Interprofessional Team Collaboration to Study Integrated Behavioral Health Services in Primary Care

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Srivastava, Priya; Nemani, Sindhura; Schweitzer, Danielle; and Jones, Anne C., "Interprofessional Team Collaboration to Study Integrated Behavioral Health Services in Primary Care" (2024). *Rowan-Virtua Research Day*. 136.
https://rdw.rowan.edu/stratford_research_day/2024/may2/136

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Interprofessional Team Collaboration to Study Integrated Behavioral Health Services in Primary Care
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INTRODUCTION
- Following the COVID-19 pandemic, mental health demand has soared, challenging primary care providers to meet patients’ needs.
- Health policy research demonstrates that primary care has become the de facto safety net of the U.S. healthcare system.
- Integrated behavioral health in primary care has been shown to meet the Quadruple Aim, increasing patient access, improving patient experience, reducing cost, and alleviating burden on interprofessional healthcare.
- On average, if a Family Medicine doctor sees 20 patients, at minimum, 4 of those patients would have some level of mental health distress.
- Essential for future primary care physicians and clinical psychologists to receive training in the care of patients with conditions like PTSD.
- Mobile Applications may meet this need in our modern age where using them is very accessible.

METHODS
- **Intake**:
  - Warm handoff
  - Screen with DSM CAPS-5
  - Download PTSD Coach application
- **30 days**
- **Follow Up**
  - Patients instructed to use application at least thrice (or more if needed) daily for 30 days.
  - Patients’ symptoms are re-evaluated using the CAPS-5 at the 1 month follow-up.

RESULTS

**Patient Feedback (N=5)**

<table>
<thead>
<tr>
<th>Feedback among Follow Ups</th>
<th>Mean (SD) out of 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Learned skills to cope with mental health concerns</td>
<td>4 (± 1.73)</td>
</tr>
<tr>
<td>Felt comfortable receiving mental health services in study</td>
<td>4 (± 1.73)</td>
</tr>
<tr>
<td>Satisfied with the amount of time study staff spent with them</td>
<td>4.2 (± 1.79)</td>
</tr>
</tbody>
</table>

**Trainee Feedback (N=5)**

**Benefits:**
- Collaborative environment
- Promoted integrated care
- Mutual learning
- Different knowledge/training experiences
- Learning about each field
- Efficient research logistics

**Challenges:**
- Schedule Discrepancies
- Establishing credibility in an advanced medical setting
- Communication style, professionalism & etiquette
- Varying levels of clinical/mental health experience
- Morbid vs suicidal ideation
- Interviewing skill & technique
- Clinical judgement with CAPS-5

DISCUSSION
- We wanted to evaluate the feasibility of interdisciplinary collaboration between medical and clinical psychology students to integrate a mobile intervention in academic outpatient family medicine clinics.
- Many patients did not expect to receive such an intervention when arriving for their PCP visit, but overall their feedback reflects a positive experience with study staff, as well as the mental health care.
- Trainees gained expertise in collaboration and establishing professional relationships with students of different disciplines.
- Logistical aspects like schedule discrepancies and varying research experiences were challenges students learned to work through together.
- Students early in their clinical career navigated a fast-paced medical setting by establishing credibility with patients by making independent decisions.

CONCLUSION
- Warm handoffs & on-site mental health support access in primary care: patients appreciative; high satisfaction
- Mobile app-based study: a creative way to study integrated care.
- Mission driven: study combines clinical practice, research and teaching to provide a meaningful experience for trainees.
- Interprofessional research is challenging yet rewarding.
- Future work: training new researchers, expanding study & services, fuller implementation of integrated behavioral health, expanded mobile app options.

Acknowledgements
Thank you to Dr. Joanna Petrides, Dr. Kristin Bertsch, Dr. Meagan Vermaulen, Dr. Kneena Shih, Faith Shank, Kainaat Anwar, Alexandra Nicolli, Salma Saiuddin, and Umar Siddiqui for your contributions to this study.