## Collaborative Care via Telehealth

## Addiction & Mental Health in Primary Care

Introducing Telehealth (TH) into collaborative care may be a viable option to providing adequate addiction and/or mental health (AMH) services, independent of location and resources. TH can involve the use of telephones, videoconferencing, and electronic records to reach, engage, and impact health indicators of patients, and ensure high quality of care.

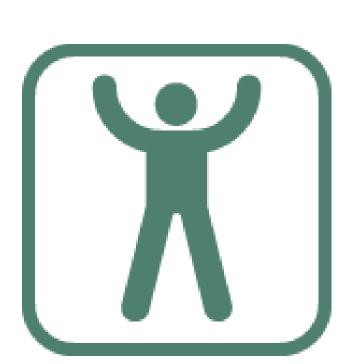
With collaborative care,

- patient outcomes can be improved.
- more effective treatment can be delivered.
- care can be better managed.

## Benefits of Telehealth-Based Collaborative Care



Decreased utilization of hospital services



Enhanced quality of life



Increased medication use and compliance



Improved cost efficiency



Symptom reduction and remission



Improved patient satisfaction



Collaborative care via TH has been comparable to practice-based collaborative care in terms of number of primary care and mental health visits, number of medications prescribed, and adherence to medication.

Evidence has shown that collaborative TH patients are two or more times less likely to go to an emergency room within the first 12 months following enrollment, when compared to practice-based collaborative care.

Collaborative care has led to significant improvements in manic, depressive, and anxiety symptoms when compared to usual care.

Mental quality of life, quality of wellbeing, and mood have all shown improvement with the use of collaborative care by TH. In one study examining children with attention deficit hyperactivity disorder (ADHD), larger improvements in inattention, hyperactivity, total ADHD symptoms, and combined ADHD and oppositional defiant disorder (ODD) were seen when using TH in collaborative interventions through multiple follow-up assessments.

In two studies, results showed that more patients using TH-based collaborative care had achieved their self-management skills, as well as had improved their health literacy at 6- and 12-months compared to practice-based collaborative care and usual care.







TH patients have reported more patient-centred care and collaboration between their primary care provider and mental health specialists at 6- and 12- months following intervention.

Enhanced patient satisfaction, including positive attitudes towards access to health care, treatment, and amount of support received, has been found with the use of TH-based collaborative care.

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

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Updated: March 2022



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