

# Promoting Quality: Graduate Psychology Education (GPE) Trainees at a Community Health Center

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# GPE Crew

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# UA GPE Training Goals

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- ❑ Increase # of psychology trainees who pursue careers related to health disparities
- ❑ Foster a professional identity and base knowledge that increases comprehensive, culturally competent, quality mental health care
- ❑ Provide clinical training to meet the needs of medically underserved communities
- ❑ Improve behavioral health of NWA medically underserved residents

# UA GPE Training Components

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# Didactic Training:

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- \* Diversity course
- \* Medical consultation course
- \* EBPP/IBHC seminar
- \* Monthly colloquia

# Research Training:

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- \* Program evaluation
  - \* Health disparities
  - \* Clinical populations
  - \* Treatment outcome
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- \* Mentoring Undergraduate  
Health & Diversity Fellows

# Clinical Training:

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1 year clerkship in a  
Federally Qualified Health  
Center



# Outreach/Immersion:

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- \* Behavioral health workshops and newspaper articles
- \* Immersion and cultural training at Ponce Medical School, Puerto Rico





# Public Health Perspective

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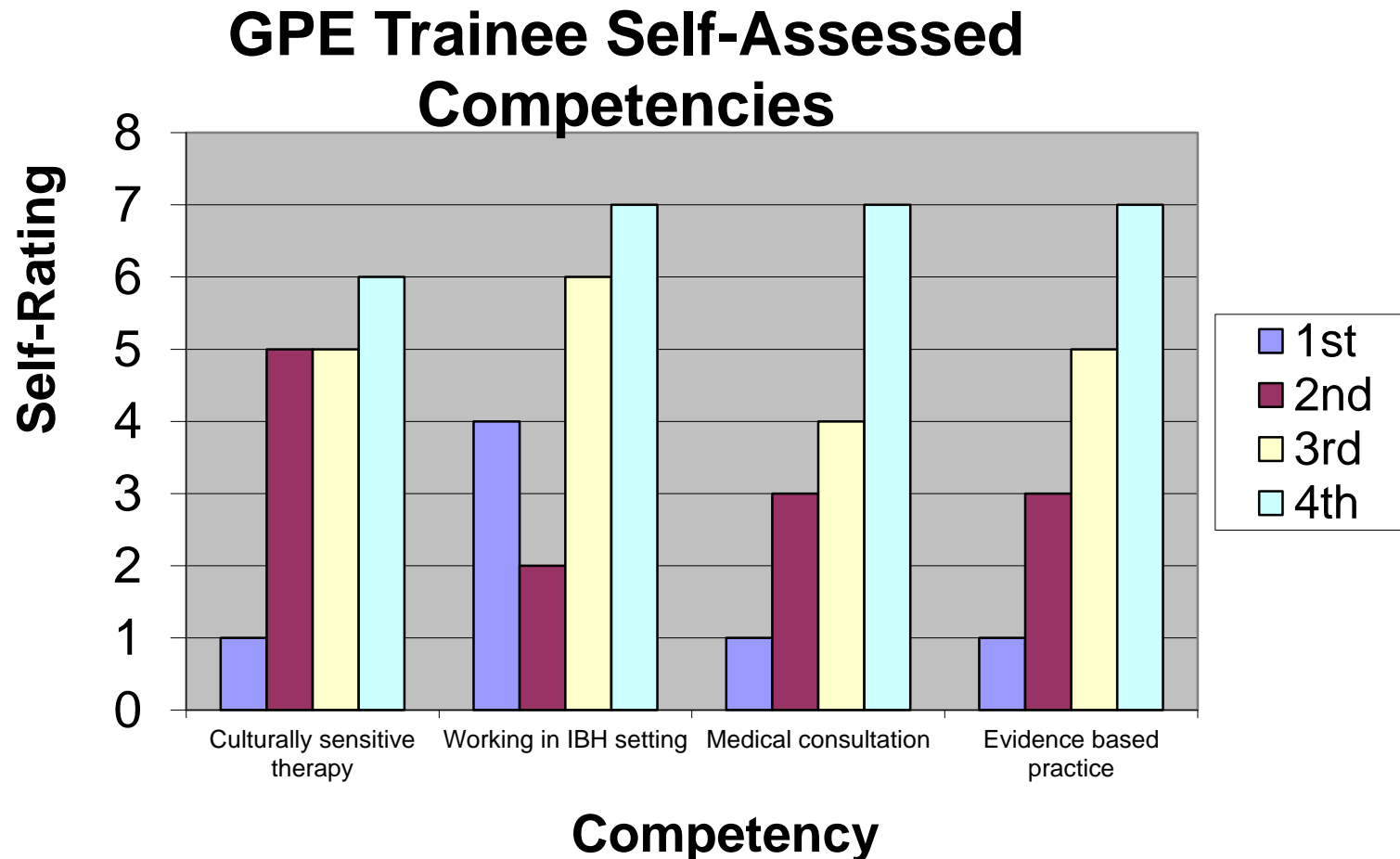
- ⦿ Impact = Effectiveness x % Population Reached
- ⦿ Individual health perspective:
  - Maximize effectiveness
- ⦿ Public health perspective:
  - Maximize the impact

An intervention for depression that is 80% effective but only reaches 5% of the population will have less of an impact than an intervention that is 50% effective but reaches 40% of the population.

