Toward Multidisciplinary Treatment & Training: Successes, Challenges, & Solutions

New England College Health Association
Annual Meeting
October 30, 2014

Multidisciplinary?

What prompted this presentation?
### Scope of Psychological Services

**Students contacted / seen**

<table>
<thead>
<tr>
<th>Year</th>
<th>2008-09</th>
<th>2009-10</th>
<th>2010-11</th>
<th>2011-12</th>
<th>2012-13</th>
<th>2013-14</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>967</td>
<td>901</td>
<td>851</td>
<td>847</td>
<td>851</td>
<td>871</td>
</tr>
</tbody>
</table>

**Percentage: student population**

<table>
<thead>
<tr>
<th>Year</th>
<th>2008-09</th>
<th>2009-10</th>
<th>2010-11</th>
<th>2011-12</th>
<th>2012-13</th>
<th>2013-14</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0.15</td>
<td>0.15</td>
<td>0.16</td>
<td>0.17</td>
<td>0.18</td>
<td>0.21</td>
</tr>
</tbody>
</table>

### Psychological Services Provided

**Average clinical hours per student**

<table>
<thead>
<tr>
<th>Year</th>
<th>2008-09</th>
<th>2009-10</th>
<th>2010-11</th>
<th>2011-12</th>
<th>2012-13</th>
<th>2013-14</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0.45</td>
<td>0.42</td>
<td>0.42</td>
<td>0.36</td>
<td>0.39</td>
<td>0.36</td>
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</tbody>
</table>

**Referred for medication evaluation**

<table>
<thead>
<tr>
<th>Year</th>
<th>2008-09</th>
<th>2009-10</th>
<th>2010-11</th>
<th>2011-12</th>
<th>2012-13</th>
<th>2013-14</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0.05</td>
<td>0.18</td>
<td>0.25</td>
<td>0.16</td>
<td>0.20</td>
<td>0.25</td>
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</tbody>
</table>

### Medical Services Provided

**Total Visits**

<table>
<thead>
<tr>
<th>Year</th>
<th>2008-09</th>
<th>2009-10</th>
<th>2010-11</th>
<th>2011-12</th>
<th>2012-13</th>
<th>2013-14</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2048.54</td>
<td>2059.22</td>
<td>2060.31</td>
<td>2054.68</td>
<td>2068.65</td>
<td>2070.53</td>
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</table>

**Composition of Medical Staff – FTE**

<table>
<thead>
<tr>
<th>Year</th>
<th>2008-09</th>
<th>2009-10</th>
<th>2010-11</th>
<th>2011-12</th>
<th>2012-13</th>
<th>2013-14</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advanced Practice Provider</td>
<td>0.25</td>
<td>0.27</td>
<td>0.25</td>
<td>0.23</td>
<td>0.24</td>
<td>0.26</td>
</tr>
<tr>
<td>RN</td>
<td>0.34</td>
<td>0.37</td>
<td>0.40</td>
<td>0.38</td>
<td>0.40</td>
<td>0.42</td>
</tr>
<tr>
<td>MD</td>
<td>0.25</td>
<td>0.27</td>
<td>0.29</td>
<td>0.28</td>
<td>0.29</td>
<td>0.30</td>
</tr>
<tr>
<td>Nutriotionist</td>
<td>0.05</td>
<td>0.06</td>
<td>0.06</td>
<td>0.07</td>
<td>0.07</td>
<td>0.07</td>
</tr>
</tbody>
</table>

### Processes and Structures for Integrated Services

- Direct Psychiatric Consultations
- Medication Refills
- Monthly Prescriber Meetings
- Walk-In, Triage, Crisis Hours
- Attendance at PCS Staff Meetings
- Multidisciplinary Staff Seminars
- Eating Disorder Advisory Group
- Multidisciplinary Treatment Teams
Eating Disorder Advisory Group

- Advance Practice Providers (3)
- Nutritionist (1)
- Athletic Trainer Representative (1)
- Psychiatrist / Administrator of PCS (1)
- Trainees (1-2)

Multidisciplinary Treatment Teams

<table>
<thead>
<tr>
<th>Team 1</th>
<th>Team 2</th>
<th>Team 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychotherapist (2)</td>
<td>Psychotherapist (2)</td>
<td>Psychotherapist (2)</td>
</tr>
<tr>
<td>Advanced Practice Provider</td>
<td>Advanced Practice Provider</td>
<td>Advanced Practice Provider</td>
</tr>
<tr>
<td>Trainee (2)</td>
<td>Trainee (2)</td>
<td>Trainee (3*)</td>
</tr>
<tr>
<td>Psychiatrist</td>
<td>Psychiatric CNS</td>
<td>Psychiatry Resident (*</td>
</tr>
</tbody>
</table>

Multidisciplinary Training Program

- Clinical
  - Individual psychotherapy
  - Group psychotherapy
- Education
  - Individual supervision
  - Group supervision
  - Case conferences
  - In-service
  - Staff Seminar
  - Training Seminar
- Outreach
- Post-graduate fellowship

Composition of Staff-Trainee

<table>
<thead>
<tr>
<th>Staff FTE</th>
<th>Trainee FTE</th>
</tr>
</thead>
<tbody>
<tr>
<td>2008-09</td>
<td>2009-10</td>
</tr>
<tr>
<td>2010-11</td>
<td>2011-12</td>
</tr>
<tr>
<td>2012-13</td>
<td>2013-14</td>
</tr>
<tr>
<td>2014-15</td>
<td></td>
</tr>
</tbody>
</table>

