

NAPCRG 52nd Annual Meeting — Abstracts of Completed Research 2024.

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Title

What Does Team Function Look Like in Primary Care Integrated Behavioral Health?

Priority 1 (Research Category)

Behavioral, psychosocial, and mental illness

Presenters

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Abstract

Context: Up to 30% of patients seen in primary care have a co-occurring mental health or substance use issue. Integrating mental and behavioral health with primary care may increase access, improve outcomes, and decrease overall health care costs. However, successful implementation means overcoming challenges to integration, including adding new team members and clarifying their roles. Objective: Evaluate team structures and processes across the Colorado Integrated Behavioral Health Plus (CIBH+) team. Study Design/Analysis: Qualitative, semi-structured interviews with leaders, clinicians and staff. Iterative constant comparative analysis of interview data. Setting: Seven primary care practices in one Colorado USA health system. Population Studied: Medical providers and staff, and integrated behavioral health (IBH) psychologists and psychiatrists. Intervention: N/A for this portion; therapeutic services were provided by IBH providers to patients. Outcome Measures: Major themes in teamwork components from the Salas, et al. "Big Five of Teamwork" Framework. Results: 46 interviews were completed. (1) Team leadership: clinic-level leadership strongly supports IBH, valuing ongoing integration, helping establish positive atmosphere and coordinate and plan improvements. (2) Mutual performance monitoring: respondents described common processes to monitor others' performance and provide feedback to improve performance through planned and ad hoc meetings. (3) Backup behavior: team members worked together to shift workloads when sensing burden among other team members, often in other roles. (4) Adaptability: respondents described localized adaptations to adjust team member routines to serve patients' behavioral health facilitated by operational freedom to fit their context. (5) Team orientation: respondents described shared overall goals of CIBH+ and describe ability to share information, take into account multiple views, and strategize together to deliver timely needed care to patients. Conclusions: CIBH+ team members described components that support effective teamwork but could benefit from planned information sharing, role clarification, and adaptation

strategies. Thoughtful team-based approaches, when used, were helpful to implementing IBH. Formalized team processes could strengthen CIBH+ team function, though busy primary care practices may have limited capacity to address teamwork.

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