$$\text{Impact} = .8 \times .05 = .04$$

$$\text{Impact} = .5 \times .4 = .20$$

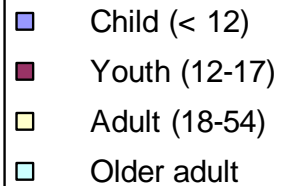
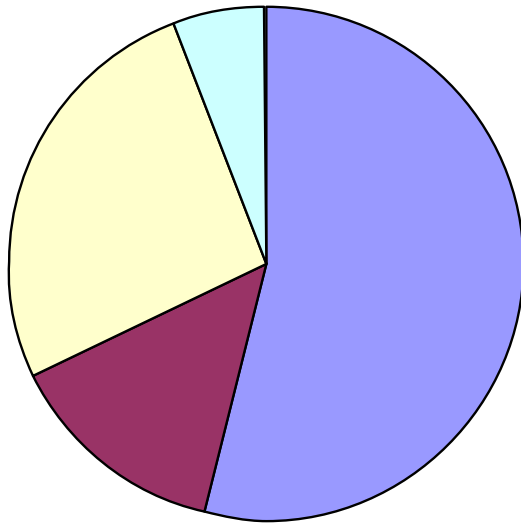
# Data- Trainees



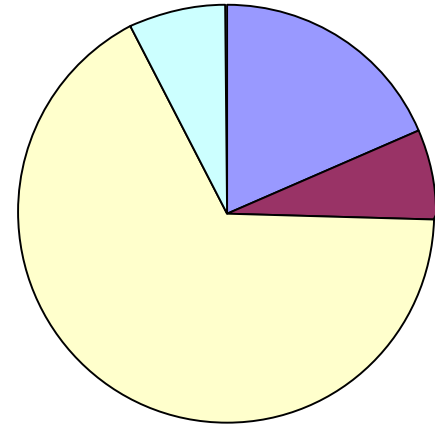
# Patient Demographics: Age

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Male (N = 121)

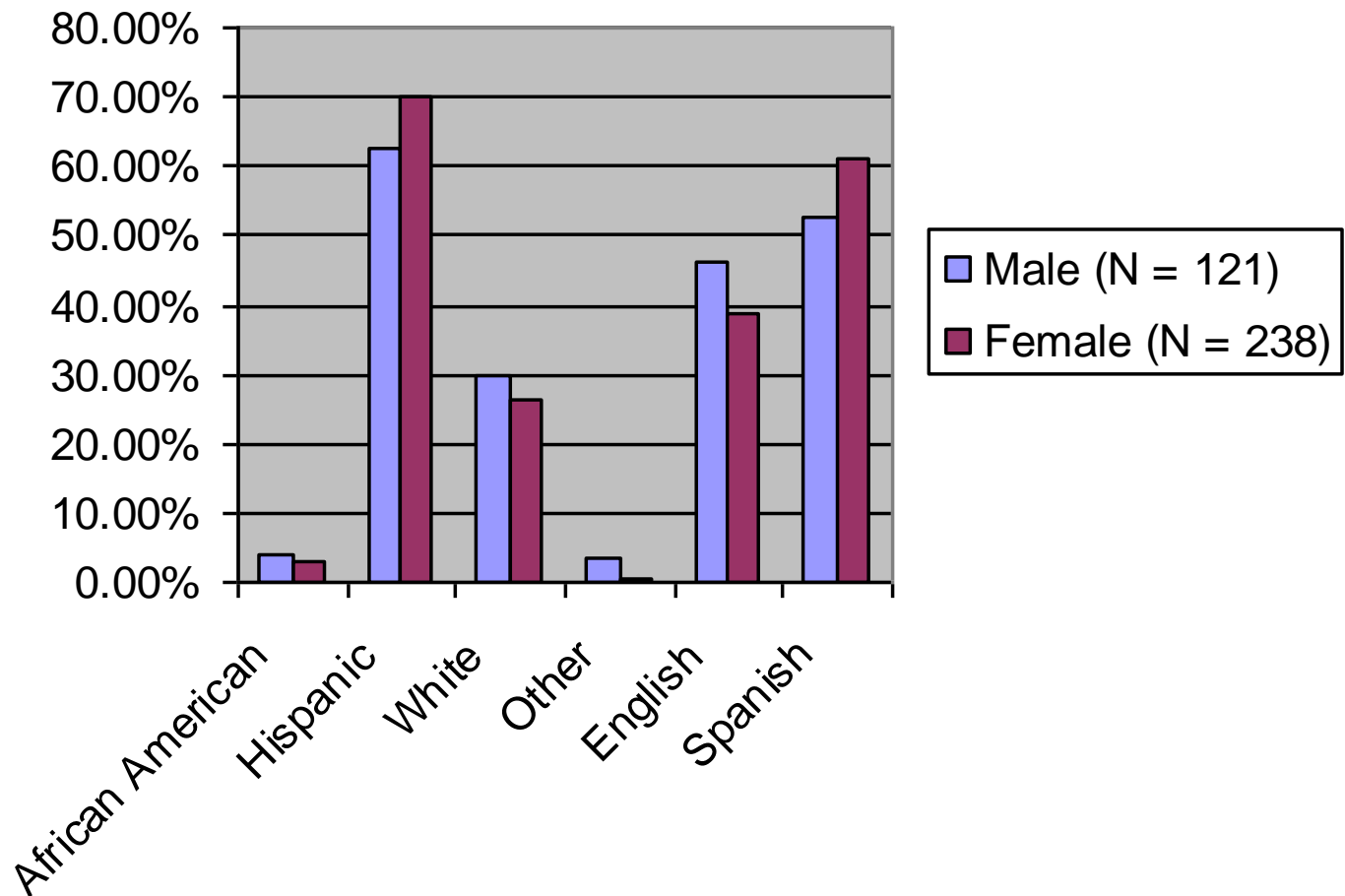


Female (N = 238)

