

Behavioral Health & Wellness Needs Assessment for Outpatient Pediatric Specialty Clinics



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Introduction & Objectives

As many as 10 to 20% of children meet criteria for a mental health disorder (Kazak et al., 2008), but of those meeting diagnostic criteria, only 20 to 30% receive specialty mental health services each year (Kataoka, Zhang, & Wells, 2002). In addition, as many as 50% of children in the U.S. have had at least 1 chronic condition within a 6-year assessment period (Van Cleave et al., 2010). Further, pediatric nonadherence to medical treatment has been shown to be as high as 50% for several chronic conditions (e.g., asthma, diabetes), which indicates "many pediatric chronic health conditions are undertreated relative to recommended standards of medical care" (Kahana et al., 2008, p. 590).

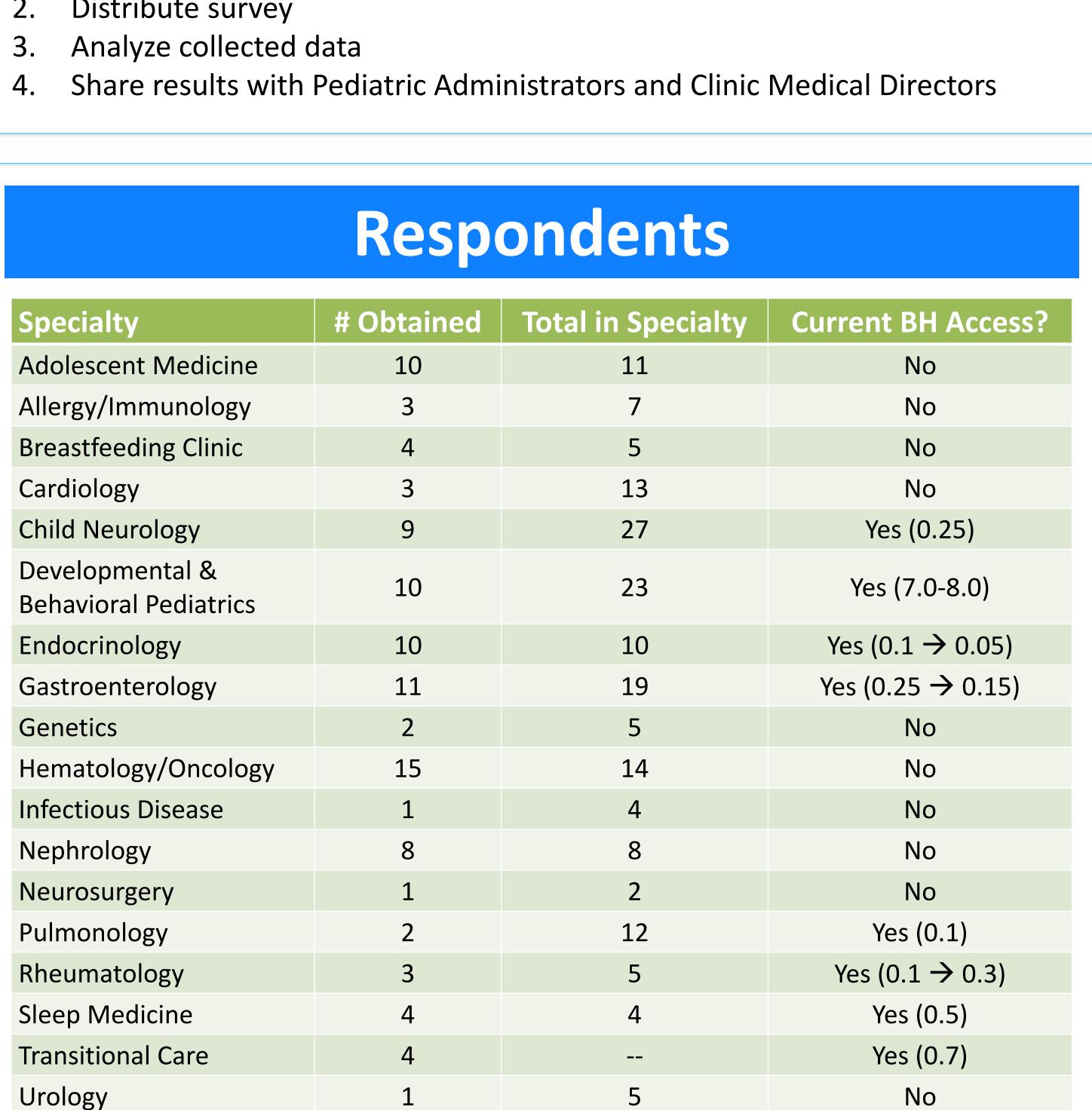
It is clear that Pediatric Behavioral Health integration is in demand. Integration within Specialty Clinics provides opportunity to reduce barriers to accessing mental health care, can help reduce mental health stigma, can help improve continuity of care rendered, and most importantly can help increase medical effectiveness through utilization of a true biopsychosocial model of care.

