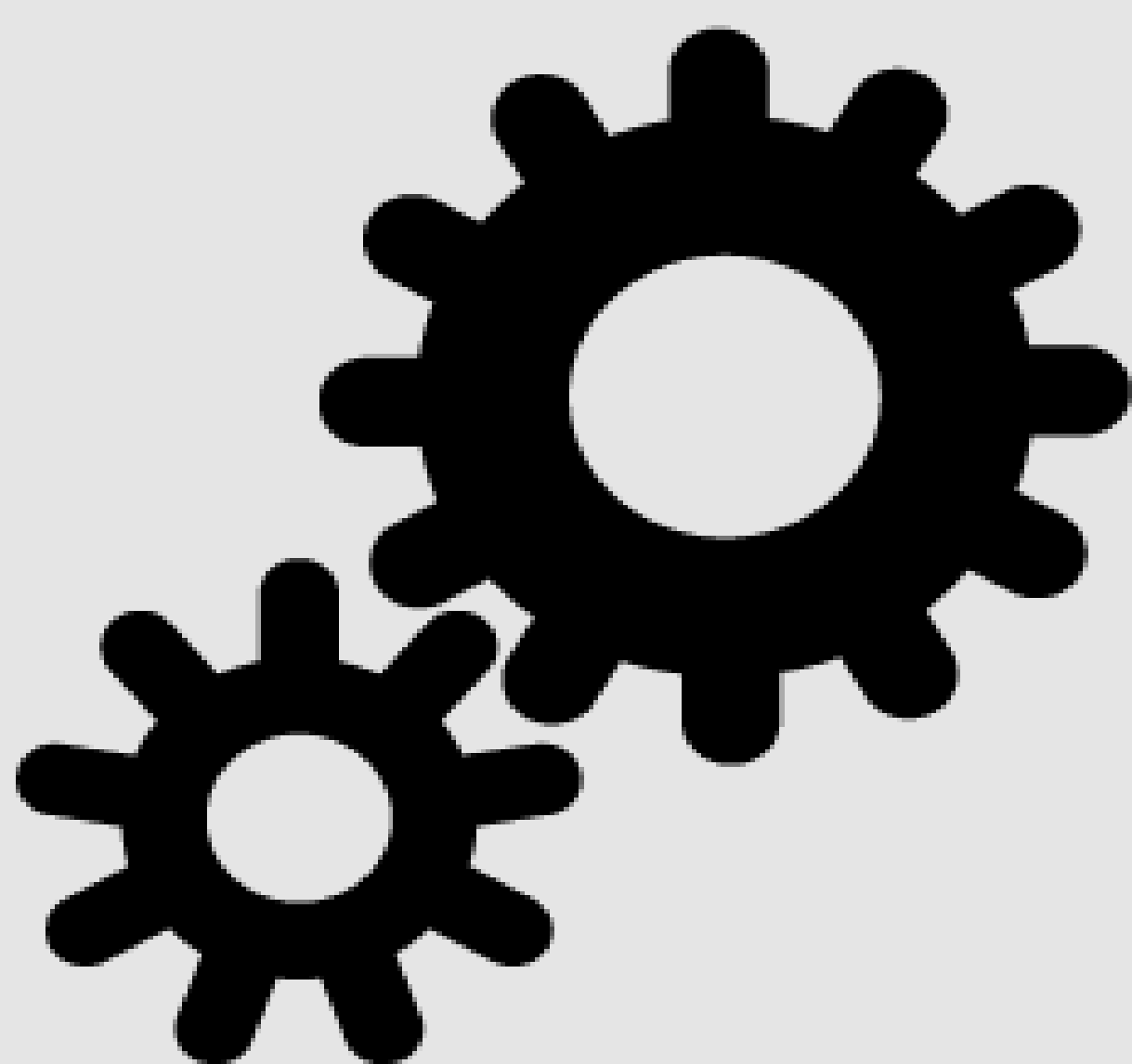# Collaborative Care Best Practices

Addiction & Mental Health in Primary Care

A number of studies have identified components of care that should be considered when implementing a collaborative care model. Adopting the following best practices can help to ensure that collaborative care is implemented successfully, efficiently, and with a high standard of care.

Components of collaborative care include:

- **01** Team-based care
- **02** Population-focused care
- **03** Measurement-guided care
- **04** Evidence-based care
- **05** Quality improvement

Effective communication that is relevant, timely, understandable, and reciprocal has been found to enhance collaborative care.

Other components include:

- Clear roles and responsibilities
- Agreed upon and transparent leadership
- A communication method and frequency that is agreed upon and can be sustained
- Agreed upon decision making process that links to the team's shared goals
  Use of up-to-date technology
- A developed conflict resolution process
-

01 Team-based driven care

02 Population-focused care

Population-focused care involves identifying and screening patients with the highest needs to ensure resources are allocated accordingly.