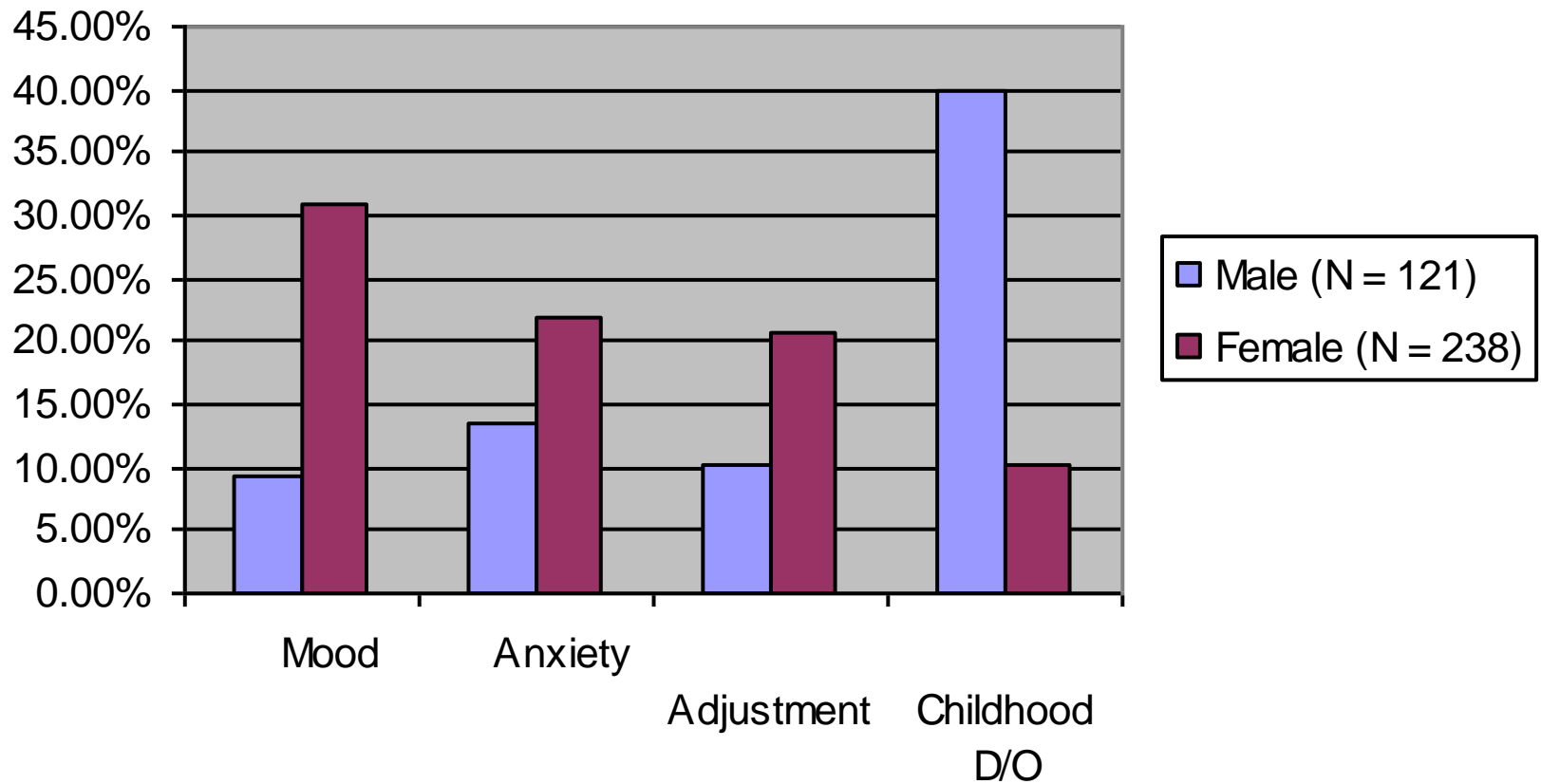


# Patient Demographics: Race/Ethnicity & Preferred Language

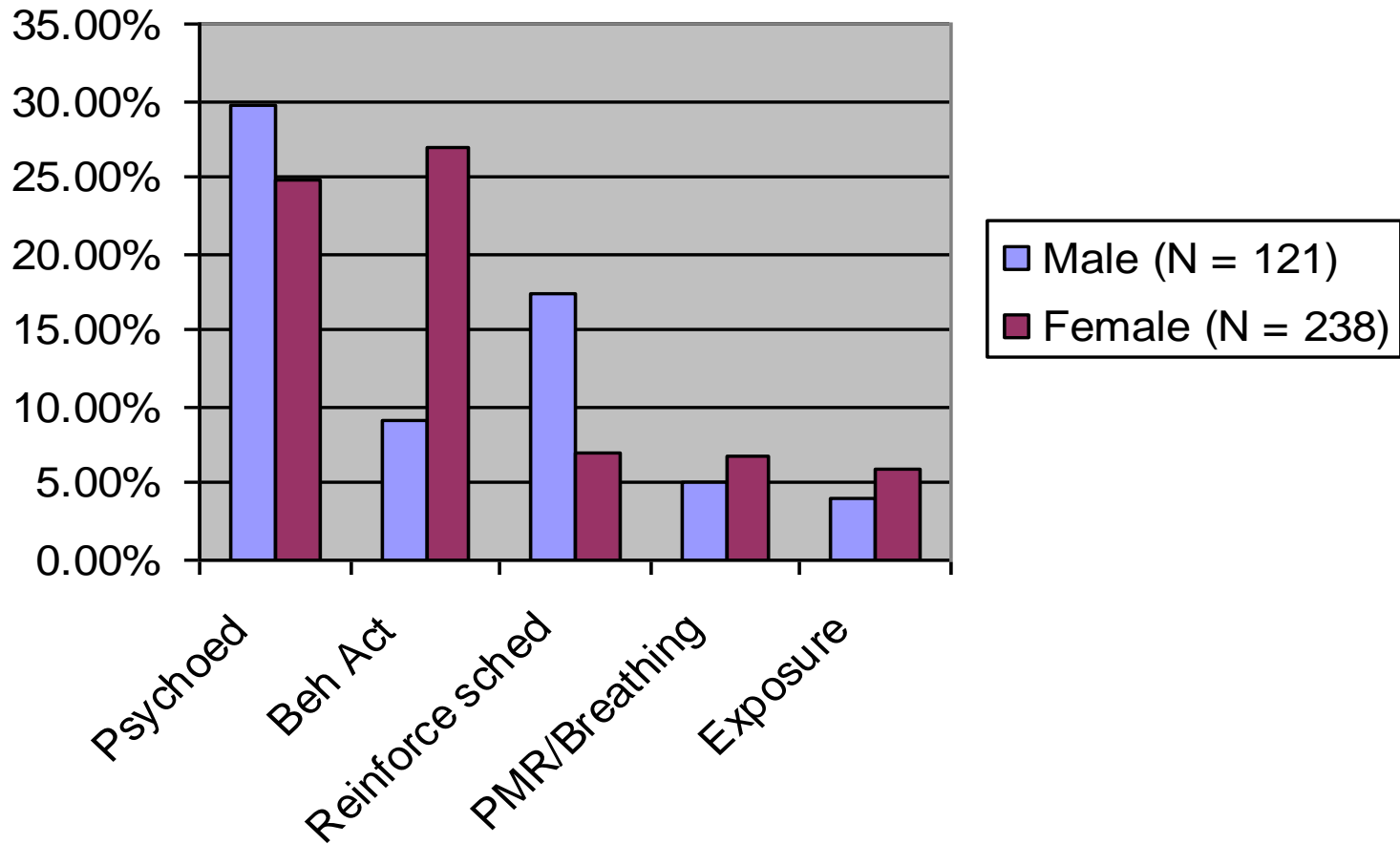
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# Common Diagnoses



# Common Interventions



**Brief Adult Outcome Questionnaire**

This brief questionnaire asks about some of the most commonly reported thoughts, feelings and behaviors among adults seeking behavioral health treatment. Please think about the PAST TWO WEEKS and indicate how often each of the following occurred. This will help you and your therapist to plan your treatment and monitor your improvement.

In the past two weeks, how often did you

	Never	Hardly ever	Sometimes	Often	Very often
...feel unhappy or sad?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...have little or no energy?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...have a hard time getting along with family, friends or coworkers?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...feel worthless?