

Patient Engagement Review: √ How early patient engagement relates to improved outcomes √ Strategies for developing and maintaining patient engagement √ Warm connections √ Addressing barriers √ Family engagement √ Phone outreach √ Motivational Interviewing ✓ Elements of a strong alliance

Set Expectations for Successful

Describe framework of appointments (time, BH

Most patients need at least 1 treatment change

We have effective treatments

intervention options available)

- Sometimes multiple changes

The patient plays an important role

Selecting/changing treatment

· We won't give up!

Self-management

- Family engagement

Goals

Treatment



- All referrals should have a warm connection
- · Connect yourself with the clinic team in the patient's eyes
- · Frequent contact with the patient
 - 2+ contacts in first month
- Discuss barriers to treatment and develop plan to address them
 - Ability to attend clinic, tele-health or phone appointments



Address Attitudes & Beliefs Challenge

- Patients may know little about depression
 - · What they know may be inaccurate
- Patients may believe...
 - · Depression is selfish, weakness
 - · They should "handle it themselves"
- Response

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 Provide high-quality education resources for patients to learn more about depression or other mental



Why Engage Caregivers/Family?

- Effect of patient's depression on family members can make it difficult for them to be
- Family sees mood and behavior changes over
- · Family can support treatment plan
 - Especially self-management plans

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When and How to Step Up **Engagement** Attitude Action Return to alliance (bond) · Phone outreach MI techniques (reflection) • Warm engagement in clinic Elicit the story: · Engage caretakers / family / PCP understanding, summary of pros/cons to treatment • Feedback = Elicit treatment hopes and psychoeducation

dreams Elicit commitment

· Barriers: practical,

psychological, cultural

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Discussion • Difficult to engage patients? • Warm handoffs during Covid? • Use of family/support people to support patient engagement? • Time to consistently engage patients?

AIMS CENTER **The 30-Minute Appointment**

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30 Minute Appointment Overview: · Utility of 30-minute contacts • Use of an agenda to guide 30-minute appointments · Review of outline for a 30-minute patient appointment

Brief Treatment Sessions • Broader use of telehealth is showing some practice trends already, including briefer sessions · Some kinds of brief-session treatment shown effective · How do you get the most out of a brief session?

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Structuring the 30-Minute Session

- Greeting and Agenda Setting [5 minutes]
- Review and Provide Treatment [20 minutes]
- Outline Next Steps in Care [5 minutes]

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1. Greeting and Agenda Setting [5 mins]

- · Review standard appointment agenda together
- · Review treatment goals and concerns
 - Continuing with current treatment goals
 - New treatment goals?
 - Other new or pressing concerns?
- REACH AGREEMENT ON AGENDA

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Alliance?

3. Outline Next Steps in Care [5 minutes]

- · Confirm assignments for next session
 - Who is responsible for any follow-up/tasks?
- · Set next appointment
- · Provide client with care plan and follow-up paperwork

Will Brevity Impact Therapeutic

- Psychotherapy outcome is all about therapeutic alliance
- Essentially no data exists relating session length to strength of therapeutic alliance
- · Client EXPECTATION of the conduct of sessions IS important, and speaks to orienting the client to the call agenda

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Preparation for 30-Minute Appointments with Clients

- 1. Orient and consent clients to 30-minute session
- 2. If possible, have client complete BH measure same day **before** appointment
- 3. Start with focused questions like "how has your mood been the last week?" to center the appt on treatment
- 4. Create space for rapport building: Invite the client to partner in setting an agenda together to "make the best use of our time together"

- 2. Review and Provide Treatment [20 mins]
- Review behavioral health measure scores, if any
- Address urgent client concerns, if any
- Check in on new or current meds [if applicable.] Barriers to taking consistently?
- Deliver behavioral health interventions, review and update treatment plan
 - Review assignments from previous session
 - Discuss progress on and practice behavioral health strategies
- Check on referrals and problem solve any referral barriers [if applicable]

Concurrent Documentation to Support Brief Sessions – An Example

- Improved timeliness of billing and supporting clinical documentation
- Improved quality and usefulness of clinical documentation



- Reduction in time spent in documentation
- Improvements in the quality of work life of clinicians
 - Less time spent documenting
 - Feeling caught-up all day
 - Being finished with work at the end of the client day

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