

Comprehensive team-based care

Family First FHT Mental Health Team

Increasing Access to DBT skills to Underserved Patients in Primary Care



Family First Family Health Team took action to defuse a critical mental health care situation in the local area by increasing access to its services.

Many local hospitals had closed their mental health referral lists to the community, shut down dialectical behavioural therapy (DBT) services, or had wait times of up to 2 years. Family First FHT's mental health team found this problematic for an already-underserved population. Their aim was to decrease deterioration in those in this complex, underserved population with more severe symptoms (such as self-harm, emotion dysregulation) and psychiatric diagnoses (including Borderline Personality Disorder, eating disorders, treatment-resistant depression, interpersonal and personality disorders, and problem drinking).





The mental health team modified an existing program based on Dialectical Behaviour Therapy for a primary care setting. The program, which was launched in September 2018, provided evidence-based group interventions. Its flexible format allowed patients to enrol in one of the three 4-week modules.

Holding sessions in a primary care setting reduced barriers to participation, since there was no stigma associated with the location. Standardized outcome measures indicate reductions in symptoms of depression and anxiety, increases in work and social functioning, and real-life implementation of the new skills. Patients had an 86 per cent satisfaction rate.

The program reduces the demand on hospital-based care and empowers patients in their community, while shortening wait times and producing results. It also fostered an inclusive community of care providers and patients working together toward recovery.

The team has now increased the number of practitioners involved to four from two and is offering an evening option. In addition, patients may retake the course to refresh their coping skills.

Family First FHT's mental health team has made it possible for primary care clinicians to assist more complex patients by being seamlessly supported by their multidisciplinary colleagues.

Key Facts:

- Modified an existing DBT program for use in a primary care setting
- Dramatically reduced wait times and access to necessary mental health services
- Evidence-based group interventions
- Flexibility to meet patients' individual needs
- Empowers patients in their own communities
- Increase in interpersonal functioning; decrease in emotional dysregulation

