**[Yesenia Llera](https://ashford.instructure.com/courses/86523/users/44544" \o "Author's name) post to week 2 discussion one**

Health care teams can achieve therapeutic goals for individual clients by properly communicate amongst each other (Babiker et al., 2014). This type of team includes a variety of multidisciplinary healthcare providers that play a vital role in the patient’s intervention. Their purpose is to use the providers’ integrated skills to accommodate to the patient’s needs and offer the most relevant collaborative treatment plan that will help them as a whole. The use of a collaborative healthcare team ultimately provides the patient with an all-inclusive service to meet their unique needs without the hassle of having to go to several outside professionals for additional treatment options.

Health literacy is “the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions" (Agency for Health Care Research and Quality, 2011, p. ES-1). With this being said, it is important to be aware of possible factors that can affect the patient’s ability to comprehend their health issues. Some of these factors include language barriers, cultural background, time constraint, educational background, the patient’s state of mind, and communication skill of the healthcare professional, just to name a few. Running the risk of having a patient have a lack of health literacy can cause misunderstandings on treatment options and on how they need to take medications if applicable. Both integrative care (IC) and collaborative care (CC) offers treatment options to treat the person as a whole. By using this method, it creates an environment of cultural competency that in return meets the needs of a more diverse group of patients. Therefore, IC provides effective method of communication regardless of the level of health literacy, and it creates various plans to improve the level of care for those who have a hindered health literacy (Ridpath et al., 2012). To create a supportive health literacy environment, health care teams have several strategies in anticipation of any level of health illiteracy in the form of further education, cultural competency, and communication/interpersonal skill trainings. By training the staff that will be participating in the health care teams, it will prepare them with health literacy in regard to policies, procedures, and the organization’s culture in general.

A main factor that may lead to the failure of the CC/IC delivery model can be the lack of communication skills between the health care team (Kelly & Coons, 2012). Lack of training for staff can also play a vital role in a failed delivery model. It is important that all participants are on the same page and thoroughly understand their role within the treatment plan. Additionally, having a difference in the culture of clinical medicine, high patient intake with time constraint, confidentiality, and poor time management or lack of control as to when to see patients can also contribute to failure (Kelly & Coons, 2012).

The lack of acceptance or support by stakeholders will cause a problem in the implementation of the model. The insurance and pharmaceutical companies’ goal are to maximize their overall wealth. The employer’s goal is also to make money, but health insurance is a benefit to their employees but not necessarily profitable for them. While mental health professionals receive compensation for their job, their main focus is to provide adequate care to their patients as well as, to attempt to control the high cost of healthcare. Patients also have the responsibility to stay on top of their health and to stay insured in order to avoid a high treatment bill. In regard to an educational setting “most university health clinics provide services to students using a general health fee that is wrapped into their tuition, eliminating difficulties with insurance claims” (Funderburk et al., 2012, p. 131). When the support of the factors mentioned are nor there, it will cause a deduction of coverage as well as, a financial tension on any reimbursement expected by insurance companies.  Therefore, it is important for the stakeholders to be informed on the value of the model before implementation to avoid having it fall apart midway through.

There are several ethical issues involving this treatment plan and making sure that every provider involved is competent and informed consent should always happen first before any form of treatment. In Section 3.07 of the APA's *Ethical Principles of Psychologists and Code of Conduct*, “When psychologists agree to provide services to a person or entity at the request of a third party, psychologists attempt to clarify at the outset of the service the nature of the relationship with all individuals or organizations involved. This clarification includes the role of the psychologist (e.g., therapist, consultant, diagnostician, or expert witness), an identification of who is the client, the probable uses of the services provided or the information obtained, and the fact that there may be limits to confidentiality” (2010, para. 7). With that being said, the patient should be aware of the limits of confidentiality that come with having so many parties involved. The patient should know what type of information will be shared and with whom. When working with medical professionals, they should abide by HIPPA laws to protect the patient’s privacy of their medical records (Office for Civil Rights, 2020). They cannot share the patient’s medical results or information unless they have a signed medical release form.

**References:**

Agency for Health Care Research and Quality (AHRQ). 2011. [Health Literacy Interventions and Outcomes: an Update of the Literacy and Health Outcomes Systematic Review of Literature, 2011 (Links to an external site.)](http://www.ahrq.gov/downloads/pub/evidence/pdf/literacy/literacyup.pdf)

American Psychiatric Association. Diagnostic and statistical manual of mental disorders, fifth edition (DSM-5). Washington DC: APA; 2013.

Babiker, A., El Husseini M.E., Al Nemri, A., Al Frayh, A., Al Juryyan, N., Faki, M.O., Assiri, A., Al Saadi, M., Al Zamil, F. (2014). Health care professional development: Working as a team to improve patient care. Sudan J Paediatr 2014; 14(2):9-16

Funderburk, J. S., Fielder, R. L., DeMartini, K. S., & Flynn, C. A. (2012). [Integrating behavioral health services into a university health center: Patient and provider satisfaction](https://ashford.instructure.com/courses/86523/external_tools/retrieve?display=borderless&url=https%3A%2F%2Flibrary.ashford.edu%2FAccount%2FLtiLogin.aspx%3Fcustom_redirectresource%3Dhttps%3A%2F%2Flibrary.ashford.edu%2Fezproxy.aspx%3Furl%3Dhttp%253A%2F%2Fsearch.ebscohost.com%2Flogin.aspx%3Fdirect%3Dtrue%252526AuthType%3Dip%2Ccpid%252526custid%3Ds8856897%252526db%3Dpdh%252526AN%3D2012-12934-001%252526site%3Dehost-live). *Families, Systems, & Health, 30*(2), 130–140. doi:10.1037/a0028378

Kelly, J. F., & Coons, H. L. (2012). [Integrated health care and professional psychology: Is the setting right for you?](https://ashford.instructure.com/courses/86523/external_tools/retrieve?display=borderless&url=https%3A%2F%2Flibrary.ashford.edu%2FAccount%2FLtiLogin.aspx%3Fcustom_redirectresource%3Dhttps%3A%2F%2Flibrary.ashford.edu%2Fezproxy.aspx%3Furl%3Dhttp%253A%2F%2Fsearch.ebscohost.com%2Flogin.aspx%3Fdirect%3Dtrue%252526AuthType%3Dip%2Ccpid%252526custid%3Ds8856897%252526db%3Dpdh%252526AN%3D2012-33696-001%252526site%3Dehost-live) *Professional Psychology: Research and Practice, 43*(6), 586–595. Retrieved from [http://www.apa.org/pubs/journals/pro/ (Links to an external site.)](http://www.apa.org/pubs/journals/pro/)

Office for Civil Rights. (2020). *Your Rights Under HIPAA*. HHS.gov. Retrieved 22 June 2021, from [https://www.hhs.gov/hipaa/for-individuals/guidance-materials-for-consumers/index.html (Links to an external site.)](https://www.hhs.gov/hipaa/for-individuals/guidance-materials-for-consumers/index.html).

Ridpath, J. R., Larson, E. B., & Greene, S. M. (2012). Can Integrating Health Literacy into the Patient-centered Medical Home Help us Weather the Perfect Storm? *Journal of General Internal Medicine*, *27*(5), 588.

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