Behavioral Consultation and Primary Care: A Guide to Integrating Services
by Patricia J. Robinson and Jeffrey T. Reiter
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The concept of integrating behavioral health into the primary care (PC) setting is not new but only recently have various models and structures for doing this been better defined. This book describes one of these models, Primary Care Behavioral Health (PCBH). PCBH works to provide timely and evidence based consultation to Primary Care Providers (PCP) through the use of Behavioral Health Consultants (BHC). The argument is PCBPs are increasingly treating not only medically indicated illnesses but also mental health related illnesses ranging from Generalized Anxiety Disorder to Bipolar Affective Disorder. Referrals to mental health services often do not work for a variety of reasons. PCPs need partners to help them provide comprehensive care and the BHC is that partner.

The authors present a strong case to adopt this new model of comprehensive care. Robinson and Reiter are psychologists who worked previously in specialty mental health care settings. Currently, they are practicing as integrated BHCs within the parameters of the PCBH model. Their staunch academic and professional experience allows them to write from a strong scientist-practitioner perspective. Their individual levels of experience differ from each other. Robinson worked for almost 10 years as a BHC in a large clinic while Reiter is a self-proclaimed "neophyte" working in a smaller clinic. This combination of experience works well as it allows the reader insight from the perspectives of both a seasoned veteran as well as someone newer to the field of PCBH. As stated by the authors, this book was created not only to provide a book that is readable and enjoyable but also one full of practical ideas. They have clearly hit their mark.

The word that comes to mind when reading this book is "comprehensive." I am a practicing BHC, myself, working in the PC setting. Over the past four years, I have been part of the nascent phases of two different integration processes. My current position was started from the ground up. If I had one wish at the onset of this start-up endeavor, it would have been to have had this book as a resource. There is no doubt that it would have reduced the amount of arduous discovery along the way. If your axiom is "work smarter not harder," this book should surely be in your array of valuable resources.

The book is organized into six parts. Part I provides a detailed introduction to the concept of PCBH and a rationale for its existence. Robinson and Reiter proffer an exacting rationale for the need of a more comprehensive approach to patient care. This section continues with an explanation of the PC mission as well as an overview of the PC setting, including providers, management, and support staff roles.

Part II addresses the BHC role in a more detailed manner. First, attention is paid to the BHC job description, core competencies, training, supervision, and finally how to interview for a new BHC position. This section continues with a talk about billing options; which many would agree is a core issue—can we bill for this type of service?

In Part III, the authors address different theoretical models and therapeutic approaches that work best within PCBH model. Insight into issues regarding how medicine has been practiced in the past, as well as practical solutions to the current health care conundrum, are discussed next. This section continues with the explanation of different BHC interventions and therapeutic approaches. Supplied here is a diverse array of assessments and screens
ranging from depression to eating disorders.

Part IV, begins with detailed outlines and explanations of typical patient consultations, exam room interactions, and follow-up sessions. The start-up process is explained, and the authors provide an explanation of how the new BHC can best compliment the PCP. Here, Robinson and Reiter provide support for how the interaction between PCP and BHC is paramount to patient care. The chapter continues by explaining the process of teaching the PCBH model to the PCPs and other interoffice members, such as administrators and support staff. This section ends with tips on how to troubleshoot and overcome specific barriers one might face in starting up an integrated PCBH practice.

The authors dub Part V as the "core" of the book. They delve into the art of consultation itself. Covered are case examples of consultation approaches with youth and families, adults, and older adults. Although the examples address specific issues, they can be interpreted broadly enough to provide a very thorough look into most issues the BHC may face.

In the last section of this book, Part VI, the authors invite you to enter "uncharted territory." They discuss challenging moments like the misuse of prescription medications, resolute biomedical oriented PCPs, psychiatric emergencies, and common ethical issues. The most common ethical issues like confidentiality, informed consent, and record reporting are reviewed.

This book also has a reference section, an appendix with numerous handouts, resources and consultation tips, and a CD ROM. The CD ROM contains patient handouts and practice tools in PDF format.

There were a few sections of this book that presented as a bit tedious. I quickly realized, however, that this was related to lessons about: the PCBH model that I had already learned . . . the hard way. As mentioned early, the comprehensive nature of this book is stellar. Whether you are in the nascent phases of a start up integrated system or have been practicing in a PCBH model for years, this book has something to offer you.

This book was designed with more than just the BHC in mind. The authors have a deep understanding of the PCP role and know that with all change there is at least some resistance. Furthermore, this book offers instruction and insight into integrating all members of the team ranging from PCPs to billing professionals. It is most important to note that the authors promote a new model of health care without blaming the existing one. They describe a system that is broken but do not waste energy on pointing fingers. Instead they quickly segue into the Now What and proceed from there. From budding BHC to seasoned PCP, this book is a must read for any professional wishing to offer a higher level of patient care.

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