

Background

Patient-Centered Medical Home (PCMH)

A model of health care that aims to improve the entire healthcare delivery system by restructuring how primary care is organized and delivered. The PCMH model is a team-based approach to health care delivery focused on coordination of care with an increased emphasis on prevention and general wellness. Research shows that the PCMH model can reduce costs while providing a higher quality of care to patients.¹

Plumley Village Health Services

A PCMH-certified outpatient clinic in Worcester, MA. It is part of the larger UMass Memorial Health Care system. The clinic offers bilingual health care services to low-income residents living in nearby Plumley Village housing and the surrounding neighborhood.

Focus Population

The population of interest includes Hispanics, non-Hispanic blacks, and non-Hispanic whites with a history of depression. Previous studies have shown that minorities are less likely to receive primary cancer screenings for early detection of breast, cervical, and colorectal cancers compared to non-Hispanic whites.^{2,3,4} This has resulted in an increase in cancer related deaths in these populations.^{2,3} Since race, gender, and low income are just a few of the significant risk factors for depression,⁵ it becomes all the more imperative to understand the relationship between depression and barriers to health care, and how it affects a patient's access to routine cancer screenings.

Aims

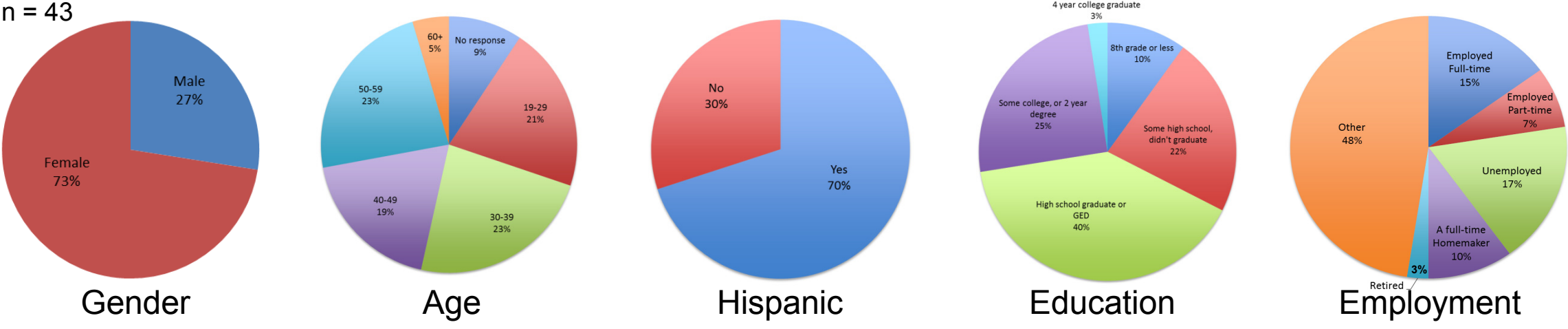
- To determine rates of cancer screening tests among patients with depression
- To determine the barriers that prevent patients from receiving mental health care and cancer screenings

Methods

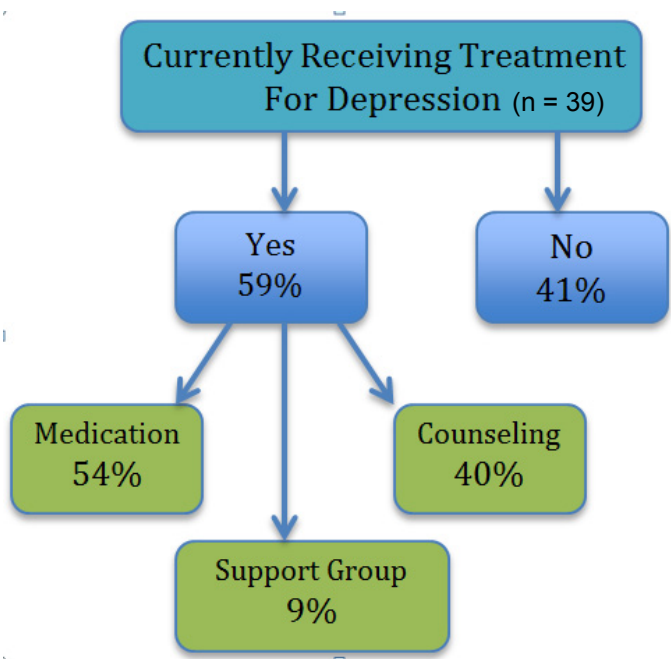
A survey including questions about general health, depression, and relationships with medical providers was administered to patients of Plumley Village Health Services with diagnosed depression. Eligible patients were identified in two ways. First, patients with clinic appointments were identified by primary care providers and approached by the front office staff at check-in. Second, patients were identified from the clinic's Depression registry and contacted by researchers by telephone.