Project Objectives:

- Develop a survey to assess the needs of Behavioral Health Consultation and Psychiatric Medication Consultation across UR Medicine Outpatient Pediatric Specialty Clinics
- Distribute survey

Other

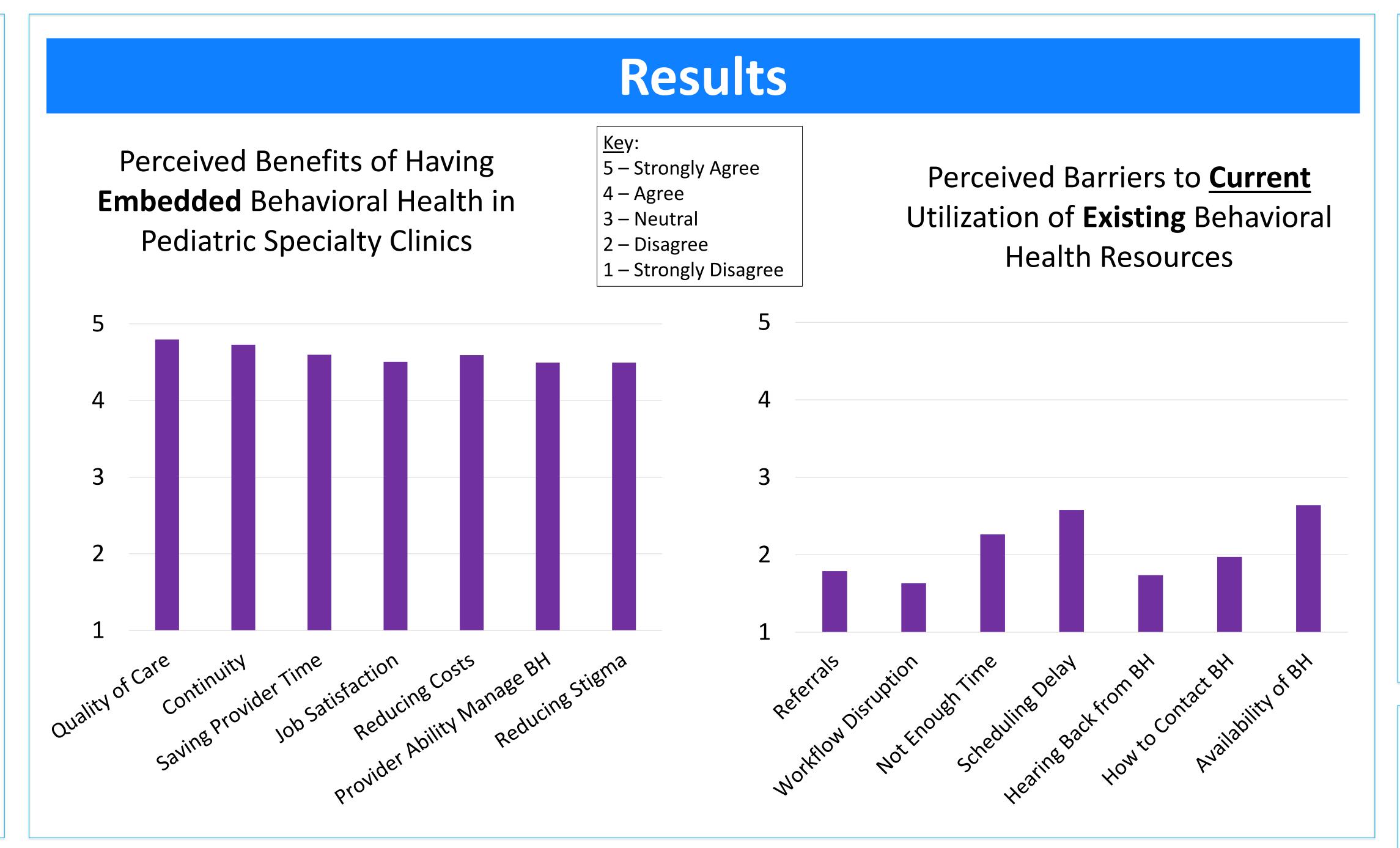
Grand Total

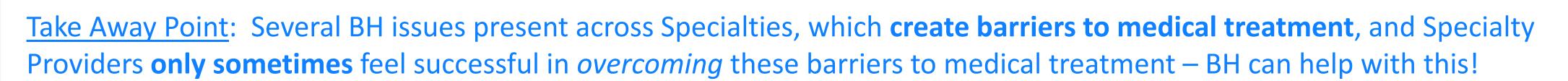


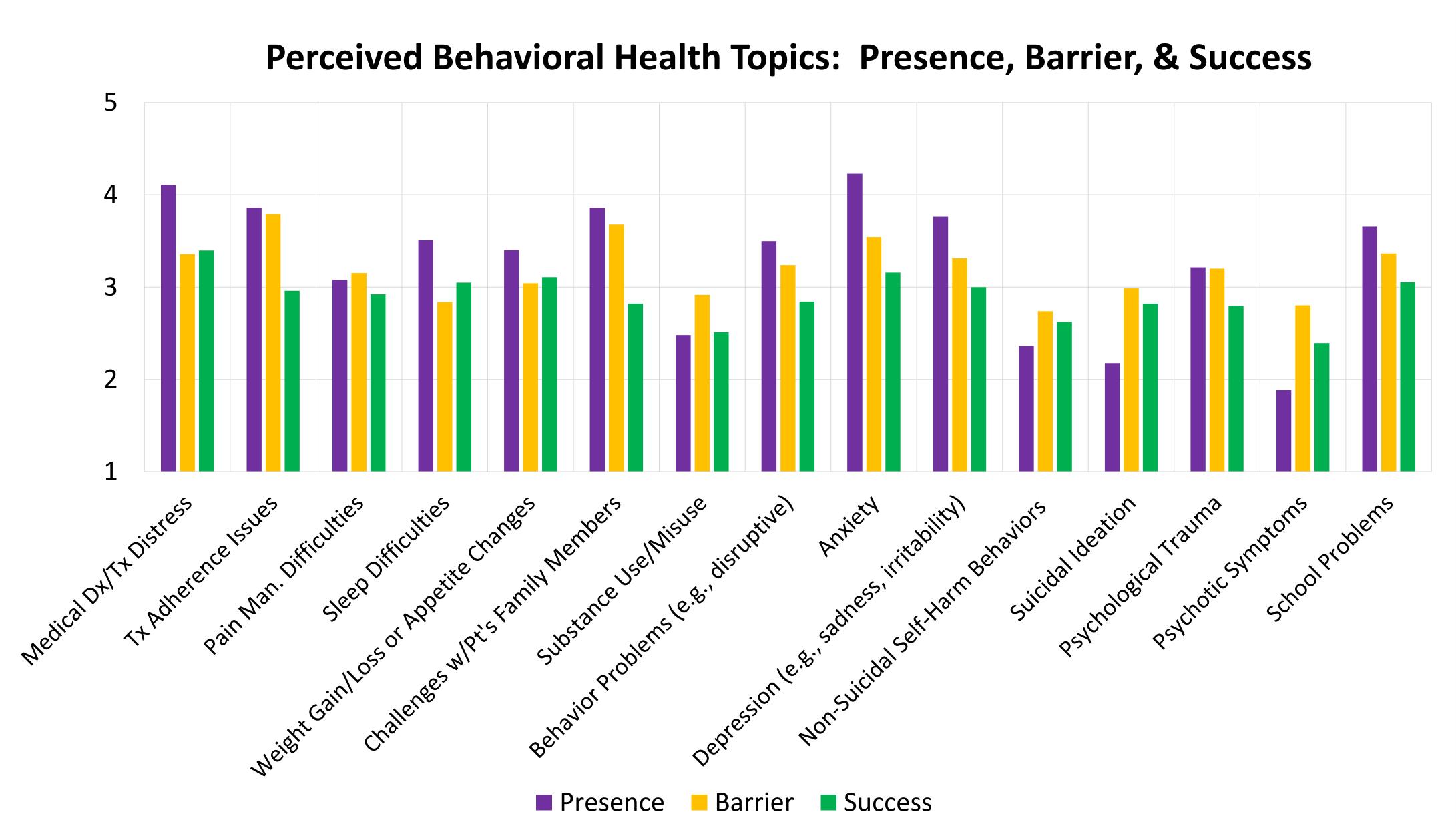
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Qualitative Feedback

Increased Access

• "It would decrease the stigma and just be a 'standard part of therapy.' Many parents want Mental Health [services] for themselves or their kids, but it's 'just one more place to go,' 'one more appointment,' or their teen refuses. If a Mental Health provider was in our clinic it would be easier to get teens, especially, to engage and less of a burden on families who already have a multitude of appointments."

Improved Efficiency

- "The behavioral health specialists in our clinic are crucial to our efficiency and the comprehensive care we can provide." (Sleep Medicine)
- "Patients can have their psychiatric problems appropriately assessed and treated in a reasonable timeframe."

Quality Patient Care

• "The mental health problems of our patients, their siblings, and parents are STAGGERING. It is a huge unmet need and we desperately need a mental health expert embedded in some of our busier clinics."

Proposed Blended Model to Pilot

Psychology

- A. Embedded Clinician
 - Dedicated clinician for designated clinic sessions
 - Consultation, assessment, treatment, & referrals
 - Collaborative relationship building between Psychologist and Medical Providers
 - Linked appointments and warm handoffs
- B. Centralized Resource
 - Psychologist with on-call availability for provider consultation
 - Availability for psychologist to schedule follow-ups for patients seen for consultation
- C. Participation in identified division activities for training/relationship building, as schedules permit

Psychiatry

- A. Project TEACH medication consultation and referrals
- B. Psychopharmacology training and education to identified Behavioral Health champions with co-occurring relationship building
- C. Expedited outpatient psychiatric consultation

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