

# PediPRN: Pediatric Psychiatry Resource Network



## **BREAKFAST OF CHAMPIONS MAY 11, 2018**

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# Disclosures



- No financial interest in or affiliation with any commercial supporter to disclose.

# Pedi PRN Presentation



- Overview of PediPRN
- Program development next steps
  - Recruitment
  - Sustainability
- Case presentations
- Questions

# PediPRN



- PediPRN= Pediatric Psychiatry Resource Network
- Modeled after MCPAP- Massachusetts Child Psychiatry Access Project
- Innovative model of telephonic consultation and collaboration between pediatric primary care providers and child psychiatry providers.
- It is designed to help pediatric primary care providers meet the behavioral health care needs of children in their practices.
- Home location: Lifespan- Bradley, RI, and Newport Hospitals
- Grant initiated 12/15/16
- Funding
  - SIM grant
  - Rhode Island Foundation
  - VanBeuren Charitable Foundation
- **Service is available to all Pediatric Primary Care Providers (PPCP's) in the state of RI at no cost**

# Pediatric Primary Care Needs Assessment



- Increasing prevalence of behavioral health problems in children (20% of population)
- National shortage of child psychiatrists
- Pediatric feedback
  - Requested training in screening, diagnosing and treating behavioral health problems
  - Requested information about community behavioral health referrals and resources

# PediPRN Goals



- Increase PPCP's knowledge, skill and confidence to screen and manage children in primary care with mild to moderate mental health needs
- Promote the rational utilization of scarce specialty resources for more complex and high risk children
- Advance integration of children's behavioral health and pediatric primary care

