
Information for Primary Care Providers: Added Benefits of Collaboration with Behavioral Health Providers

GENERAL PRINCIPLES

Research has shown that a large percentage (up to 70%) of primary care visits have a psychosocial component.¹ In addition, the majority of patient **depression** is treated by primary care providers, and **most other symptoms of distress** are first presented to the PCP. While these include **anxiety, PTSD, substance misuse, relationship problems, bereavement**, and a host of other traditionally “psychiatric” struggles, the BHP can be helpful for many more parts of good healthcare. The following categories represent prompts to consider referral to or consultation with your team’s BHP. The reality of today’s busy medical practice pace often precludes the PCP having time to address behavioral skill management, but the BHP is there to support you in that part of good patient care.

- **Chronic Disease** (e.g. **diabetes, heart disease, hypertension, insomnia, asthma**): Each of these has a significant behavioral component, which can be pivotal in successful management. For example, the diabetic patient who is struggling with adherence to diet or activity recommendations may need to engage in some motivational review with a behavioral health expert. The patient with insomnia should likely have targeted behavioral treatment in addition to or before medication treatment etc.
- **Chronic Pain**: Successful management of chronic pain invariably requires support of healthy strategies in thinking, problem-solving, relaxation and stress management, acceptance of some discomfort, social support, and adherence to medication protocols. A treatment agreement can be a useful tool, particularly for patients using narcotics. The BHP can support the PCP in ensuring comprehensive pain management tools are readily accessible.
- **Lifestyle Change/Health Risk Factors** (smoking/weight loss): BHPs are trained in brief interventions for tobacco cessation as well as weight management skills. They have evidence-based protocols to support patients through these changes right in the PC clinic.
- **Stress/Somatization Response** (stress related physical complaints, psychogenic symptoms) **and Medical Anxiety**: Patients struggling with stress related complaints or anxiety about medical conditions or procedures are likely to benefit from a consultation.

GENERIC REFERRAL SCRIPT

“I have a colleague (BHP name), here in PC, who works very closely with me on the types of issues/problems we’ve been discussing. I’m wondering if you would like me to introduce you to her/him or to schedule you to see her later on, on some other date. She will meet with you for 20-30 minutes and talk with you in more depth regarding this aspect of your health care. Then she will get back to me and we will use the information the 2 of you come up with to create a set of strategies that will allow you to be more successful in tackling the problems we’ve been discussing. Would you like me to introduce you to her now so you two can talk?”

If yes, call or page the BHP. If no, leave the door open for future interest.

¹ Gatchel and Oordt, 2003: Clinical Health Psychology and Primary Care