

Integration of Family Medicine and Behavioral Health at the Chanda Center for Health, an Integrative Clinic for People with Spinal Cord Injuries

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Background: The standard model of care, a primary care provider with dispersed specialist referrals, often fails to meet the complex needs of individuals with spinal cord injury (SCI). Co-locating family medicine, behavioral health, and integrative medicine provides an innovative solution.

Objective: To examine participant and provider experiences at the Chanda Center for Health (CCFH), which provides integrated primary care and integrative medicine services for individuals with SCI. We compared characteristics and outcomes for people with SCI at CCFH and at non-SCI-specialized medical homes.

Methods: Quantitative analysis was performed on data from patients with SCI seen at Denver Health for traditional primary care services and those seen at CCFH for integrated primary care. Primary outcomes were emergency department visits, opioid prescription counts, and hospitalizations. Secondary outcomes were PHQ-4 scores, psychiatric diagnoses, and primary care visits. We conducted semi-structured qualitative interviews with 12 participants and 5 providers and applied an inductive and deductive coding approach guided by thematic analysis.

Results: The CCFH group was significantly different in race and proportion of English as primary language. The non-CCFH group had significantly more primary care visits, emergency department visits, and hospitalizations. No significant difference was found in the number of opioid prescriptions, psychiatric diagnoses, or PHQ-4 scores. Participants were grateful to access primary care in the same location as integrative services and reported improved quality of life.

Conclusions: This model is an innovative approach to care in a population with unique needs. Integration of a family physician at the CCFH is perceived positively by participants and providers, though increased collaboration is desired.