

# Implementing Mental Health Screenings in a University-Affiliated Community Pharmacy: A Description of Process

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#### BACKGROUND

- Mental health is poorly understood by the general public and many healthcare providers
- Depression affects about 17% (54 million in US) in their lifetime
- Highly Stigmatized
- Associated with low rates of utilization of care<sup>1</sup>
- Demand for psychiatrists is estimated to exceed the supply by 6,090 to 15,600 by 2025<sup>2</sup>.
- Pharmacists
  - Among the most highly respected health care providers
- Have the highest frequency of contact with the public
- The PHQ-2 and PHQ-9 are validated tools commonly utilized to screen individuals for symptoms of depression
- Community Pharmacists are a valuable resource
- Opportunity to screen patients while picking up their prescriptions
- When trained in Mental Health First Aid (MHFA) provide a readily available community resource to increase screening for mental health problems
- Identify available treatment resources

### **OBJECTIVES**

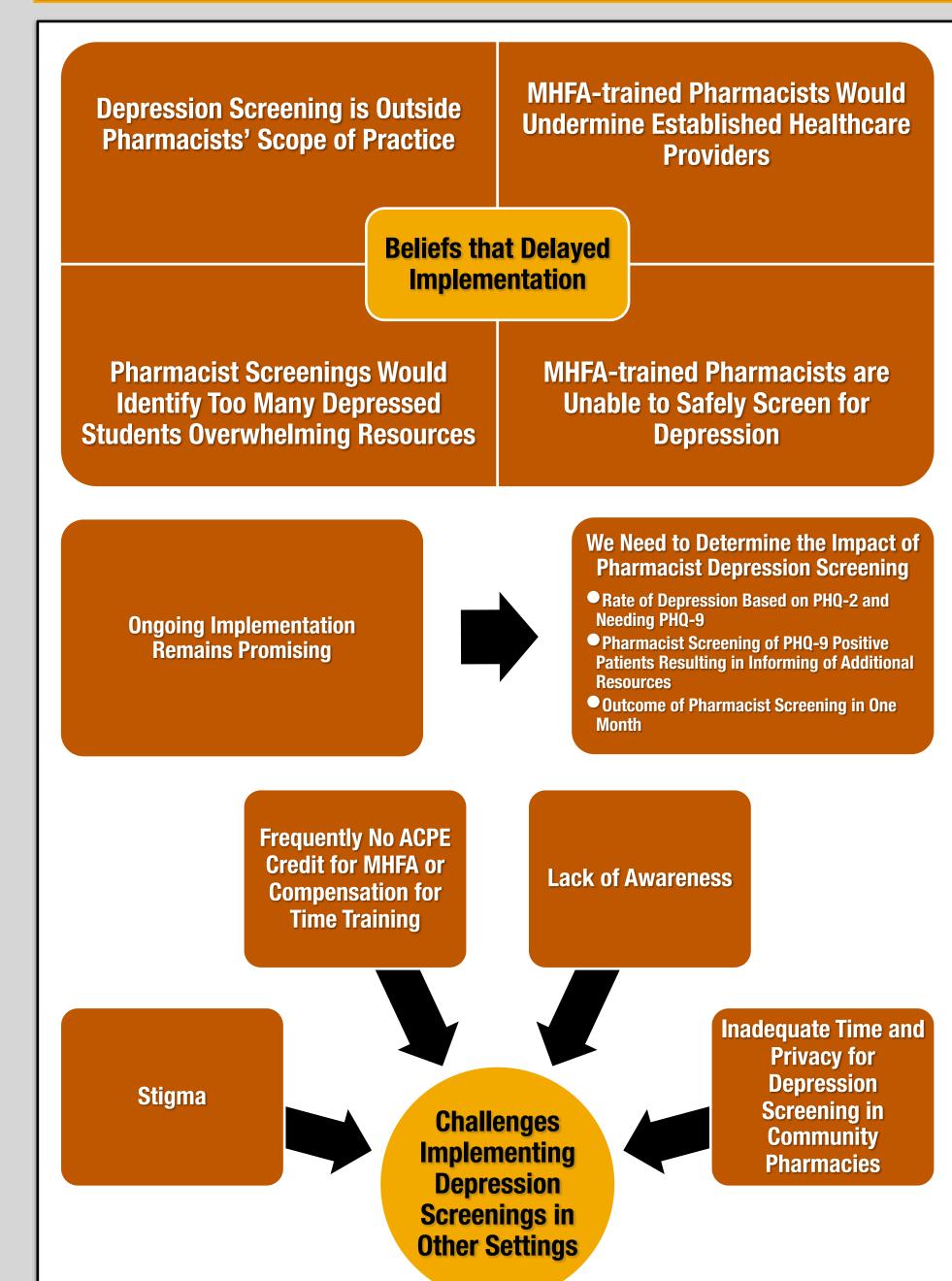
- Implement a new service in an existing campus pharmacy to screen for depression and identify treatment resources
- Identify campus and local resources equipped to manage both low-risk and high-risk cases of depression
   Demonstrate feasibility of a community pharmacy-based depression
- screening
- Measure the rate of identifying depression and providing resources for patients with MHFA-trained pharmacists

#### **METHODS**

- Four UT pharmacy students received MHFA training through Integral Care and collaborated with UT Austin's Forty Acres Pharmacy (FAP) administration to coordinate MHFA training for pharmacists
- FAP workflow was modified to incorporate depression screening
- FAP is an ideal setting to trial mental health screenings since it is in the Student Services Building, with the Counseling and Mental Health Center, Women's Health Clinic, Urgent Care, and General Medicine Clinic
- A task force composed of university-affiliated medical and mental health stakeholders, including a board-certified psychiatric pharmacist, was developed to ensure a unified message to students, staff, and faculty and to minimize duplication of services

# **METHODS Mental Health** Resources **Pamphlet** PHQ-2 / PHQ-9 Recommended Screening **Pharmacist** Algorithm and Guidance Software Resources Developed ease give tablet back to cashier "Can you fill out Patient in check out line Complete purchase complete transaction and refer to we get your harmacist (or PharmD student) for counseling on their med referral to a mental healthcare provider? currently seeing a Please give tablet back to Question 1: nental healthcare Give tablet; begi cashier" Cashier instruction direct to MHFA trained pharmacist for ychiatrist, etc.) at information/referral Thank you for taking this over to the cashier." Cashier instructions: refer to MHFAtrained pharmacist for mental ealth management, evaulate need for 911 or referrall hank you for taking this survey lease turn the tablet over to the to MHFA-trained pharmacist for mental health crisis management evaluate need for 911 or referral

# DISCUSSION / IMPLEMENTATION



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#### REFERENCES

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Marlena Birkel, Pharm.D. Candidate 2019, Brian Frescas, Pharm.D. Candidate 2019, Brian Olivares, Pharm.D. Candidate 2019: None.

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