

Exploring Pre-Implementation Perceptions of Integrated Care in a College Setting

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INTRODUCTION

- Integrated behavioral health (IBH) services on college campuses may provide students with comprehensive treatments that meet both their physical and psychological needs
- However, the existence of integrated services on college campuses appears to be rare, as is research related to implementation

PURPOSE

- To examine healthcare provider perceptions of integrated care prior to integration occurring at a midwestern college campus

SAMPLE

- 17 Total Providers
 - 9 Medical Providers
 - 1 Doctor of Medicine (MD)
 - 4 advanced practice registered nurse (APRN)
 - 4 Registered Nurse (RN)
 - 8 Mental Health Providers
 - 5 Licensed Psychologist (LP)
 - 3 Psychology Trainee

MEASURES

- Semi-Structured Interview
- Patient-Centered Medical Home –Attitudes, Interest, and Knowledge Scale (PCMH-AIKS; Cassano & DiTomasso, 2017)
 - Attitudes: 6 Likert-type scale (Strongly Disagree - Strongly Agree)
 - Interest: 6 Likert-type scale (Not At All - Extremely)
 - Knowledge: 16 True or False statements

Prior to integration,
healthcare providers held
generally **favorable** views
towards **integrated care**.
They reported several
perceived **benefits** and
challenges to integration at
the college level.



Want to **see more** themes, subthemes, and what providers said about integrated care? **Take a picture** to learn more!



RESULTS

Differences Between Medical and Mental Health Providers Perceptions

	M	SD
Attitude		
Medical	5.12	0.73
Mental Health	5.21	0.27
Total	5.17	0.56
Interest		
Medical	4.79	1.10
Mental Health	4.95	0.48
Total	4.87	0.85
Knowledge		
Medical	13.88	3.21
Mental Health	14.62	1.68
Total	14.23	2.56

- Providers perceptions of integrated care prior to integration were:
 - Attitudes = Favorable (M = 5.17, SD = 0.56)
 - Interest = Moderate / High (M = 4.87, SD = 0.85)
 - Knowledge = Good (M = 14.23, SD = 2.56)
- No significant differences were found between medical and mental health providers on:
 - Attitudes $t(10.33) = -.34, p = .73$
 - Interest $t(11.21) = -.39, p = .69$
 - Knowledge $t(12) = -.59, p = .55$
- Two main themes emerged from the qualitative thematic analysis:
 - Perceived benefits of IBH
 - Perceived challenges of IBH
- Exemplar quotes include:
 - *I think [integration] will increase collaboration and make it easier on students, which makes us feel like we're providing better care too.* [Benefit, diverse collaboration]
 - *I'm trying to do a lot more team stuff. We did a little bit last year, but really kind of like continuing to integrate and kind of own, own our identities and not losing our identities.* [Challenge, maintain autonomy]
 - *I think it helps comfort clients to know that their providers are talking to each other versus being on an island and having to carry messages back and forth.* [Benefit, increase in communication]

LIMITATIONS / FUTURE DIRECTIONS

- Small sample size
- Convenience sample and may not generalize to other college settings
- Post integration follow-up data should be collected