



Behavioral Health Block Curriculum

PGY 1

NGMC- Family Medicine Residency Program
Gainesville, Ga

Description of Rotation:

This is a 4-week rotation with direct supervision by a Behavioral Health Specialist and supplemental longitudinal learning in the FMP supervised by Family Medicine Faculty. Residents will learn about the occurrence of mental health in the family medicine practice as well as experience community-based learning which will take place in an inpatient/outpatient based behavioral health settings under the supervision of a psychiatrist, counselors and social workers. Additional experiential learning will occur during didactics, Balint groups, individual consultations and specific assignments.

Overall Goals of Behavioral Health Rotation:

Residents will learn to provide evidence-based, compassionate, comprehensive behavioral health skills and resources for incorporation into the practice of family medicine. This rotation will facilitate a broader view of behavioral health through encounters with patients and families who are experiencing behavioral health and social issues. Residents will also become familiar with levels of behavioral health services through a visit to community mental health providers. Residents will learn about a range of psychiatric disorders; how to refer patients for psychiatric, behavioral health and social services as well as collaboration with medical, behavioral health and social service providers to meet the multi-level health needs of patients and their families. Residents will learn how to conduct a diagnostic interview, administer and interpret common behavioral screening tools (PHQ-9, GAD-7 and AUDIT) and provide treatment recommendations. During patient and family interactions, the resident will demonstrate empathy with patient centered communication skills and motivational interviewing skills.

The resident will acquire behavioral health knowledge and skills through experiential components:

- Didactics incorporating evidence-based techniques and skill development
- Observed and evaluated patient-centered communication sessions and simulations
- Collaborative Care- Integration of behavioral health knowledge and skills during clinic and the Behavioral Health consultation.
- Active participation in the Resident Peer Group and assignments to expand knowledge and skills.
- Psychiatric Rounds scheduled 2 of the 4 weeks in community-based treatment centers.

Patient Care Objectives

- Demonstrate the ability to effectively interview patients using patient-centered communication to gather biological, psychological and social information and formulate diagnosis and therapeutic plans. (PC-1, PC-3/level-2)
- Collect clinical information in an empathetic manner and recognize the psychological impact of chronic health conditions and its social impact on patients and their families (PC-2/level-2)
- Visit community behavioral health agencies to learn about behavioral health resources, treatment levels, psychopharmacology, clinical criteria and collaborate continuity of care (PC-1,



PC-2, PC-3/level-2)

- Demonstrates evidence-based care related to undifferentiated health concerns while utilizing appropriate consultations and diagnostic testing (PC-4/level-2)

Medical Knowledge Objectives:

- Familiarity with the Diagnostic and Statistical Manual of Mental Disorders, 5th edition (DSM-5) nomenclature of mental health disorders (MK-1/level-1)
- Demonstrate the ability to score and interpret the Patient Health Questionnaire (PHQ-9), Generalized Anxiety Disorder (GAD-7), Alcohol Use Disorders Identification Test (AUDIT), Mini Mental Status Examination (MMSE) as well provide treatment direction (MK-1, MK-2/level-2)
- Describe the initial assessment and management of a patient experiencing suicidality as well as other conditions that constitute a “psychiatric emergency.” (MK-1, MK-2/level-2)
- Develop knowledge of the following mental disorders commonly seen in Family Medicine (MK-1, MK-2/level-2):
 - Bipolar and related disorders
 - Depressive disorders
 - Anxiety disorders
 - Substance-Related and Addictive disorders
 - Feeding and eating disorders
 - Sleep-wake disorders
 - Neurodevelopmental disorders
 - Somatic symptom and related disorders
 - Trauma and stressor-related disorders
- Compare and contrast pharmaceutical therapies as well as non-pharmaceutical therapies for the various psychiatric disorders (MK-1, MK-2/level-2)

Topics to cover in rotation:

MK Topic	On-Line Resource
DSM-5	https://www.psychiatry.org/psychiatrists/practice/dsm/about-dsm
MMSE	https://www.aafp.org/afp/2016/1015/p635.html
PHQ-9	https://www.aafp.org/afp/2012/0115/p139.html
GAD-7	https://www.aafp.org/afp/2015/0501/p617.html
AUDIT	http://auditscreen.org/
Bipolar and Depressive disorders	https://www.aafp.org/afp/topicModules/viewTopicModule.htm?topicModuleId=6
Anxiety disorders	https://www.aafp.org/afp/2008/0815/p501.html
Substance-Related and Addictive disorders	https://www.aafp.org/afp/2013/0715/p113.html



Feeding and eating disorders	https://www.aafp.org/afp/2008/0815/p187.html
Sleep-wake disorders	https://www.aafp.org/afp/2013/0815/p231.html
Neurodevelopmental disorders	https://www.epa.gov/sites/production/files/2015-10/documents/ace3_neurodevelopmental.pdf
Somatic symptom and related disorders	https://www.aafp.org/afp/2016/0815/p49.html
Trauma and stressor-related disorders	https://www.aafp.org/afp/2013/1215/p827.html

Interpersonal and Communication Skills Objectives:

- Communicates in verbal and non-verbal ways which convey respect, empathy, and cultural sensitivity to all persons (C-1, C-2/level-2)
- Apply and develop communication skills as indicated in the Communications curriculum (C-1-4/level-3)
- Recognizes physical, cultural, psychological and social barriers to communication (C-2/level-2)
- Communicates in ways that build up interdisciplinary team and interagency collaboration while using: repeating back, verification, clarifying questions, numerical clarification, and the SBAR model (C-3/level-2)
- Recognizes ethical and legal implications of using technology to document and communicate (C-3, C-4/level-2-3)
- Utilize Motivational Interviewing skills and Robert Carkhuff's Helping Model when building the physician-patient relationship and health promotion (C-1, C-2/level 3)

Practice Based Learning and Improvement Objectives:

- Critically evaluates information from scholarly literature about behavioral health conditions and treatment (PBLI-1, PBLI-2/level-2)
- Ability to discuss content of recommended readings with faculty and integrate applicable concepts (PBLI-2/level2)
- Recognizes inefficiencies, variation and quality gaps in behavioral healthcare delivery in Family medicine (PBLI-3/level-3)

Professionalism Objectives:

- Through group support and Balint groups, the Resident-Physician will explore his/her beliefs, attitudes, values toward patients and families affected by mental health disorders (PROF-1/level2)
- Attends to responsibilities and completes duties in a timely manner while asking for assistance when needed and having a questioning attitude (PROF-1, PROF-2/level-2)
- Recognizes and responds appropriately to signs of stress or impairment in self and team members (PROF-4/level-2)
- Consistently displays an attitude and manner that conveys acceptance of diverse individuals and groups (PROF-2, PROF-3/level-2)
- Monitor personal and professional progress in the areas of wellness including: mental, physical and social health as well as awareness of transference and counter transference (PROF-4/level-2)



Systems Based Practice Objectives:

- Gain understanding of health care resources and costs impact on patients, families and the health care system while suggesting feasible treatment to adhere to patient/system resources (SBP-1/level-2)
- Learn about screenings and procedures for issues such as abuse, medical errors and promotion of patient safety (SBP-2/level-2)
- Demonstrate the ability to analyze resources within the community and the potential impact Family Physicians can positive impact community health (SBP-3, SBP-4/level-2)