

Vancouver psychiatrists incorporate group medical visits into patient care

In March 2009, St. Paul's Hospital psychiatrists Drs Chris Gorman and Ron Remick began offering group medical visits for patients with mood disorders. "We saw what GPs were doing with their group medical visits for patients with chronic conditions, and we thought it would work well for our patient group," says Dr Gorman.

And it has. Both Drs Gorman and Remick have successfully converted their individual outpatient practices at St. Paul's to group medical visits. By June 2011, all of Dr Remick's approximately 500 hospital-based patients had attended at least one group medical visit, while Gorman treats an average of 15 patients per week, for a total of 750 patients seen in group medical visits per year.

In addition to their St. Paul's group medical visits, Gorman and Remick are working in conjunction with the Mood Disorders Association of BC (MDABC) to provide five drop-in group medical visits each week at the association's premises in Vancouver.

The project is aided by the financial support of the Shared Care Committee (a joint project between the General Practice Services Committee and the Specialist Services Committee) and includes three additional psychiatrists, Drs Judy Allen, Resa Shore, and Paul Waraich. With group sizes ranging from eight to 12 patients and

with demand growing, Drs Gorman and Remick are now planning on adding a sixth weekly session. The groups include patients with a range of conditions, including depression, anxiety, and bipolar disorder, as well as patients with concurrent substance abuse issues or comorbid psychiatric conditions (or both).

Group medical visits are one of the practice innovations popularized by the GPSC's Practice Support Program (PSP), which offers focused training sessions (learning modules) and in-practice support for physicians and their MOAs on ways to improve practice efficiency and to support enhanced delivery of patient care.

The PSP's Group Medical Visits learning module shows physicians a new and time-efficient way of caring for patients who share a specific chronic condition. Patients are invited to attend these sessions to receive care, education, and advice within a supportive group environment. Although individual appointments for such patients are still required, many of their longer-term health maintenance concerns can be more effectively addressed through group visits.

The whole experience has been very satisfying, says Dr Gorman, mostly because it works so well for patients. "Some people can't handle groups, and we understand that. But most of our patients do very well in the group setting," says Dr Gorman, adding that patients learn as much from each other as from the attending psychiatrists. In fact, Dr Gorman believes one of the key benefits of the group process is the heightened self-esteem for patients who feel they have helped others in the group.

In response to those who claim

psychiatric care is best provided one-on-one, Dr Gorman points to a review of studies comparing treatment outcomes for psychiatric care in which 25% found group care more effective than individual care. For the balance of studies reviewed there was no difference in effectiveness between individual and group care. "Medical group psychiatric care is both cost effective and clinically effective," says Dr Gorman.

"Group medical visits are also effective at expanding capacity for providing care. A traditional psychiatrist working full-time might see 150 new patients every year," says Dr Remick. "By comparison, with each of our five psychiatrists working 1 day a week assessing new consultations and chairing one group medical visit, we're able to assess and provide care for about 1500 new patients a year."

No appointment is required for the 1-hour group sessions; however, before participating, all patients must undergo an initial 45-minute assessment by one of the psychiatrists. As a result, they receive a consultation letter with a psychiatric diagnosis and treatment recommendation that they can take to their general practitioner to initiate psychiatric treatment. Or they can attend the group sessions and have the psychiatrists direct their medical care and treatment.

"Some of our patients are already receiving care from other practitioners but still come to our group medical sessions for advice," says Dr Gorman.

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