Results

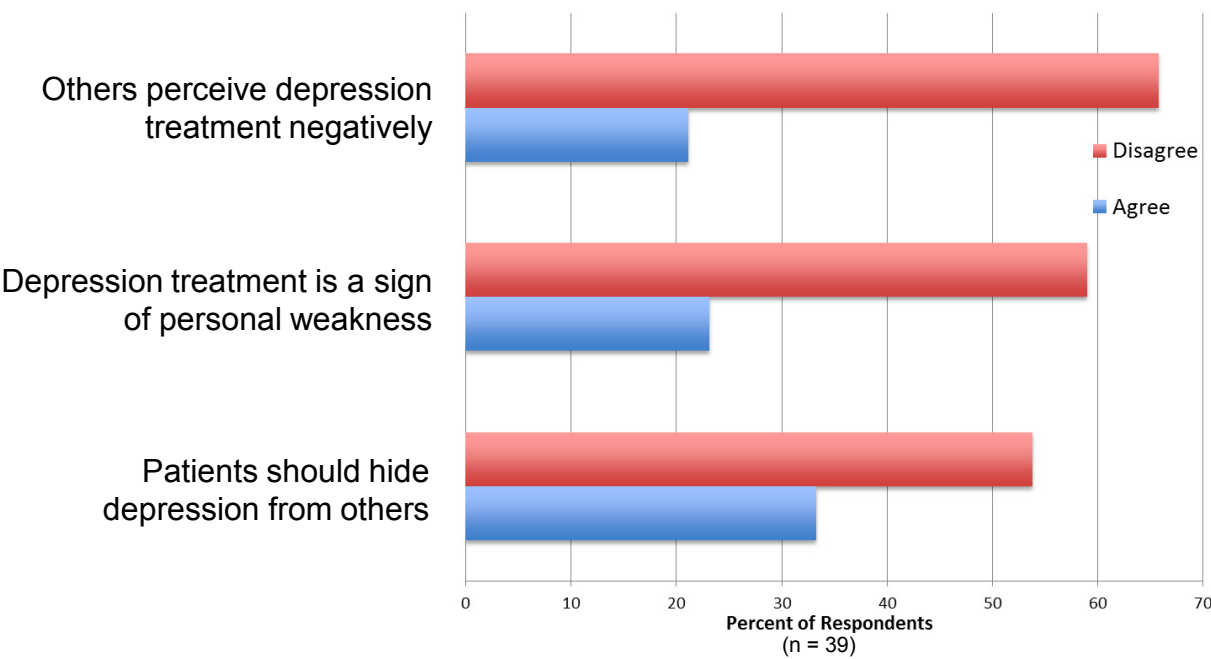
Demographics



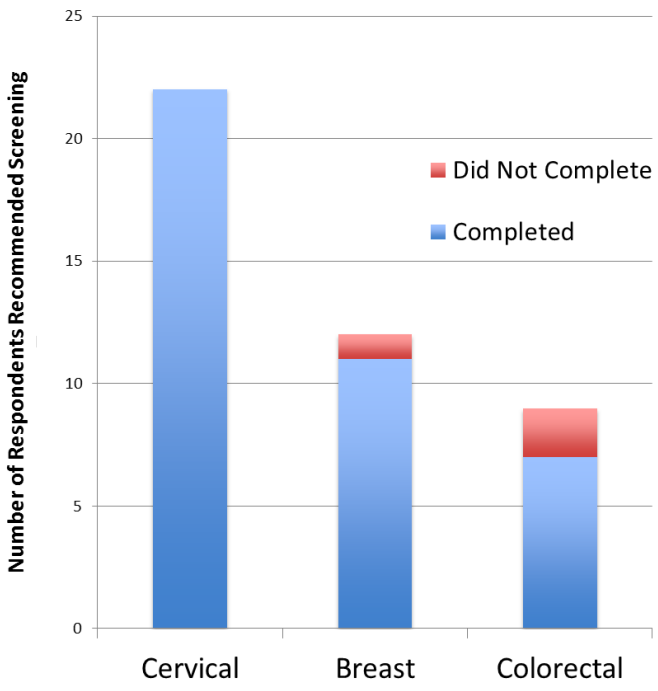
Depression Treatment



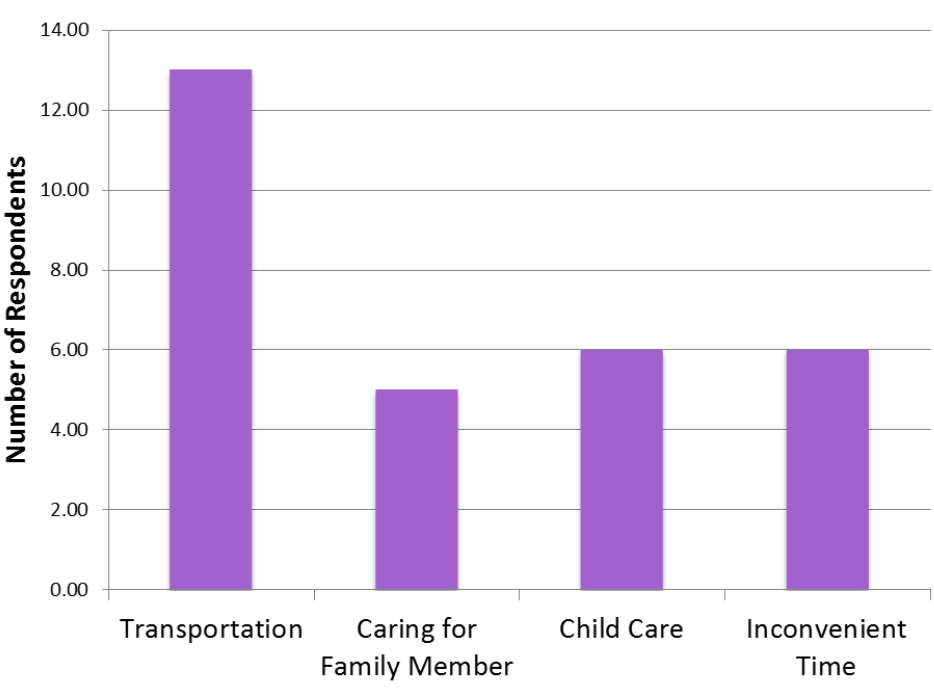
Patient Perceptions of Depression



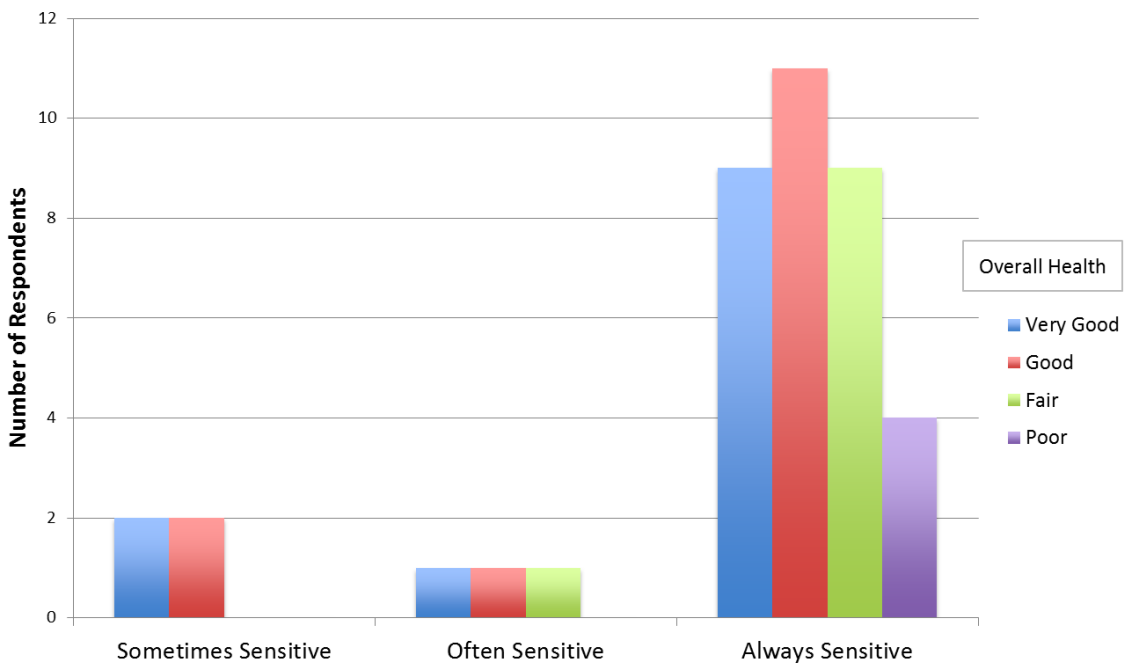
Primary Cancer Screenings



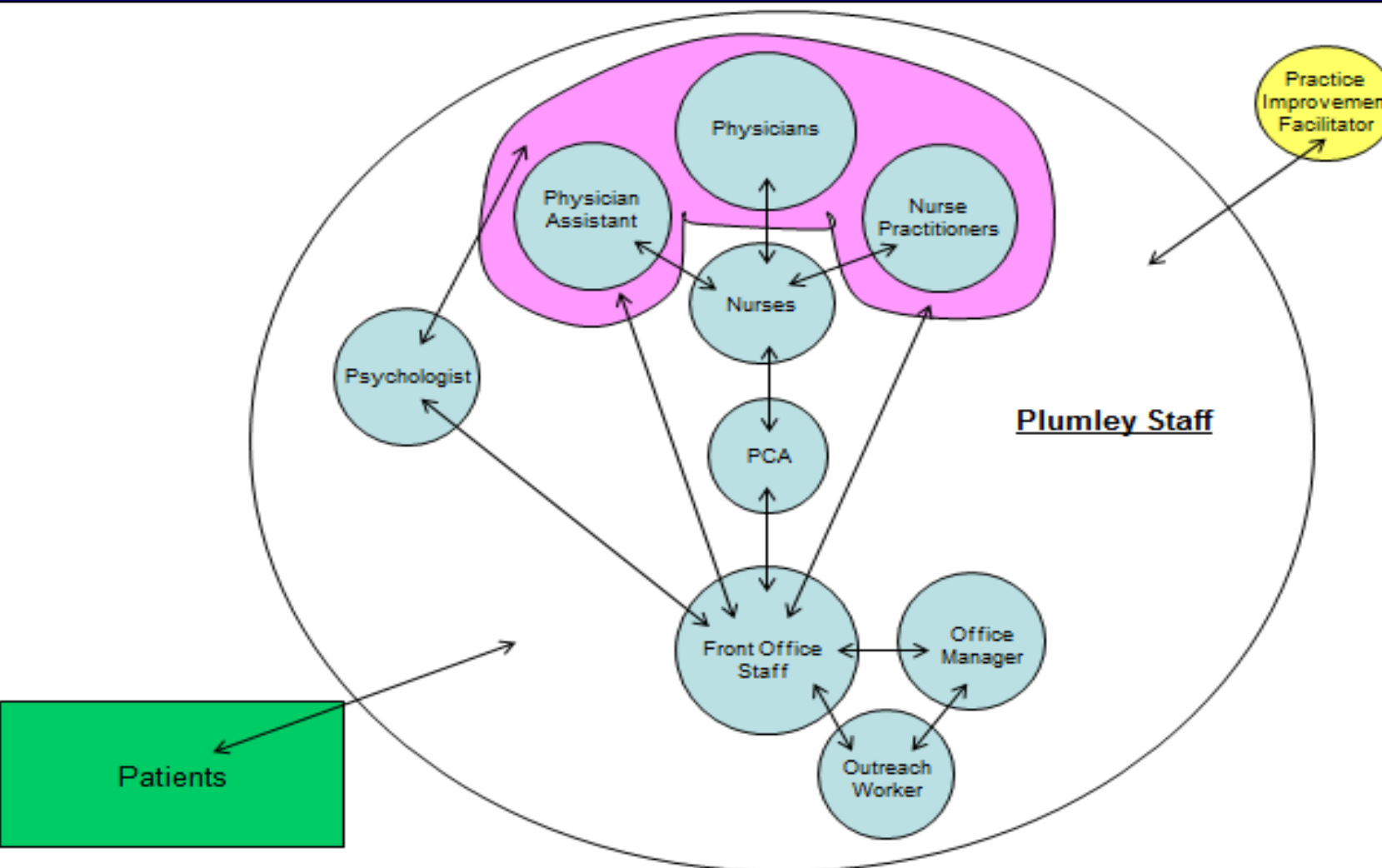
Reasons for Missed Appointments



Patient Perceptions of Health Care Provider's Sensitivity to Emotional or Mental Health Concerns by Self-Reported Health Status



Inter-professional Network



Conclusions

- Only 59% of patients with diagnosed depression were currently receiving treatment for depression. Of these patients, 54% were taking medication, 40% were receiving talk therapy, and 9% were attending support groups.
- All patients with depression referred for a Pap smear completed the exam.
- Majority of patients surveyed completed mammograms and colon cancer screenings; however, the small sample size should be noted - a larger sample size is needed in order to draw more definitive conclusions based on this population.
- 33% of patients surveyed stated problems with transportation as an important factor for NOT receiving needed health care.
- Future research is needed to explore ways to reduce transportation, language, and insurance barriers to health care, particularly for patients who missed cancer screenings.
- Further patient education may be needed in order to reduce fear associated with cancer screenings.

Acknowledgements

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References

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- <http://minorityhealth.hhs.gov/templates/content.aspx?lvl=2&lvlID=51&ID=2826>
- <http://minorityhealth.hhs.gov/templates/content.aspx?lvl=2&lvlID=53&ID=3055>
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