



# RI MomsPRN

**Maternal Psychiatry Resource Network**

PCMH KIDS QUARTERLY IBH MEETING

OCTOBER 14, 2021

**RI MomsPRN**

**401-430-2800**

A FREE PSYCHIATRIC TELECONSULTATION SERVICE FOR HEALTHCARE WORKERS

- ▶ **Providers** are welcome to consult with a perinatal psychiatrist or resource referral specialist via telephone, secure email, or EHR engagement. We welcome all providers, including physicians, NPs, social workers, midwives, and more.

#### Resource and Referral (Social worker)

- Triage and responds to calls, emails and EMR outreach
- Make connections to treatment and support services
- Schedule provider teleconsultation with perinatal behavioral health experts

#### Clinical Consultation (Psychiatrist and Psychologist)

- Same-day, provider-to-provider psychiatric teleconsultation services
- Diagnostic support
- Treatment planning
- Medication and dosage recommendations



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**[RIMomsPRN@CareNE.org](mailto:RIMomsPRN@CareNE.org)**

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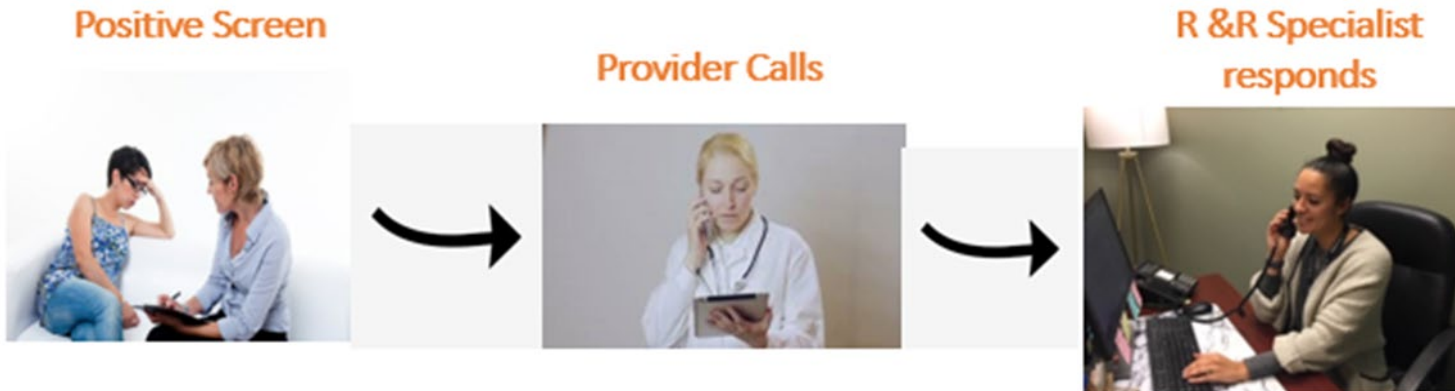
A FREE PSYCHIATRIC TELECONSULTATION SERVICE FOR HEALTHCARE WORKERS

- ▶ RI MomsPRN is your one-stop shop if you need to connect a perinatal woman to MH services
- ▶ Streamlines process of referring to Women's Behavioral Health

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# Teleconsultation Case Example

## Problem

Dad brought Pt in for 2wk Well Baby visit and completed EPDS, scoring 14. Mom is on bedrest recovering from traumatic birth and both partners are interested in MH supports.

## Action

Pediatrician calls MomsPRN 401-430-2800 requesting outreach to the parents of her infant patient.

Eva takes info and contact info for Dad.

## Result

Eva reaches out to Dad to provide info for individual therapists for both him and Mom

Eva provides info for new dads' support groups & "Healing From Traumatic Birth" therapy group for mom

# Teleconsultation Case Example

## Problem

18 yr. old patient comes in 3 mos. postpartum for annual Pediatric visit. Documented Hx Anxiety, Depression and ADHD, previously treated with Adderall and Sertraline several yrs. ago.

Pediatrician pages IBH clinician to whom Pt reports worsened anxiety pp, constant worries about baby's safety, not leaving house. Was meant to return to HS last week but has been oversleeping and feeling nervous to part with baby.

## Action

Pediatrician calls MomsPRN 401-430-2800 requesting guidance for initiating medication until Pt can be scheduled with IBH Psychiatrist

Eva takes initial info and transfers to Dr. Diaz

## Result

Dr. Diaz recommends trial of escitalopram 2.5mg nightly x4 nights, then up to 5mg at which point Pt will be seen at CWBH. Dr. Diaz recommended asking about fam Hx of Bipolar before starting SSRI and calling back as needed

Eva outreaches to Pt to describe Day Hospital program and facilitate intake appt

# Pediatrician Engagement

- ▶ **Currently Pediatric providers make up only 4% of our Teleconsultation utilizers – we want to increase this!**
- ▶ **Do you have ideas for spreading the word to pediatricians?**
  - ▶ Existing meetings or trainings?
  - ▶ Email listservs / digital engagement?
  - ▶ Large practices to target?

Thank you!



**401-430-2800**

**MONDAY – FRIDAY, 8AM –  
4PM**

**ERAY@WIHRI.ORG**

**RIMOMSPRN@CARENE.ORG**

**MHOWARD@WIHRI.ORG**

# PediPRN



Bradley Hospital

*Lifespan. Delivering health with care.®*

Empowering pediatricians to support children's mental health.