A shared electronic medical record (EMR) is key to implementing effective collaborative care programs because it allows care providers to share information and keep providers up-to-date on a patient's health status and progress.
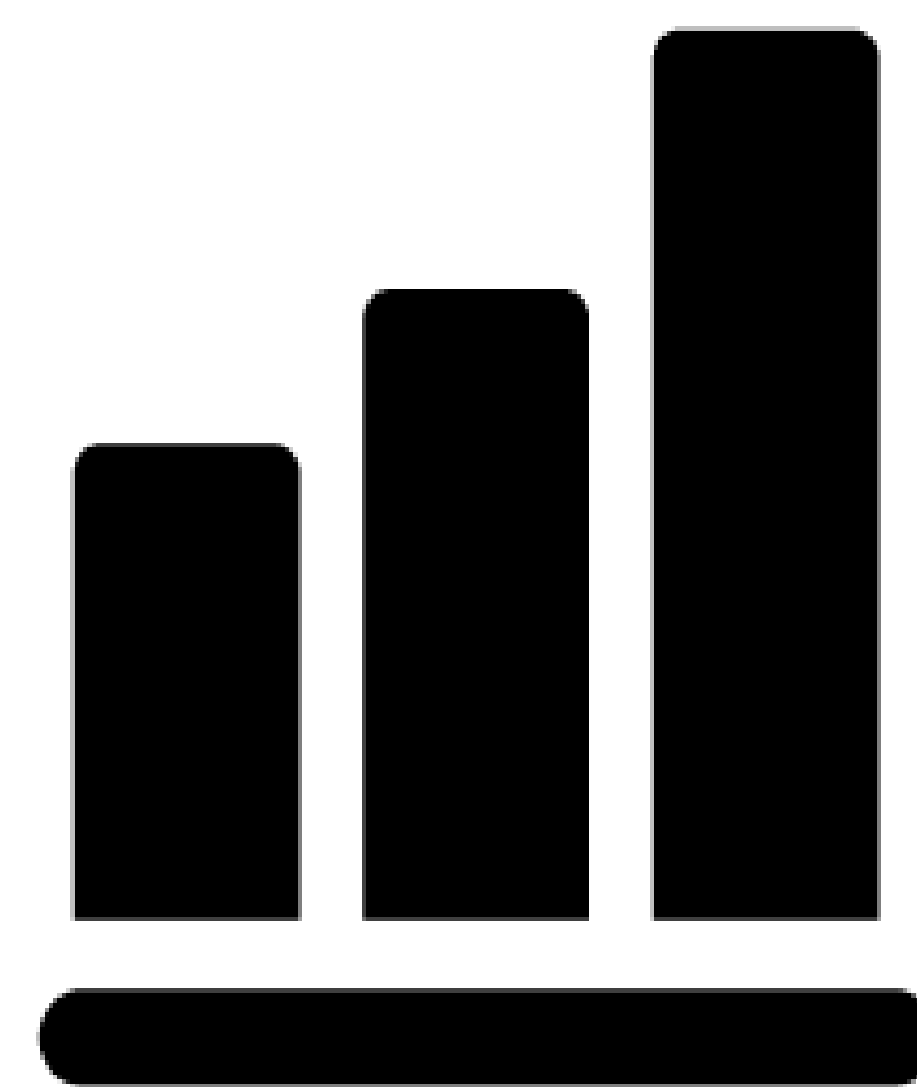
03 Measurement-guided care

Standardized screening and assessment tools should be used to drive clinical decision making and track response to treatment. Self-report tools should be brief, multi-purposed, and easy to score and interpret.

Six components of effective patient outcome measurement:
- incorporate outcome measurements
- include patient-reported outcomes
- collect measures frequently
- ensure measures are diagnosis-specific and correlated to illness state
- use reliable instruments that are sensitive to change
- apply methods that are simple to implement and are low cost

04 Evidence-based care

Evidence-based care is most effective when clinicians adopt a standardization of treatment algorithms and have up-to-date treatment guidelines and training. This ensures that clinical decisions can be properly supported.

Treatment plans should be contextualized to the patient's needs and proven to have worked in primary care settings.

05 Quality improvement

A quality improvement (QI) process helps determine if a program has reached its desired outcomes and is providing safe and effective care. If certain goals are not being met, having a continuous QI process can inform changes that may needed to achieve those goals.

Quality improvement ensures accountability, transparency, and proper resource allocation.

Barriers to implementing collaborative care

Clinical barriers
- limited physician training in mental health
- lack of up-to-date treatment guidelines
- stigma

Organizational barriers
- lack of clarity or understanding of roles
- difficult adjusting to cross-disciplinary shifts
- practitioner resistance
- lack of resources and training

Financial barriers
- discrepancies in reimbursement and charges for consultations

For these findings and more, check out our Collaborative Care Literature Review.

For more information, contact:
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