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...feel no interest in things?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...feel tense or nervous?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...cry easily?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...have someone express concerns about your alcohol or drug use?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...feel lonely?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...have problems with sleep (too much or too little)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...feel irritated?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...feel hopeless about the future?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...not able to complete your work or other important daily tasks in a timely manner?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...find yourself daydreaming, worrying, or staring into space?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

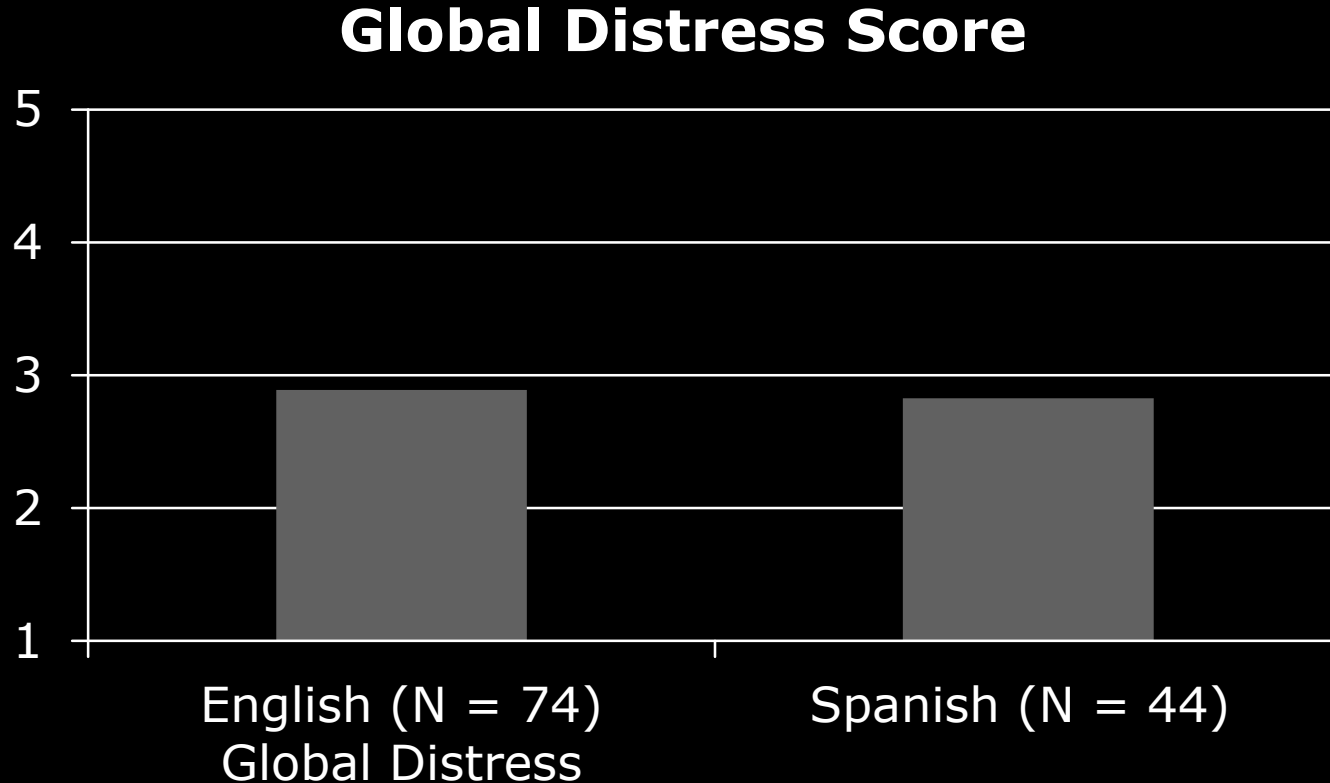
Please take a moment to give feedback on your session.

