgery, OB/GYN, ICU) at your hospital?

What patient populations at your institution have existing outpatient services or a collaborative care model in place but need collaborators in the inpatient setting? (*e.g.*, patients with substance use disorders, sickle cell clinic, post-ICU care clinics)

Are there specific issues that your institution has been facing pressure to address that an initiative like this could help? (*e.g.*, staff burnout due to behavioral disturbances, suicide prevention, surreptitious in-hospital substance use)

Have employee engagement surveys uncovered issues with staff retention or dissatisfaction that may be related to issues in work environment that increased mental health supports might address?

Are you aware of any regulatory reviews (e.g., CMS, JCAHO) that could be addressed by enhanced psychiatric consultative services?

What existing hospital programs require mental health screening (e.g., trauma center regulatory requirements for SBIRT)?

What institutional goals, metrics, or scorecard items relate to mental health or substance use outcomes?

Who are your leaders in quality improvement or population health efforts? Have you met with them to discuss their goals and how psychiatry can help meet them?

What other EMR-based screening is being done at your institution that you could re-purpose for a proactive C-L service?

**Every what needs a good why**

What outcomes of interest do you think you could reasonably achieve with this project? (*e.g.*, nursing staff satisfaction, primary team burnout, reduction in restraints use, reduction in inappropriate prescribing, referrals to outpatient care)

In considering your goals, ensure that they are SMART

* Specific
* Measurable\*
* Attainable
* Relevant
* Time-based

\*Ensure that the values you want to track are being collected reliably and that these data are obtainable in a format that allows for analysis (*e.g.*, patient-level data).