

When should I consider referring to Collaborative Care?

- A patient I am treating with a mild-to-moderate behavioral health condition (such as anxiety or depression) who might benefit from ongoing monitoring, brief interventions, and/or psychiatric treatment recommendations.
- Someone I just started on an antidepressant or other psychotropic medication, or for whom I just changed their medication or dosage.

Highlights of the program pitch

- If possible, facilitate a warm handoff to the Behavioral Health Care Manager (BHCM).
- Introduce the team-based approach, emphasizing that you will remain the lead in care, that a behavioral health care manager will provide added monitoring and support, and that the team will consult with a psychiatrist on a regular basis to inform treatment planning.
- Emphasize the importance of the patient's role in treatment planning and ongoing care.
- Feel free to personalize the script based on the patient, personal style, and clinical judgment.

Brief Sample Script

“We have a program in our clinic, Collaborative Care, that can help to manage your [depression/anxiety/stress] with the goal of actively helping you to get better. This is a team program in which you would work with a care manager, who can see you in person if you'd like and talk with you by phone between appointments to check in and make sure your treatments are working. The care manager will regularly have you complete these symptom questionnaires to help us know if your treatment is working. We also have a psychiatrist on the team who we talk to so we can know if your medications (if that's part of your treatment) are the best ones for you. We can often make some changes to your treatment without you having to come into the office.

[NAME] is our care manager, can I have her/him come in to say hello/call you?”

Customizing the Pitch

- For patients hesitant to commit to additional appointments, emphasize phone-based care.
- If patients are interested in therapy, explain that they can engage in both services.
- If patients are hesitant to engage in mental health care or have had poor experiences in therapy in the past, emphasize that this isn't therapy and is a primary-care based support program. Explain that the psychiatrist is simply a consultant, and they won't have to see the psychiatrist.

Next Steps

- Ideally, ask the BHCM to come meet the patient and say hello, or obtain the patient's permission to have the BHCM call the patient soon.
- Place the Collaborative Care referral per your clinic's protocol. The BHCM will explain the program in further detail to the patient during their initial contact.