Clinical Contribution

Evolving of Outreach 2001-2014: Joining the Community

- Out of the office: “close to the street”
- Students’ involvement
- Break the Silence
- Responding to distressing events
- Changing campus culture
- Collaboration and partnering with other stakeholders
- Education
Synergy and Cross Fertilization:
Trainees & Vibrant College Setting
• Trainees’ program requirements
• Trainees’ research interests
• Unique skill sets
• Connected to people, ideas, resources, institutions
• Curiosity and enthusiasm for learning opportunities
• Beginner’s mind and carpe diem

Counting our Serendipitous Blessings:
Examples
• Creative workshop on identity and vocation
• Open forum “Breaking the Barbie Tyranny”
• Open forum “Pressures on EveryBODY: Body Image and the Williams Culture”
• Group “Mindful Living”
• In-service discussion and public presentation

Benefits to PCS’s Outreach and the College
• Fuller integration of PCS, visibility
• Collaborative linkages
• Changing the campus culture
• Enhancing students’ resilience, emotional skills, and developmental capacities
• Facilitating diversity

Information, Transparency, and Informed Consent
• Information Document
• Notification of Trainee Status
• Integrated Health Center Care
• Limits to Confidentiality
• Informed Consent

Information Document
Welcome to Psychological Counseling Services (PCS). The following information is a summary of how PCS functions and works with students who have sought assistance and treatment at PCS. It highlights some of our responsibilities to you and our policy on confidentiality and consent.

PCS offers a comprehensive range of mental health services that are provided by our staff, who have extensive training and experience. These services are designed to address the full range of developmental, emotional, and psychological needs of students at the College. These services include psychological and psychiatric assessment, counseling, psychotherapy, educational, group therapeutic, and outreach services.

PCS serves as a training site for advanced, graduate, and post-graduate candidates in the field of college mental health services, where we have accepted into our supervised training program. Your therapeutic relationship may be such an individual role. If so, we will discuss the information you desire during the course of your evaluation and treatment. For the most part, you would prefer not to work with a training professional, which will be honored.

Psychological Counseling Services offer students an opportunity to address personal problems or concerns, to understand oneself better; to learn new and more effective coping strategies; examine interpersonal situations and difficulties and make changes in your life; to manage stress and sensitive information with a clinician, when you can develop a relationship that facilitates this learning process. Like, at PCS, have grown comfortable with the process and strive to ensure that it is helpful in the personal and developmental needs of the student.

PCS is administratively integrated within the Department of Health Services. As such, we work with all of the other health service professionals at the College, when clinically indicated, in accordance with our belief that consultation and collaboration of all aspects of the person is a crucial developmental task of young adulthood and adolescence.
Notification of Trainee Status

PCS serves as a training site for advanced, graduate and post-graduate candidates in the field of college mental health services, whom we have accepted into our supervised training program. Your assigned clinician may be such an individual and, if so, will disclose that information to you during the course of your evaluation and intake. If, for any reason, you would prefer not to work with a training professional, simply ask for a change, which will be honored.

Integrated Health Center

PCS is administratively integrated within the Department of Health Services. As such, we work with all of the other Health Service professionals at the College, when clinically indicated, in accordance with our belief that integration and consolidation of all aspects of the person is a crucial developmental task of young adulthood and health and wellness.

Limits to confidentiality

As an integrated Health Center, all of the professionals working at the Center may share pertinent health information when clinically indicated. All clinical information is kept in your health and counseling records, which are never part of your educational records and are handled confidentially, like all health care records.

Multidisciplinary Training: Survey

• Former trainees were recruited via email and phone and asked to participate in an online survey

• 16 participants:
  - 6 Social Work
  - 5 Clinical Psychology
  - 3 Psychiatry
  - 2 Counseling

How important was the multidisciplinary training model (i.e. the opportunity to work with peers and staff from other disciplines) in your decision to train at Williams?

![Survey Results]

- Not Important at all
- Low Importance
- Neutral
- Slightly Important
- Very Important

11/3/14
Aside from Williams did your practicum/internship placements involve training with students from different disciplines?

Yes/No

As a trainee at Williams PCS, training with students from different disciplines improved/strengthened my:

- Professional Identity: 4.41
- Understanding of Diversity: 4.2
- Understanding of Human Behavior & Emotion: 4.28
- Clinical Intervention: 4.25
- Treatment Planning: 4.2
- Case Conceptualizations: 4.6

What challenges/issues did you encounter while working with peers and staff from different disciplines?

- Therapeutic Style
- Training
- Working with Differences
- Theoretical
- Levels of Experience

In what ways has multidisciplinary training shaped your professional identity as a mental health professional?

- Increased awareness of discipline specific values
- Learning how to “speak different languages”
- Collaborative Attitude
- Trust, comfort, and willingness to work with others
- Better patient care

No clinician is an island.

Conclusions and Implications for Supervisors and Trainees

- Define your multidisciplinary model: What is the mission? How does it function? Strengths/Weaknesses?
- Establish a collaborative environment that models effective communication, trust, and conflict resolution
- Embrace and encourage diverse perspectives
- Meet trainees where they are at and consider their experience with multidisciplinary treatment
- Introduce the collaborative structure through showing trainees how to use other clinicians as resources
References


Herman, H., Trauen, T., & Warmack, J. (2002). The roles and relationships of psychiatrists and other service providers in mental health services. Australian and New Zealand Journal of Psychiatry, 36(1), 75-80.


Müller, R., Reetz, D. R., Kyliszkowski, R., & Barr, V. (2013). The Association for University and College Counseling Center Directors Annual Survey: Association for University and College Counseling Center Directors.


Discussion