## RI's Pediatric Psychiatry Resource Network





## What is PediPRN?

- Designed to help pediatric primary care providers (PPCPs) meet the mental health care needs of their patients.
- PediPRN mental health consultation services are available to all PPCPs in RI at no charge.
- Located at Bradley Hospital
- Funding support:
  - Health Resources and Services Administration (Pediatric Mental Health Care Access) grant awarded in partnership with RIDOH
  - BCBS-RI
  - Bradley Hospital



## PediPRN GOALS

- Increasing PPCPs knowledge, skill, and confidence with addressing their patients' mild to moderate mental health conditions.
- Promote utilization of scarce specialty services (psychiatrists) for more severe and high-risk patients
- Support the integration of mental health care and pediatric primary care



## PediPRN Services

- Calls/consultation - 830am to 5pm weekdays
- Face-to-face assessments
- Website
- Office hours
- E-blasts/newsletters
- PIP (PediPRN Intensive Program)
- PIP Grad
- Resources/care coordination



## Common Consultation Questions

- **Diagnostic clarification**
- **Treatment planning**
- **Unable to access mental health resources**
- **Second opinion**
- **Screening support**
- **Medication Management – side effect, selection, dosage, etc.**
- **Psychotherapy – selection, linkage, monitoring**



## Why we provide resource services

- Primary care providers need access to resources and mental treatment services to recommend to their patients
- Addressing any barriers from the beginning can help with follow-through
  - Not having contact information can be the biggest barrier to patients and families engaging in treatment
- Resources are always changing
  - Community BH connections and co-located providers have limited time/resources to maintain resource lists
- Clinicians can help triage/tailor referrals and resource recommendations based on clinical judgement and expertise in efficacious treatments
- Integrated BH providers cannot be experts of all mental health conditions
  - Community connections and co-located providers cannot take everyone



## How does PediPRN fit into RI's mental health care continuum

Symptoms/functioning	Response
<b>Mild/Mild-Moderate</b>	Outpatient referrals and monitoring, ?med? -accessing your resources or PediPRN
<b>Moderate</b> in tx, not responding/stagnant, not crisis	PediPRN (or KidsLink)
CRISIS, in tx or new to tx, acute (but not imminent) need for tx/tx change due to safety concerns and/or poor functioning	KidsLink -triages to Access, Crisis clinic, PACE Clinic, Gateway, PHPs, etc -Unite Us
<b>Severe/High Risk/SI with plan</b>	Emergency Evaluation



## How does PediPRN fit into integrated care practices

- See previous slide regarding resources
- MH Demand/Treatment Supply
- Specialized treatment
- Recent examples of consult calls from integrated care clinics:
  - patient c/o of "shaky hands" on current meds.
  - Patient with Autism, ADHD, tic disorder – not responding to meds?
  - Questioning bipolar disorder diagnosis



## Engagement and preliminary outcomes

- PediPRN currently has 349 PPCPs and 66 practices enrolled in PediPRN.
  - Approximately 58% of those enrolled participate in active engagement with PediPRN services.
- High engagers (10+consult calls and/or participation in PIP)
  - Higher rates of psychiatric prescriptions per year
  - Higher rates of mental health focused visits
  - Fewer psychiatric hospitalizations per year
- Education/training outcomes (PIP)

Comfort <u>using rating scales to diagnosis and treatment monitor</u> a variety of mental health conditions in their patients (ADHD, depression, anxiety, substance use disorders).	60% of responses reflected comfort with using rating scales to diagnosis & treatment monitor.	91% of responses reflected comfort with using rating scales to diagnosis & treatment monitor.
Comfort assessing safety in their patients	53% were comfortable	100% were comfortable
Comfort evaluating and managing non-suicidal self-injury in their patients	35% were comfortable	82% were comfortable
Comfort Prescribing second generation antipsychotic medications	6 % were comfortable	55% were comfortable
Knowledge about different level of mental health care available to their patients	65% reported feeling knowledgeable	100% reported feeling knowledgeable
Knowledge about different therapeutic interventions and how to choose them depending on the disorder of their patient.	41% reported feeling knowledgeable	91% reported feeling knowledgeable





## Increasing/Maintaining Engagement

- Solicit feedback regularly
  - Practice needs change, especially with the increase in mental health conditions in children and the development of integrated care and telehealth impacting practice workflows
    - Practice based office hours
      - Ease of utilization
      - Support with the emotional burden practitioners carrying when treating pts with mental health conditions
        - “I LOVE having Dr. Song support us once/month and we all feel better after we meet with her.”
        - “Even though not your intention these calls can be somewhat therapeutic for me.”
  - New website
    - increase utility as a resource
    - Web-based consultation scheduling
    - expand education tools/resources
  - [Tele behavioral health tips and treatment](#)



## Increasing/Maintaining Engagement

- Regular contact about new/updated/actively recruiting treatment programs and services.
  - [pediprn-newsletter-mental-health-treatment-programs](#)
  - Most practices do not have mental health supports that can keep up with all the new programming/services available
  - Practitioners often get in a routine of going to the same handful of mental health resources for their patients and benefit from regular reminders of additional resources available
- Connection with partners and stakeholders

# How to Contact PediPRN

- **Call PediPRN at (401) 432-1KID (432-1543)**
- **Email: [PediPRN@lifespan.org](mailto:PediPRN@lifespan.org)**
- **Visit website [www.pediprn.org](http://www.pediprn.org)**
  - Resources
  - Registration
  - Upcoming Educational Events
  - Educational Resources

