How Effective is a Nurse Managed Clinic for Integrated Behavioral Health Care

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Statement of Conflict of Interest

- As required by the American Nurses Credentialing Center's Accreditation Program we would like to make you aware of all potential conflicts of interest. This educational activity is being presented without the provision of commercial support and without bias or conflict of interest from the presenter.

Objectives

- Describe how an integrated system of care can impact the mental health of vulnerable populations
- Review current practice and outcome measures
- Examine implementation challenges
Integrated Health Care

- Integrated Health Care (IHC) is an innovative program of nurse-managed health centers in the Chicago metropolitan area specializing in providing integrated primary and mental healthcare services for people with a serious mental illness through a collaborative partnership with Thresholds Chicago.

Mile Square

- **IHC South and North** (Located in the Thresholds Buildings)
- Nurse practitioners (FNP & PMHNP)
- Full service primary, behavioral and mental healthcare for adult patients

Mile Square Main

- IHC Main located within primary care
- Nurse practitioners (PMHNP)
- Work collaboratively with primary care to provide full service primary & behavioral healthcare for adult patients
# Population Characteristics

- Individuals served by Mile Square are
  - At or below 200% of the federal poverty level but above 100% poverty
  - Low education level
  - Public housing; Threshold’s housing; private
  - Diagnosis
    - Mood disorders – 29%
    - Anxiety disorders including PTSD – 25%
    - Other – 46%

# Challenges for Integrated Care

- Frequency of visits & time lapse between scheduled appointments
- Follow-up (90 days on tx)
- No Show Rate
- Cancelled/rescheduled

# Current Outcome Data

- Satisfaction
  - % patients responding “agree or strongly agree” to: The overall quality of care I received at the clinic was good
  - % patients responding “agree or strongly agree” to: I will probably use this clinic again
  - % patients responding “agree or strongly agree” to: I would tell a relative or friend to use this clinic
Current Outcome Data

- % of Patients with Psychotic Disorders Who Received Their Injectable Antipsychotic Medication Within the Past Month
- % of Psychiatric Patients With a documented current Treatment Plan Documented = patient involved in plan
- % of Psychiatric Patients Who Have Not Had a Hospitalization Since the Previous Psychiatric Visit
- Average Change in PHQ-9 Score for Patients with Depression

Challenges

- Modifiable Risk factors
  - Smoking & substance use
    • Abstinence maintenance
    • Initiation of abstinence
  - Weight Management
    • Pounds or waist measurement
  - Sleep
    • Total Hours; Sleep initiation and maintenance
- The PHQ-9 & GAD-7

Case Examples

- Joan - 35 yr old divorced AA female
- Paul – 50 yr old married AA male
Shared Decision Making

- The role of shared decision making as a method to influence treatment outcomes
  - Choice, self-determination, & empowerment
  - Evidence to support shared decision making and clinical outcomes

Recommendations

Examine Select Measures
- Shared Decision Making
  - Questionnaire SDM- Q-9
    - Outcome Rating Scale – ORS
    - Session Rating Scale - SRS

Pilot Data

- Shared Decision Making
  - Weight Management
    - Pounds or waist measurement
  - Sleep
    - Total Hours; Sleep initiation and maintenance
- Change in PHQ-9 & GAD-7 scores
- Satisfaction with individual sessions
  - Session Rating Scale - SRS
References

De la Cuevas, Carlos, Pinato, W., Fereidun-Peraza, L., & Serrano-Aguilar, P. (2013). Shared decision making in psychiatric practice and the primary care setting in unique, as measured by a 9-item Shared Decision Making Questionnaire (SDM-Q-9). Neuropsychiatric Disease and Treatment, 9,1045-1052.