	Agree	Some-what agree	Not sure	Some-what disagree	Do not agree
I felt that we talked about the things that were important to me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt that the therapist liked and understood me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt that the session was helpful.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt confident that the therapist and I worked well together.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



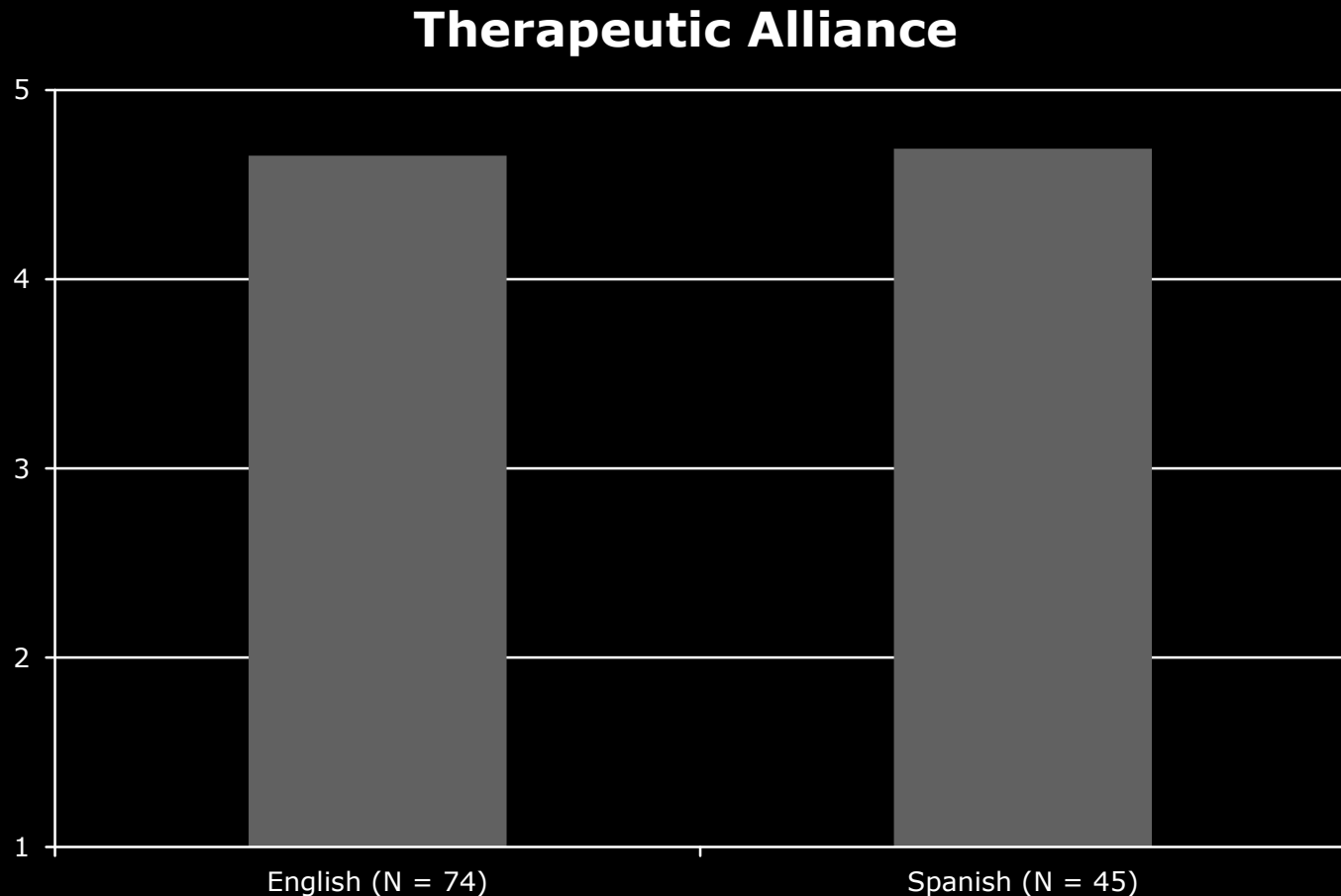
# IBHC Patients are Moderately Distressed

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# Patients Are Very Satisfied with IBHC Provider

