

# Improving Mental Health in Primary Care Clinics for Rural and Underserved Populations

*Rural patients with complex mental health conditions who get collaborative care do just as well as those who receive specialty care via telemedicine*

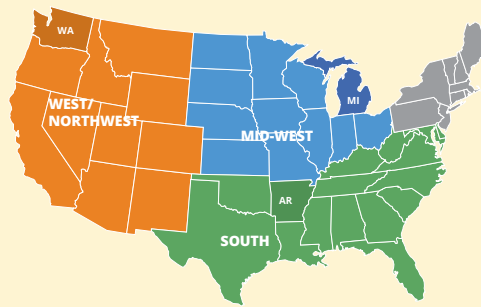
## The Problem:

While there are highly effective treatments for PTSD and Bipolar Disorder, many primary care patients in safety net settings such as Community Health Centers (CHCs) do not have good access to these treatments. Every CHC is located in an underserved areas, with almost half in rural areas. Most do not have psychiatrists or licensed clinical psychologists practicing on site.

## The Solution:

Providing effective treatment for PTSD and Bipolar Disorder in CHCs can improve quality of life for hundreds of thousands of Americans.

## Study To Promote Innovation in Rural Integrated Telepsychiatry (SPIRIT)



Conducted in **24** Community Health Centers in Washington, Michigan, and Arkansas

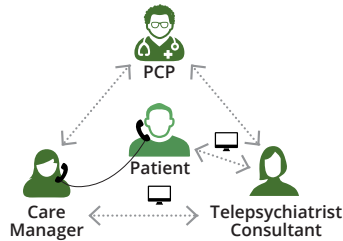
**1000+** patients enrolled who screened positive for post-traumatic stress disorder and/or bipolar disorder

## The Research Question

Is it better for off-site mental health specialists to support primary care providers' treatment of people with PTSD and Bipolar Disorder through an integrated care model or to use telemedicine technology to facilitate referrals to offsite mental health specialists?

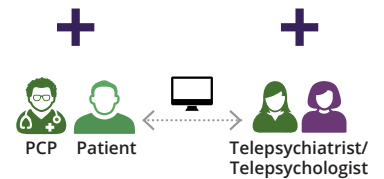
### Telepsychiatry Collaborative Care

Patient care was managed by a Primary Care Provider (PCP) and a care manager (nurse or social worker) in **consultation with a telepsychiatrist from the state medical school.**



### Telepsychiatry & Telepsychology Enhanced Referral

Telepsychiatrist and/or telepsychologist from the state medical school were credentialed and privileged to practice at the CHC and **assumed responsibility for the patient's mental health care.**



## Baseline Characteristics of CHC Patients Screening Positive for PTSD and/or Bipolar Disorder

### RACE/ETHNICITY



### POVERTY STATUS



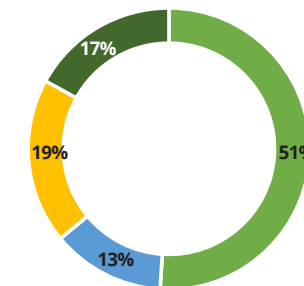
### PRESCRIBED PSYCHOTROPIC MEDS



### AT RISK ALCOHOL USE

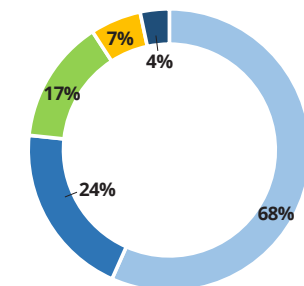


### DRUG USE



### EMPLOYMENT STATUS

- unemployed
- part time
- full
- other



### INSURANCE STATUS

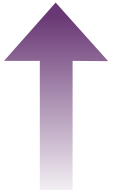
- medicaid
- medicare
- pvt insurance
- uninsured
- military

*\*categories not mutually exclusive*

## Outcomes: Significant Mental Health Improvement

Both groups showed statistically and clinically significant improvement with treatment and telepsychiatry collaborative care was as effective as referral to telepsychiatry and telepsychology. Measured improvement from baseline to 12 months across all symptoms.

**PTSD Symptoms Improved:**  
26%–35%



**Depression Symptoms Improved:**  
26%–30%



**Anxiety Symptoms Improved:**  
21%–27%



**Mood Stabilized:**  
17%–19%

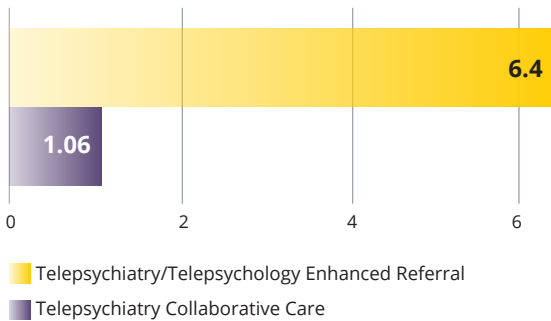


**Mental Health Related Quality of Life Improved:**  
26%–29%



### Efficient Use of Mental Health Resources

- Access to psychiatrists and psychologists is a barrier to treatment
- Telepsychiatry collaborative care utilized less specialist time including fewer psychiatry visits.
- Telepsychiatry collaborative care improves access by using this scarce resource more efficiently than telehealth enhanced referral.



### Collaborative Care Works for Primary Care Providers and Their Patients: Their Own Words

*"These are my patients. With telepsychiatry collaborative care, my patients were seeing me regularly for medication refills, and then we had ready access to telepsychiatrist care through the care manager, to call down and see how the telepsychiatrist might suggest changing medications and getting an occasional consult."*

PTSD (and bipolar disorder)

*"My prescribing practices now mimic the telepsychiatric consultant. There is a level of comfort now where I would be comfortable starting some medications for PTSD while waiting to try to transition and get further help. Even just to simply try to recognize and diagnose is much more comfortable now."*

Patient

*"...it was really helpful to know that I could come in, and if it was something out of [my PCP]'s realm or [care manager's] realm they could go ahead and call the psychiatrist and, ...we could have a video conference."*

### Experience the SPIRIT Telepsychiatry Collaborative Care Team in Yelm, Washington

Video (6 Minutes): <https://www.youtube.com/watch?v=nbceq-W2oqo&feature=youtu.be>

### Study Results will be available July 2021: [clinicaltrials.gov](https://clinicaltrials.gov)

CONTACT FOR MORE INFORMATION....

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#### REFERENCES

Fortney JC, Veith RC, Bauer AM, et al. Developing Telemental Health Partnerships Between State Medical Schools and Federally Qualified Health Centers: Navigating the Regulatory Landscape and Policy Recommendations, *Journal of Rural Health*, 35(3):287-297, 2019 (**Article of the Year**) <https://doi.org/10.1111/jrh.12323>

Cerimele JM, LePoire E, Fortney JC, et. al. Bipolar Disorder and PTSD Screening and Telepsychiatry Diagnoses in Primary Care. *General Hospital Psychiatry*. 65 (July-August): 28-32, 2020. <https://doi.org/10.1111/jrh.12523>

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