

DGIM Project Summary

Name of Project:

Evaluating the relationship between provider characteristics and implementation of a collaborative care intervention for depression in university general medical clinic

Investigator(s). (Include phone numbers and email address, indicate PI and primary contact)

Jessica Ristau, Resident PGY2, PI
Celia Kaplan, PhD, research mentor, Co- PI
Aoki, Maki, MD, other investigator

Research question(s):

There are no differences in provider characteristics (particularly Resident vs attending status) in initiating standard of care (i.e. new medication prescriptions and/or referrals to behavioral medicine as proxy for therapy) among those that screen positive on the PHQ9 through the collaborative care screening program at the second floor of the academic general internal medicine clinic.

Brief Background/Significance:

The goal of this prospective cohort study is to assess the relationship between provider characteristics and implementation of a collaborative care intervention for depression in university general medical clinic. As a part of quality improvement measure at the second floor of the academic general internal medicine clinic at UCSF, the Collaborative Care (CC) program is being initiated as a specific validated model that incorporates a multidisciplinary approach to behavioral changes that has been validated in 70-80 mostly community based studies. This measure creates a consulting team consisting of a dedicated case manager, social worker and supervising psychiatrist physician - who together develop the screening and treatment protocols, manage the subsequent registry, and deliver their product of recommendations for primary care physician (PCP) to implement an evidence based treatment plan - in this case medication management or therapy referral. The collaborative care team then plays a consulting and supportive role to the primary care physician (PCP) on a clinic based level to ensure follow through on a population based level. Notably, there are particular exclusion and inclusion criteria for the collaborative care team to follow and thus this study will only evaluate the effectiveness of the CC program on eligible individuals.

Throughout the existing body of evidence the context of studies have relied on a homogenous population of providers in terms of training level as most take place in the community setting. The goal of this study is then to identify differences in implementation among patients eligible for the program based on provider characteristics in the academic setting - specifically to evaluate differences based on level of training— namely resident vs. attending, with various covariates regarding PCP demographics and other characteristics, with the primary outcome of initiation of evidence based treatment (new medication prescription, therapy referral, or both).

Inclusion/exclusion criteria (list)

Inclusion

- Primary Care Physician: All attending and resident physicians that have a primary care panel on the second floor of the academic general medicine clinic at UCSF (1545 Divisadero St).
- Patients: All patients seen in clinic between 9/15/17 to 4/15/17 with a PHQ9 of >10 at index PHQ9 defined as the first PHQ9 within the study period.

Exclusion

- Primary Care Physician: None
- Patient: None

Method of contact/recruitment (be specific)

Email request sent with approval and introduction from Mitch Feldman DGIM Chief – first introductory email, then invitation to complete online survey, if no response after 2nd reminder via email then will place paper form in provider box for them to complete and submit to separate folder kept in Jessica Ristau’s box.

Benefits/burden for participants (clearly identify potential for harm)

None

Any benefits or burden to DGIM practitioners?

Time to complete survey which will be encouraged with gift certificates as noted above.

Timeline for recruitment (projected start and stop dates)

For providers, to start when attain approval in next few weeks – by 3rd week of March 2018

Funding source

CTSI research grant

Potential for DGIM collaborators? (We encourage DGIM resident and fellow involvement in particular)

See involved MDs above, also have collaborated with the following:

1. Mitch Feldman
2. Emma Sammelson-Jones

Do you agree to notify us when recruitment is completed?

Yes

Date form completed:

3/11/18