

# Interprofessional Team Engagement Series

The goals of the monthly [Interprofessional Team \(IPT\)](#) Engagement Series are to learn, connect and share questions and experiences to help IPT Clinicians and Primary Care Providers to optimize how they work together in the Primary Care Networks (PCNs) to support their patients. A fictional case study and breakout rooms are used to discuss how different IPT clinicians would support a patient as a team, working closely with Primary Care Providers.



## How would you support this patient?

### CLINICAL PHARMACIST (PCCP)

#### Assessment:

- Assess current medication is one of the first-line options for chief complaint and comorbid disorder(s)
- Perform PHQ-2 or PHQ-9 and GAD-7 to assess severity of depression and to evaluate treatment response

#### Interventions:

- Encourage S.M.A.R.T. Goals
- Medication related changes
- Monitor for changes in mood/sleep; assess at 2 weeks
- Educate on the risk of discontinuation syndrome with abrupt discontinuation of medications
- Refer to - OT
- Refer to - clinical counsellor for psychotherapy/CBT/MBCT

### OCCUPATIONAL THERAPIST (OT)

#### Care Goals:

- To improve strategies to manage executive functioning
- To develop a routine to help improved mental health

#### Interventions:

- Strategies for organization
- Medical Management
- Activity Modifications
- Sleep Routine

#### Outcomes:

- Consistent attendance at appointments.
- Household management: Improved, less reactive
- Improved medication adherence
- Increased sleep quantity
- Reduced anxiety
- Reduced brain fog

### CLINICAL COUNSELLING (CC)

#### Care Goals

- Decrease symptoms of anxiety & depression/low mood through awareness/ skill building & improved coping
- Learning CBT strategies for stress management adopting a growth mindset, Mindfulness based skills to unhook from unhelpful thinking patterns, & emotion regulation skills to decrease reactivity.

#### Care Plan

- Learn coping techniques to reduce anxiety
- Mindfulness & Acceptance based mood regulation skills
- Increase Awareness of Mind Body connection
- Address pillars of mental health and self care routines

#### Outcomes

- Increased self efficacy
- Significant reduction of anxious / low mood symptoms
- Integrated skill set using mindfulness to address Window of Tolerance to improve coping & distress tolerance.
- Improved coping strategies and demonstrated ability to identify and respond to triggers and unhelpful thoughts – moving into a growth mindset from a fixed one.
- Capitalized on IPT support

## Who attended the session?



**53 Providers**

(FPs, NPs, RNs)

**6 IPT Clinicians**

(PCCPs, OTs, CCs)

## SESSION 12: Multidisciplinary Approach to Executive Functioning – June 12th, 2024

### FICTIONAL CASE STUDY

#### Past Social/Medical History:

- Clinical diagnosis of anxiety, depression
- Lives in an apartment with her son, some extended family support
- Screened for ADHD, but negative result
- Medications: bupropion HCl SR 300 mg in the morning & bupropion HCl SR 150 mg in the evening

#### Patient Information:

- 39-year-old female
- South-East Asian
- Works full time in a busy administrative role
- Single parent

#### Presenting Issues:

- Symptoms of anxiety, depression
- Insomnia, brain fog, forgetfulness (forgetting to take medication and missed appointments)

#### Referrals:

##### Clinical Pharmacist Referral:

- Addressing adherence, assessing choice of antidepressant, providing education on modifiable health factors and goals of therapy

##### Occupational Therapy Internal Referral:

- Improve organization of daily activities, sleep quality, and medication management

##### Clinical Counselling Internal Referral:

- Decrease anxiety and depression symptoms, CBT skill building

Did you miss the event? Click [here](#) to view the PowerPoint, and click [here](#) for a recording of the case study.

## SESSION FEEDBACK – 34 Respondents

**91.9%**

Would refer a patient with similar circumstances

**95.3%**

would recommend the sessions to colleagues

**100%**

would attend another session

*"I didn't realize this service was offered so it was new to me. It was nice to have all the allied health workers present what they do and how they managed the patient's case."*

-Primary Care Provider

*"Great input as to how the team can coordinate care for patients struggling with executive function to return to normal function."*

-Primary Care Provider

**NEXT SESSION: Fall 2024**

[Find more info about](#) these sessions or contact your [Community Network Manager](#)

# Interprofessional Team Engagement Series

## A Multidisciplinary Approach to Supporting Patients with Executive Functioning

### Questions & Answers – posed in breakout sessions and in evaluation survey

#### **Q: Can PCN Clinical Pharmacists prescribe medications?**

A: No, PCN Clinical Pharmacists cannot prescribe medications. If they have any recommendations to make regarding medication changes or additions, they will contact the Primary Care Provider.

#### **Q: Is it possible to get a list of things we would refer to the IPT for? It was helpful to know that pharmacists can help with physical medication management, not just medication for example. A list of what OT or Social Work can do would also be helpful**

A: There are two places where Providers referring to the IPT can find information on what all the IPT clinicians can support including referral guides. The IPT SharePoint Site: [vancouverpcnresources.com](http://vancouverpcnresources.com) (contact your CNM for sign in info). As well as on [Pathways](#) (select PCN Allied Supports and filter to Vancouver)

#### **Q: If we wanted to refer couples or parents, can we send just one referral or are patients individually assessed?**

A: Currently the IPT only does sessions individually with patients, so would need individual referrals.

#### **Q: I'm interested to hear your thought process as to why you picked duloxetine over an SSRI for this patient? I've seen bupropion being used in addition to an SSRI to augment an SSRI, would you recommend this approach?**

A: Click [here](#) to see response from PCN Pharmacist Melanie Hempel.

#### **Q: Is there a list of Social Work supports in Vancouver outside of the IPT?**

A: Patients can call 211 BC, or visit [bc211.ca](http://bc211.ca) to find out about social support programs in their community. This [Mental Health Self Management Guide](#) created by the Vancouver Division also lists neighborhood houses that have programs to help with mental health and social supports. Seniors Centres and Community Centres in the city may also provide social supports and programming. The [Office of the Seniors Advocate](#) also lists resources for Seniors needing social supports.

#### **Other Social Support Resources**

[Low cost food & clothing – updated weekly by City of Vancouver](#) – access maps of program operators in the city

Applying for income assistance – Use [My Self Serve](#) to assess your eligibility and apply for assistance from the BC govt.

Low Barrier Outreach Agencies:

- [Carnegie Homeless Services Outreach Team](#) – first come, first serve drop in only
- [Coast Mental Health Resource Centre](#)
- [The Kettle Society](#) – computer room and advocacy/resource/referral services