

Patient Introduction

Highlights

- If possible, introduce via a warm-handoff from the Treating Provider.
- Introduce the team-based approach, reviewing the role of each team member.
- Emphasize the importance of the patient's role in treatment planning and ongoing care.
- Feel free to personalize the script based on the patient, personal style, and clinical judgment.

Sample Script

Briefly introduce yourself and the reason that you're reaching out to offer support.

Hi! I'm <name>, the Behavioral Health Care Manager with our Collaborative Care program. I'm <stopping by/calling> to introduce myself to see if there's any way I can help you with your <reason for referral>. Our **treating providers** like to make sure people feel supported when they <start (x) medication/have (x) life stressor/are diagnosed with (x)>, and asked that I connect with you.

Build rapport with the patient by briefly checking in on their present state.

- What are your main concerns at this time?
- What are your thoughts regarding your Treating Provider's recommendations?
- Do you have any questions or needs that I might be able to help you with right now?

Introduce the Collaborative Care program, emphasizing autonomy and team-based care.

Given everything that you shared, could I tell you more about our clinic's Collaborative Care program? Collaborative Care is a team-based program that is part of your primary care. As your Care Manager, I would work closely with both you and your Treating Provider to help you manage your <reason for referral>. We all work together to develop a shared care plan, and I would reach out to you regularly to check in and see how you're feeling and how I can support you. You can also reach out to me when you need support or have questions.

I also work closely with a consulting psychiatrist, and we review all of the patients I work with. The psychiatrist is able to send treatment recommendations over to your Treating Provider. If it's okay with you, I'd be glad to review you as well, so we can make sure you're receiving the best care possible. This model can be nice because recommendations are usually available very quickly. Your Treating Provider will remain the "lead" in your care, but appreciates the psychiatric recommendations. What do you think about this?

Check in regularly to ensure patients aren't feeling overwhelmed.

I'd like to share more about how long the program might last, what I can help with, as well as what your role would be. First, what questions do you have? Would you like me to share more?

Discuss the length of the program.

We know that depression and anxiety are very treatable when we're addressing it as a team and when you're actively engaged in your treatment. With this, we expect you to get better in a certain amount of time. This time frame can be anywhere from 3-12 months, where we might see some or total improvement. If things aren't getting better by that point, we'll talk about it. We can discuss whether you might need a different service, and if so, we'll help make sure you get there. Or if you're still actively working on goals or adjusting your treatment, we can discuss whether you might still remain at this level of care management for a longer period of time.

If your symptoms are stable or you are feeling better, we'll talk further about what you'd like to do next. This might include just checking in less often, or even discharging you from the program, knowing you can call again if you need further support. No matter what, we'll work together to ensure a plan is in place. What questions do you have?

Further discuss the care manager and patient roles and relationship.

Would it be okay if I shared more about your role? The things we would hope for from you include filling out symptom questionnaires on about a monthly basis, so we can track how you're feeling and make sure our treatment is working. Just like your blood pressure is monitored regularly in the doctor's office, we want to monitor your mood to make sure everything is on the right track. Otherwise, we just hope that we can work closely with you, maintain contact, and that you'll let us know if you have questions or concerns.

On my end, I am available to help with lots of things. If you're taking medications, I can help monitor your response to those. I can also share about healthy habits and skills for managing depression and anxiety. I can help provide any resources that you might need. I will also be a link between you and your Treating Provider. You can think of me as your "mental health point person." I'm flexible and willing to work with you on whatever you think is important.

Check in. Would the patient like to move forward with the program?

Given everything you've heard, what do you think about trying out Collaborative Care?

IF NO: No problem. You know just what it is that you need. Would it be okay if I sent you my contact information, in case you change your mind or need to reach me? Thank you! <stop>

If patient is interested, schedule an intake for now or a later date (typically within 1-2 weeks).

To move forward, I'd like to schedule a time to learn more about you. This conversation is usually around 30-60 minutes, and can be either in clinic or by phone. What would you prefer?

Ensure you have the pertinent information.

- Patient's updated contact information
- Best time(s) to reach patient
- Time of scheduled intake

Provider Introduction

Highlights

- Keep it brief! Providers and staff are typically very busy.
- Discuss that your goal is to be helpful to the team.
- Treating Providers are very busy and have competing priorities. Consider the following:
 - Validate how it may feel difficult to ensure follow-up for all behavioral health patients.
 - Explain how you might be able to help make their work a little bit easier.
- Emphasize flexibility – that you'll work with them in ways that they prefer.
- This script can be tailored based on provider/staff and personal style. This is just one sample.

Sample Script

Hi, I'm <name> and I'm the Behavioral Health Care Manager with our clinic's Collaborative Care program. Are you familiar with the program?

There are a number of things that I can help out with, but the key thing is to help you feel more supported in caring for your patients with behavioral health needs. I work with patients who have mild to moderate behavioral health concerns, and I follow them regularly as part of my caseload until they're either feeling better or need to be referred elsewhere.

We know that it can be tough to get patients to follow-up with care here or in the community, and my work provides an extra measure to ensure patients aren't falling through the cracks. I can help with a number of things, including providing brief therapy, helping to monitor medications, providing community resources, patient education, and monitoring patient progress by having them regularly complete outcome measures.

For example, you might refer a patient to me if you start or change an antidepressant. I can follow up with them to make sure they've filled the medication, are taking it properly, whether they are having any side effects, and if there's any other sort of behavioral intervention that could help them out. I can either meet patients with you in clinic or follow up later with them in clinic or by phone. I'm also available for crisis interventions as needed.

Another part of my role is that I meet regularly with a consulting psychiatrist to review my patient panel. They can provide treatment recommendations for you to consider implementing. They're also available for curbside consultations – you can always let me know if I can help facilitate that.

If you want to refer a patient, you can reach me by <EMR, office location, phone, email>. I'm typically here <hours>.