Introduction

The purpose of this leadership project was to conduct a needs assessment regarding provider satisfaction and patient care related to the integration of Pediatric Behavioral Health and Wellness (PBH&W) services within Pediatric Neurology. Feedback on Behavioral Health (BH) services were gathered from a survey originally created by Elyse Rosenberg, M.A. and Drs. Kenya Malcolm, Andrew Cohen, and Linda Alpert-Gillis for use in pediatric primary care.

Results will (a) determine if expansion of BH services in Pediatric Neurology would benefit both neurology providers and patients and (b) identify barriers impacting patient access to BH services.

PBH&W in Pediatric Neurology

In February 2017, Drs. Cohen and Hunt began seeing patients with chronic headache for CBT within the co-located Pediatric Neurology outpatient clinic at East River Road.

Patients attend 1-4 visits for headache-focused treatment. Patients who need additional BH services are referred to PBH&W Outpatient Services or another outpatient provider.

Also, Drs. Cohen and Hunt conduct warm handoffs (with patients) and curb-side consultations (with providers) regarding BH concerns.

Survey Specifics

The survey included 10 categories on a 5-point Likert scale.

We distributed the survey to 20 neurology providers at the co-located Pediatric Neurology outpatient clinic at East River Road.

75% of providers completed the survey: 7 Attending Physicians, 6 Nurse Practitioners, 2 Neurology Residents.

Among respondents, 9 providers referred at least 1 patient to the BH service in Pediatric Neurology, and 6 providers had not.

“Overall, behavioral health services can be an extremely effective complimentary treatment approach to our neurologic patients with co-occurring anxiety, depression, OCD, ADHD, etc.”

Provider Perspective on Helpfulness of BH Services

When involved, BH services have been: “Helpful” or “Very Helpful”

For the patient 
93%

For the family 
93%

For the neurology provider 
93%

Provider Satisfaction with Integrated BH Services

Neurology providers are satisfied with: “Agree” or “Strongly Agree”

BH providers’ engagement (e.g., courteous, pleasant, genuinely interested in helping) 100%

BH providers’ ability to communicate with Pediatric Neurology team members 100%

Quality of services provided by BH providers 93%

Overall BH services in Pediatric Neurology 93%

BH services meeting the needs of families 79%

Areas for Expansion

Adding BH Services for Other Neurological Conditions

I=Not at all helpful, 5=Extremely Helpful

1=Obsessive compulsive disorder (OCD) (m=4.92)
2=Attention-deficit/hyperactivity disorder (ADHD) (m=4.58)
3=Tic disorders (m=4.55)
4=Epilepsy/Seizure disorder/Pseudoseizure (m=4.50)
5=Pain disorders (m=4.45)
6=Brain tumor (m=4.33)
7=Movement disorders (m=4.33)

“I have not utilized this service as much because I see less headache than others. I would increase utilization significantly if services were available for tics/anxiety/OCD and pain disorders.”

Implications

Current State of Affairs

Neurology providers indicated a significant amount of satisfaction related to the work BH providers are doing directly with patients and the consultation that occurs with providers.

Lower satisfaction ratings were noted from providers who had not referred patients to the BH service, which may indicate that the majority of their patients did not meet acceptance criteria for the service (e.g., patients who do not present with headache).

Although providers noted some barriers to utilizing the BH service for themselves and their patients, average scores for many of those barriers indicate that providers experience mostly slight-moderate barriers and patients experience mostly moderate barriers.

Possible Changes to Improve the BH Service

Expand BH treatment to additional disorders listed above.

Provide more education regarding how to contact a BH provider.

Expand the amount of time BH providers are in Pediatric Neurology, both to decrease patient wait time for a BH appointment and to increase availability for Neurology providers to receive BH consultation.

Acknowledgments

Thank you to Pediatric Neurology providers for their collaboration on integrated care, as well as providing valuable feedback about the current BH service and opportunities for expansion. Also, I’d like to thank the Psychiatry Education Committee for their financial support.