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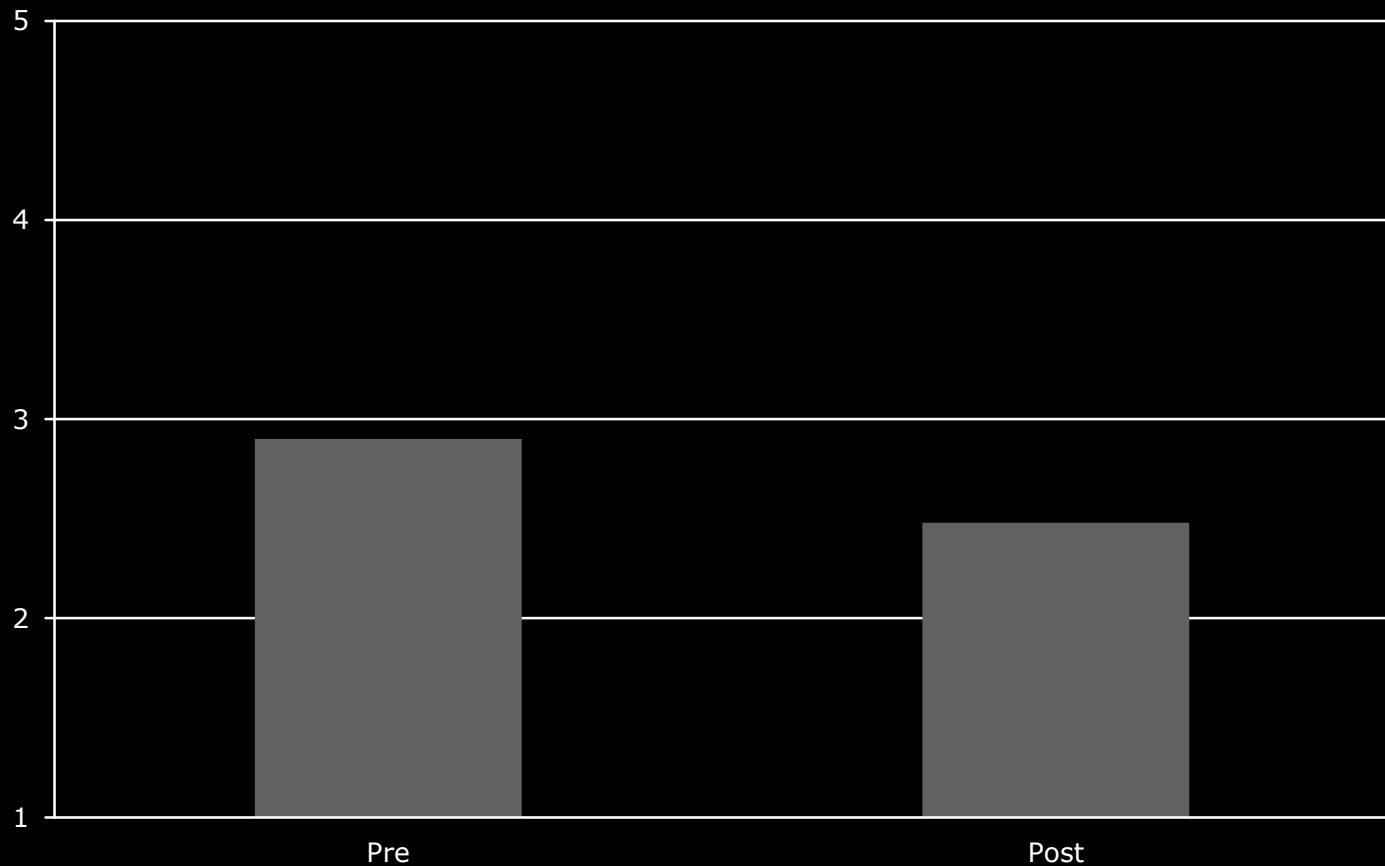


# IBHC Services are Effective

*Cohen's  $d = .62$  (medium)*

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**Global Distress Scores**



# IBHC Services are Effective

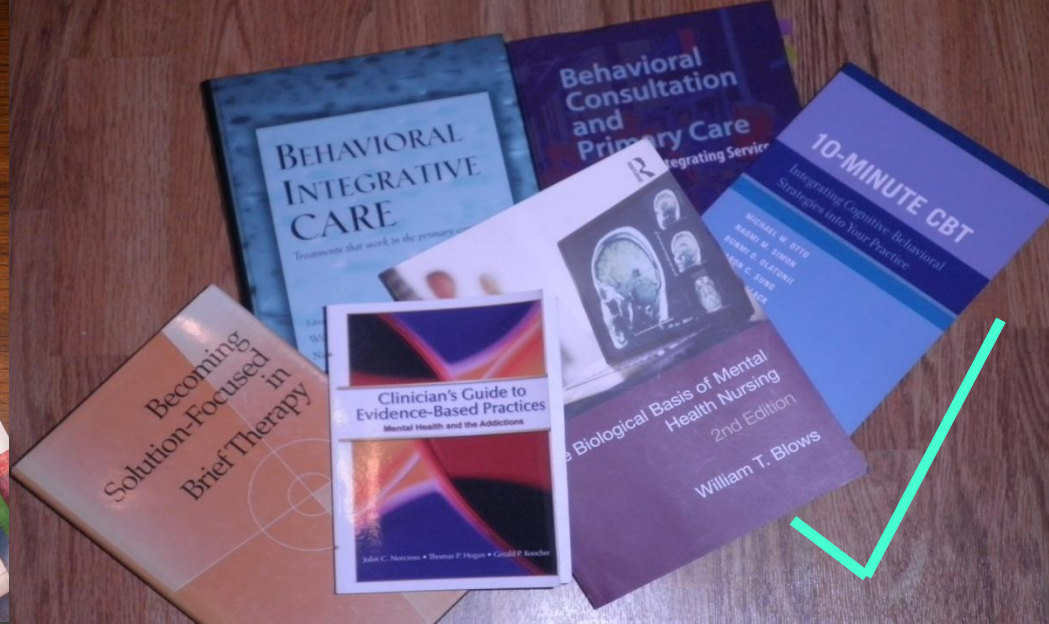
*Cohen's  $d = .62$  (medium)*

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Traditional therapies: average Cohen's  $d$  of .80  
(medium to large effect size)

**We are getting 75% of the  
therapeutic effect of a 20-  
visit treatment in 1.5 visits**

# How GPE Has Impacted My Training





# community clinic









# Outreach and Immersion Opportunities

## La Prensa Libre

*Del Noroeste de Arkansas y Sureste de Missouri*



Springdale

97° F

SOLEADO

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### Columna: Curar el Insomnio

Trey Andrews y Ana Bridges, Universidad de Arkansas Departamento de Psicología

2 December 2010 en 1:00 am

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Aproximadamente 36.3% de la población en los Estados Unidos tiene problemas con el sueño. Para muchas personas, los problemas con el sueño, o insomnio, son problemas de sueño también experimentan problemas de relación, depresión, ansiedad, y problemas en el trabajo.

