

Preliminary Outcomes from an Integrated Pediatric Mental Health Outpatient Clinic



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KEYWORDS

- Integrated mental health • Emergency department utilization
- Mental health services • Access • Child • Adolescent

KEY POINTS

- Although 1 in 5 children in the United States meet criteria for a diagnosable mental or behavioral disorder, fewer than 20% receive needed mental health services.
- Unmet needs for psychiatric treatment may contribute to increased use of the emergency department (ED) and those with behavioral and psychiatric problems are at an increased risk of ED return.
- Strategies aimed at facilitating continuity of care between ED and outpatient care settings may lower rates of ED visits among pediatric patients.
- This article describes an integrated pediatric evaluation center designed to prevent treatment in the ED by increasing access care for emergent and critical mental health needs.

INTRODUCTION

An estimated 1 in 5 children in the United States meet criteria for a diagnosable psychiatric or behavioral disorder.^{1,2} Yet fewer than 20% of these children receive needed mental health services, and even fewer are able to access appropriate, evidence-based care.³ Limited access to mental health care has been characterized by a decrease in the number of inpatient beds and a scarcity of outpatient resources available for children and adolescents.⁴ As a result of this reduced capacity within the

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Abbreviations	
ED	Emergency department
FTE	Full-time equivalent

existing mental health service system, the emergency department (ED) is increasingly used to address pediatric mental health needs.^{5–7}

Unmet need for psychiatric treatment may contribute to increased use of the ED for both medical and mental health concerns. Among children and adolescents who present to the ED, those with behavioral and psychiatric problems are at an increased risk of repeated admissions to the ED.^{5,8,9} After discharge, up to 36% of children with psychiatric illness return to the ED within 72 hours,⁹ and approximately 50% return within 2 months.^{10,11} Many presentations among return ED users represent an exacerbation of a chronic psychiatric disorder.^{10–12} These patterns of repeated use of the ED, particularly among high-risk children and adolescents with psychiatric conditions, may be related to a variety of factors, including limited or insufficient community mental health resources, lack of insurance coverage, and other barriers to care.

Strategies aimed at facilitating continuity of care between the ED and outpatient care settings may lower rates of ED visits among pediatric patients.¹³ Providing patients who are seen in the ED with outpatient appointments before discharge, for example, significantly improves adherence to follow-up care plans, as compared with patients who are given standard discharge instructions.^{14–16} Thus, by improving linkages to appropriate mental health services, repeat ED visits may be reduced.

The current article describes an integrated pediatric evaluation center designed to prevent the need for treatment in emergency settings by increasing access to timely and appropriate care for acute mental health needs. The Evaluation Center was developed to address the following goals:

1. Identify youths who could be diverted from the ED by providing clinically informed triage services and enhancing outpatient capacity for urgent assessments; and
2. Integrate mental health care between ED and outpatient care settings in an effort to reduce return ED visits.

METHOD

Evaluation Center Intervention

The Evaluation Center is an outpatient clinic that operates as the primary point of access for pediatric mental health services within a large academic medical center setting. The Evaluation Center is staffed by a multidisciplinary team that includes the following full-time equivalent (FTE) staff: 2.0 FTE licensed clinical social workers, 1.0 FTE licensed practical nurse, 0.4 FTE pediatric psychiatrist, 1.0 FTE nurse practitioner, and 1.0 FTE clinic coordinator. In addition to the permanent staff, the Evaluation Center provides training opportunities for psychiatry fellows and social work interns. The clinic includes an intake room, 2 medical examination rooms, 2 therapy rooms, a financial care counselor office, and a shared workspace for clinicians and the clinic coordinator. Access to translator services (in-person and phone) is available when needed.

The Evaluation Center operates as both a triage center and an outpatient mental health clinic. Referrals for new patient evaluations are received from the pediatric ED, pediatric specialty clinics, pediatric primary care, and the community (eg, community providers, agencies, schools, self-referrals). Consistent with the goal to facilitate

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