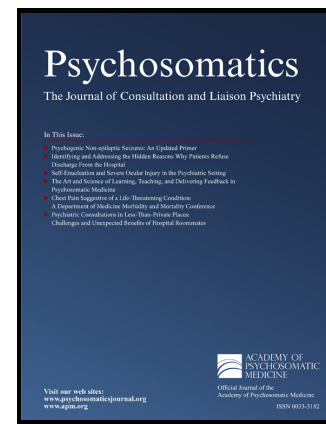


Author's Accepted Manuscript

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PII: S0033-3182(16)30174-8
DOI: <http://dx.doi.org/10.1016/j.psym.2016.12.006>
Reference: PSYM718

To appear in: *Psychosomatics*

Cite this article as: Hsiang Huang, Marshall Forstein and Robert Joseph, Developing a Collaborative Care Training Program in a Psychiatry Residency, *Psychosomatics*, <http://dx.doi.org/10.1016/j.psym.2016.12.006>

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Developing a collaborative care training program in a psychiatry residency

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Abstract: Collaborative care is an evidence-based approach for improving quality mental health access in primary care settings. Although job opportunities will grow over the next decade, few psychiatry residencies have established curricula to train the next generation of psychiatrists to work in this expanding model of care. In this paper, the authors describe the collaborative care training experience at a safety-net academic institution to provide a template for psychiatry residencies designing curricula to prepare psychiatry residents for collaborative care practices.

Keywords:

Consultation Liaison Psychiatry , Primary Care, Collaborative Care , Integrated Care , Education

Introduction

Collaborative care is an evidence based delivery model that improves the quality of depression treatment in primary care settings (1). In this model, a consulting psychiatrist works as part of the primary care team to provide population-based mental health care. This is accomplished by weekly meetings between the psychiatrist and the behavioral care manager (who delivers brief psychological interventions and manages a registry (2)) to discuss patients whose symptoms are not improving on specified outcomes (such as the PHQ-9 for depression) (3). Based on these case reviews, the psychiatrist makes treatment recommendations that are conveyed to the primary care team. Collaborative care holds the promise of meeting the Triple Aim of improved patient experience of care, cost savings, and better health outcomes (4). Positions in collaborative care will become increasingly available as reimbursement for this model has been approved by the Center for Medicare and Medicaid Services, making workforce development a priority. Thus, psychiatry residency programs will need to provide the requisite training experiences in collaborative care (5).

Currently, there is little guidance on how to create such educational experiences for psychiatry residents. A previous paper has described the characteristics of five psychiatry training programs (adult, child and adolescent, and med-psych programs) that have developed varying degrees of integrated care training experiences for residents (6). This paper explores in detail the collaborative care training experience at one of these programs. Cambridge Health Alliance (CHA) is a safety-net academic medical center and a developing accountable care organization located in Massachusetts that comprises 3 community hospitals and 12 primary clinics (7). Over the past years, the primary care clinics have transitioned from a co-located psychiatric consultant model to a collaborative care model. This concise guide aims to describe the experiences of the CHA adult psychiatry residency in building a collaborative care experience for trainees with the aim of providing a template that can be used by other psychiatric residencies.

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