Afortunadamente, estudios recientes han encontrado recomendaciones para dormir y descansar más cuando duerme. Si usted tiene dificultades de recomendaciones cambiará sus problemas y le ayudará a tener un mejor sueño.

1. No se acueste hasta que tenga mucho sueño (no importa la hora cuando se acueste). Siguiendo un horario. Acuéstese sólo cuando tenga tanto sueño que le sea difícil quedarse despierto. Es posible que se vaya a acostar después de su hora normal, pero eso está bien. Después de un tiempo va a encontrar que tiene sueño más temprano.

2. Si está despierto más de 20 minutos en la cama, haga algo relajante afuera de la cama. Esto es importante. Cuando se queda en la cama despierto por mucho tiempo, está enseñando al cuerpo que asocie la cama con el estar despierto. Queremos que lo contrario ocurra: la cama es para dormir solamente. Por eso, si no está dormido después de 20 minutos de acostarse, debe salir de la cama. Evite actividades energéticas. Haga algo relajante.

3. Cuando empieza a tener sueño de nuevo, trate nuevamente de acostarse. Si se queda despierto en la cama otra vez, es importante repetir el segundo paso: salir de la cama y hacer una actividad relajante hasta que sienta sueño. Repita los pasos dos y tres hasta dormirse. Cuando empieza con este programa es posible que necesite repetir este proceso muchas veces hasta conciliar el sueño, pero eso va a mejorar después de la primera semana.



Ponce School Of Medicine  
& Health Sciences





# Impact of Trainees on Patients: Case Vignettes







# Value of Psychologists in Community Health Centers

# NEW Mandates for Community Health Centers

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- Like many healthcare agencies, we are changing our practice to accommodate expectations under the ACA.
  - Team approach to care (patient centered medical homes)
  - Reimbursement will be based on patient outcomes, quality measures (A1c, comorbidity)
  - Electronic medical records (“meaningful use”)
- Our dilemma: How to produce the best clinical outcome for the patient in the most cost-effective manner



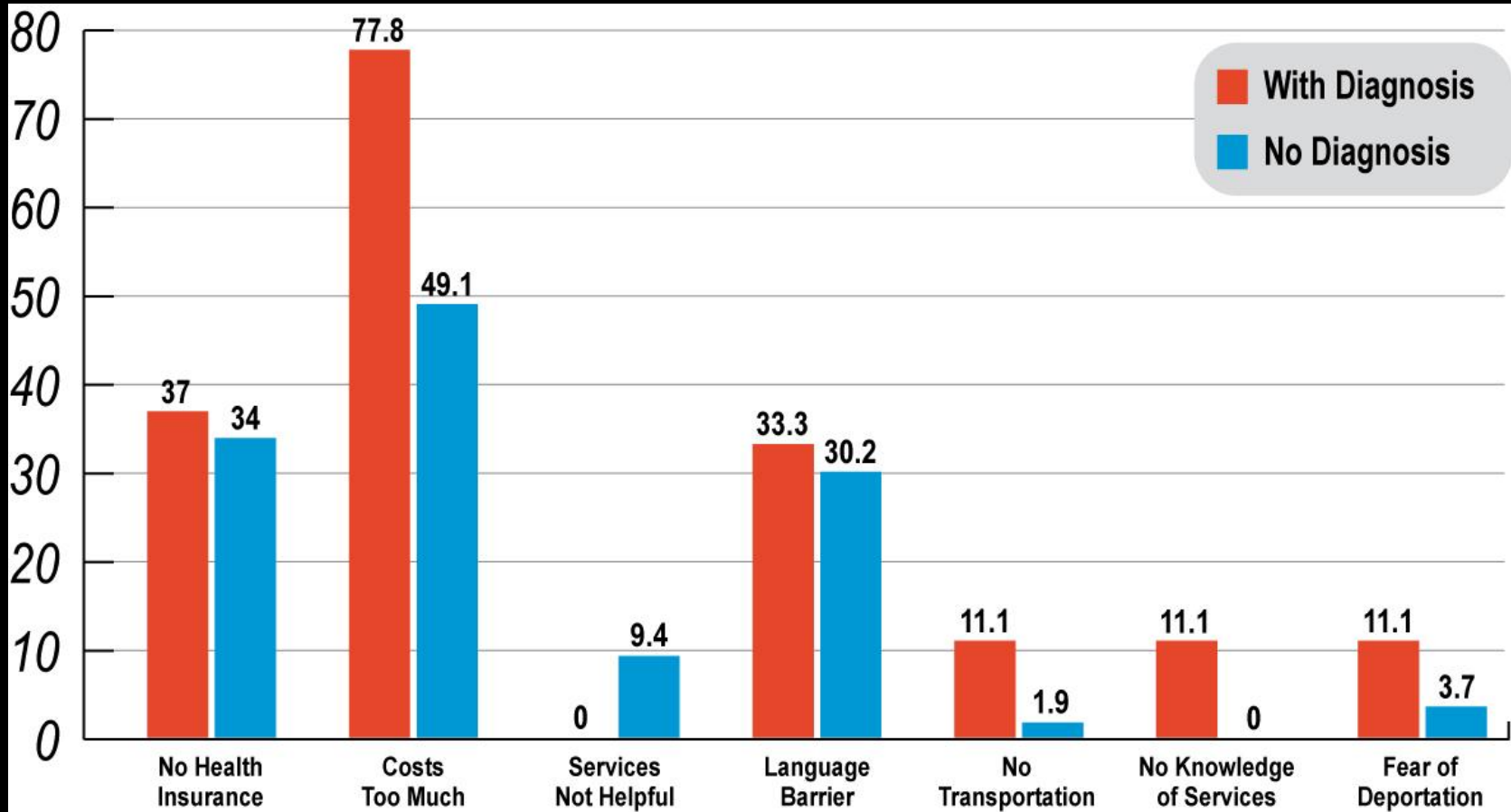
# Community Clinic's Patient Demographics

