

Improving Community Mental Health Training for Future Physicians

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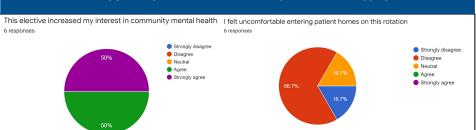
INTRODUCTION

In recent years many groups of patients, including children and adolescents, are utilizing emergency departments for behavioral health crises. ¹ Mobile crisis services are a relatively new addition to the behavioral health emergency services offered in cities across the United States. There has been very little research conducted to this date in this very new field of Mobile Crisis Psychiatry. However, it has been shown that subsequent behavioral health ED visits are reduced in patients who have been seen by mobile crisis psychiatric teams.² It stands to reason that conducting psychiatric evaluations in the home environment of patients is a clinical training experience unique to mobile crisis psychiatry. There is little or no current medical education research on the pedagogical utility of mobile crisis psychiatry for training future and current physicians. This project serves to evaluate the Mobile Crisis Team as a rotation site in its ability to train current and future medical professionals in specific areas relevant to community mental health.

COMMUNITY PARTNER

The Monroe Mobile Crisis Team is a multidisciplinary mobile branch of the Comprehensive Psychiatric Emergency Department at URMC that responds to mental health crisis calls in Monroe County. This team provides psychiatric evaluation and treatment for individuals experiencing mental health crises in the community and consequently prevents unnecessary visits to the psychiatric emergency department

COMMUNITY HEALTH IMPROVEMENT PROJECT



This project consisted of distributing surveys to medical students who rotated on the mobile crisis team with the plan to administer similar surveys to the residents and fellows who rotate on this survey at a later date. A comprehensive medical education literature review was completed and a survey was developed in accordance with best practices.^{3,4} This survey was designed to evaluate the quality of the educational experience and the extent to which this educational experience improves provider knowledge and interest in participating in community health initiatives. Likert scales were utilized for many of the survey items administered and statistical analysis of survey items was conducted. For many of the items of this survey, students were asked to select one of 5 options (strongly disagree, disagree, neutral, agree, strongly agree) to gauge their level of agreement with a statement such as "this elective increased my interest in psychiatry". Twelve medical students who had rotated on the Monroe Mobile Crisis Team were identified and asked to take our survey. To this date, 6 of the 12 medical students asked to take the survey have completed it and their responses have been utilized for preliminary statistical analyses.

References:

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CONCLUSIONS

Preliminary data demonstrate that clinical experiences while rotating on the Monroe Mobile Crisis Team increase interest in community mental health. 50% of students who responded to the survey indicated that they strongly agree with the statement that "this elective increased my interest in community mental health", while the other 50% of students indicated that they "agree" with that statement. This stands in contrast to the 16.7% who strongly agreed with the statement that this elective increased their interest in emergency psychiatry and 16.7% of students who reported that they disagreed with that statement (with the other 66.6% reporting "agree" or "neutral" in response to that statement). Other notable findings include that 100% of students surveyed reported that they either "agree" or "strongly" agree with the statements "this elective gave me opportunities to see evaluation and management of mental health crises" and "this elective increased my comfort level working with individuals and families in crisis". Survey participants were asked to respond to the statement "I felt uncomfortable entering patient homes on this rotation", of which 66.7% disagreed, 16.7% strongly disagreed, and 16.7% were neutral. Students were asked if they would recommend this elective to other medical students (with the options "yees". "no" 'maybe") of which 100% of students responded "yes". Of the students polled, 83.3% responded "no" to the question "are you pursuing a psychiatry residency".

IMPACT AND SUSTAINABILITY

Future directions of this research should include dissemination of surveys to residents and fellows who rotate on the mobile crisis psychiatry service. Surveys should be administered to all students and residents who rotate on the service over the course of 1 to 2 years in order to obtain a larger data set for more robust statistical analysis. Preliminary data suggest that this elective increases interest in community mental health, however, future studies may choose to look into what aspect of this elective (i.e. location of evaluation and treatment in patient homes in the community) mediates this effect on students. This project is well suited for future students as ongoing data collection can occur by administering surveys to medical students, residents, and fellows who are rotating on this service throughout the academic year. Surveys for residents and fellows have been developed and will be administered in Spring 2022.