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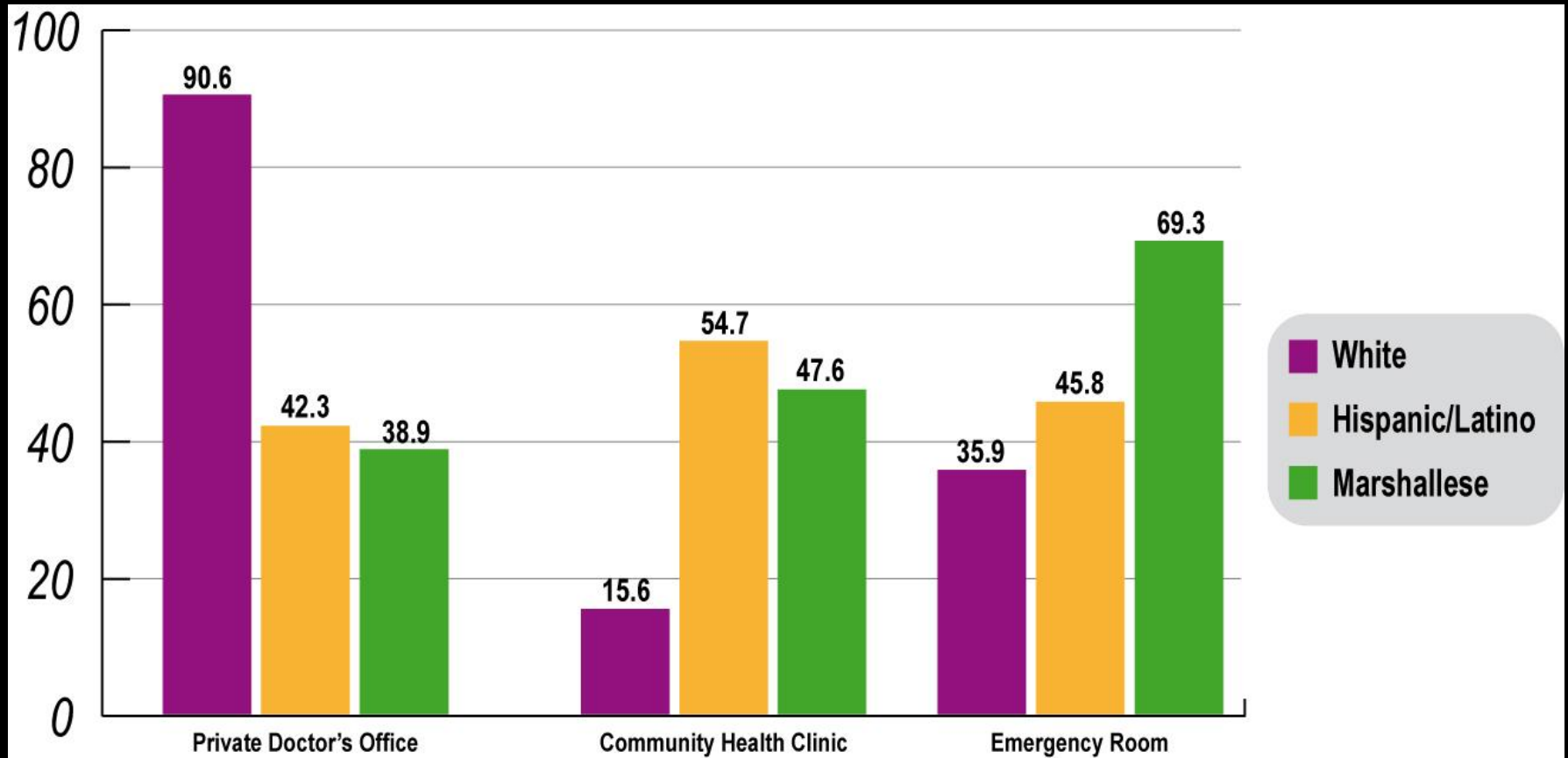
▣ Latino/a	<b>58%</b>
▣ Marshallese	<b>5.5%</b>
▣ Below 200% FPL	<b>89%</b>
▣ Uninsured	<b>37%</b>
▣ Medicaid	<b>49%</b>
▣ Children	<b>57%</b>
▣ Language other than English	<b>51%</b>

**25,021** patients in 2011

# Barriers to Seeking Care



# Where Care is Accessed



# Partnership between Psychologists and CHCs

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- ▣ Positive, *measurable* outcomes
- ▣ My 3<sup>rd</sup> trip to DC on behalf of APA/ the GPE program
  - Value of psychologists in Community Clinic
- ▣ CHCs nationally will be increasing services from 15 million to 30 million patients
  - Community Clinic has seen a 78% increase in patients served in the last 3 years
- ▣ CHC advocacy efforts