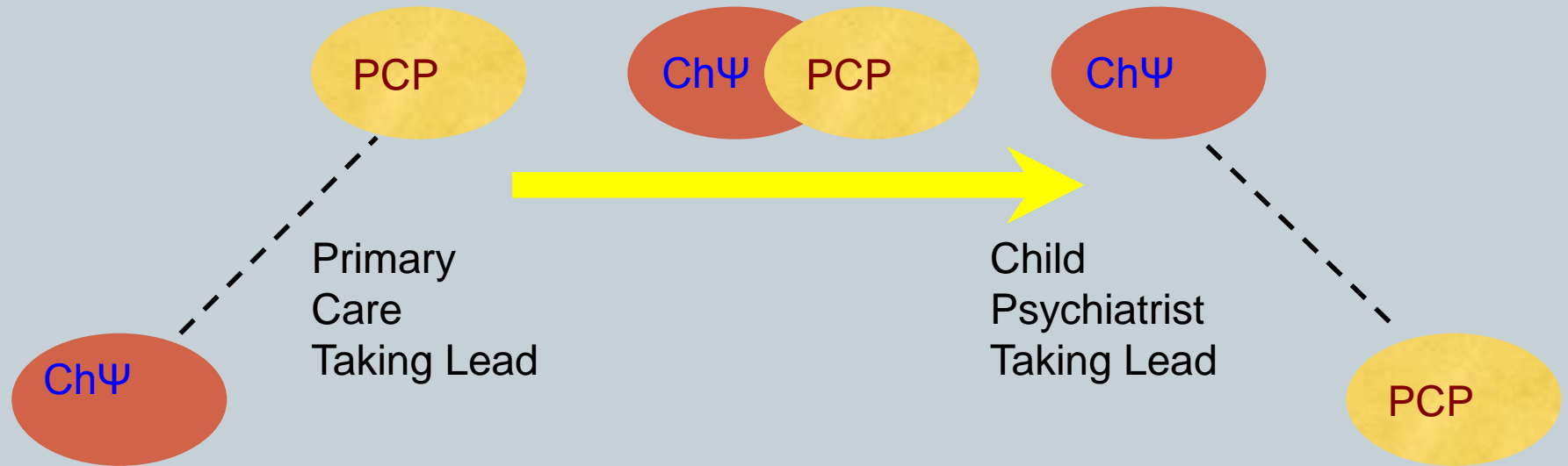
# PediPRN Model of Support



Less Complex



More Complex



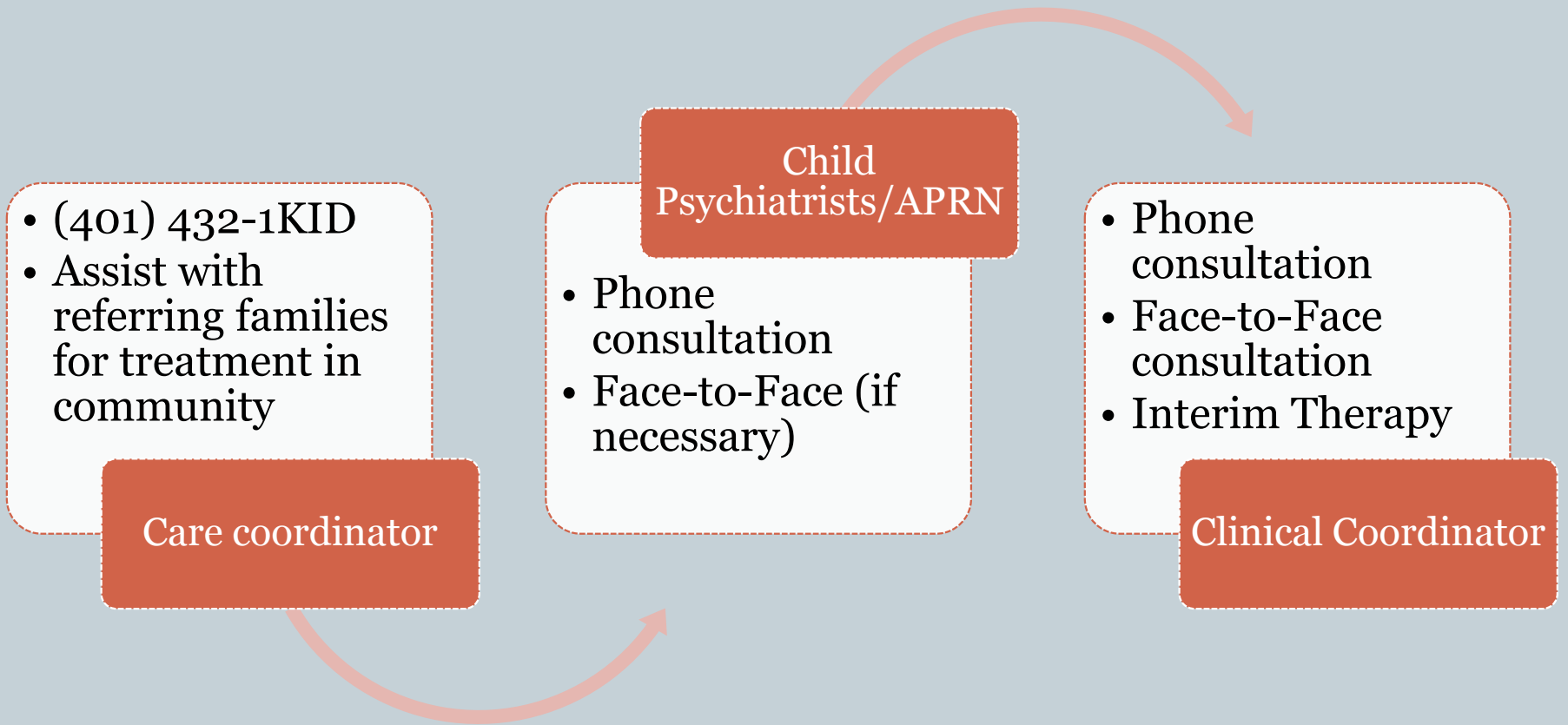
# PediPRN Program Design



- Lifespan Sites - Bradley, Rhode Island, and Newport
- Behavioral Health Team
  - **Psychiatrists/APRN**
    - ✦ Karyn Horowitz, MD, Clinical Director
    - ✦ Richard Smith, MD
    - ✦ Leila Sadeghi, MD
    - ✦ Wei Song, MD
    - ✦ Bev Rich, APRN
    - ✦ Marta Majczak, MD
  - **Clinical Coordinator**
    - ✦ Marianela Dougal, LICSW
  - **Care Coordinators**
    - ✦ Bradley Outpatient Support Staff
  - **Psychologist/research data analyst**
    - ✦ David Barker, PhD



# Program Process



# Services



- Telephone consultation
  - Weekdays
  - 8.30am-5.00pm
- Face-to-Face consultation
- Care coordination
- Transitional therapy services while youth are waiting placement in outpatient behavioral health services
- Training and education through Bradley Conference, lectures, website, and e-blasts

# Consultation questions



- Diagnostic clarification
- Treatment planning
- Unable to access behavioral health resources
- Second opinion
- Screening support
- Pharmacological – side effects, selection, dosage, etc.
- Psychotherapy – selection, referrals, monitoring

# PediPRN Statistics as of April 24, 2018



- **Overview**

- Providers enrolled 336
- Practices enrolled 56
- Providers utilizing PediPRN 134
- Number of Encounters 446
- Children/Adolescents Served 338

- **Telephonic consultations**

- **Mental health conditions for children/adolescents**
  - ✦ Anxiety (25%)
  - ✦ Attention Deficit Hyperactivity Disorder (19%)
  - ✦ Depression (19%)
- **Common reasons for contact**
  - ✦ Medication consultation (50%)
  - ✦ Information about resources (17%)
  - ✦ Second opinion (11%)
  - ✦ Diagnostic consultation (12%)
  - ✦ Crisis Consultation (4%)

# Insurance Providers of Consultation Patients



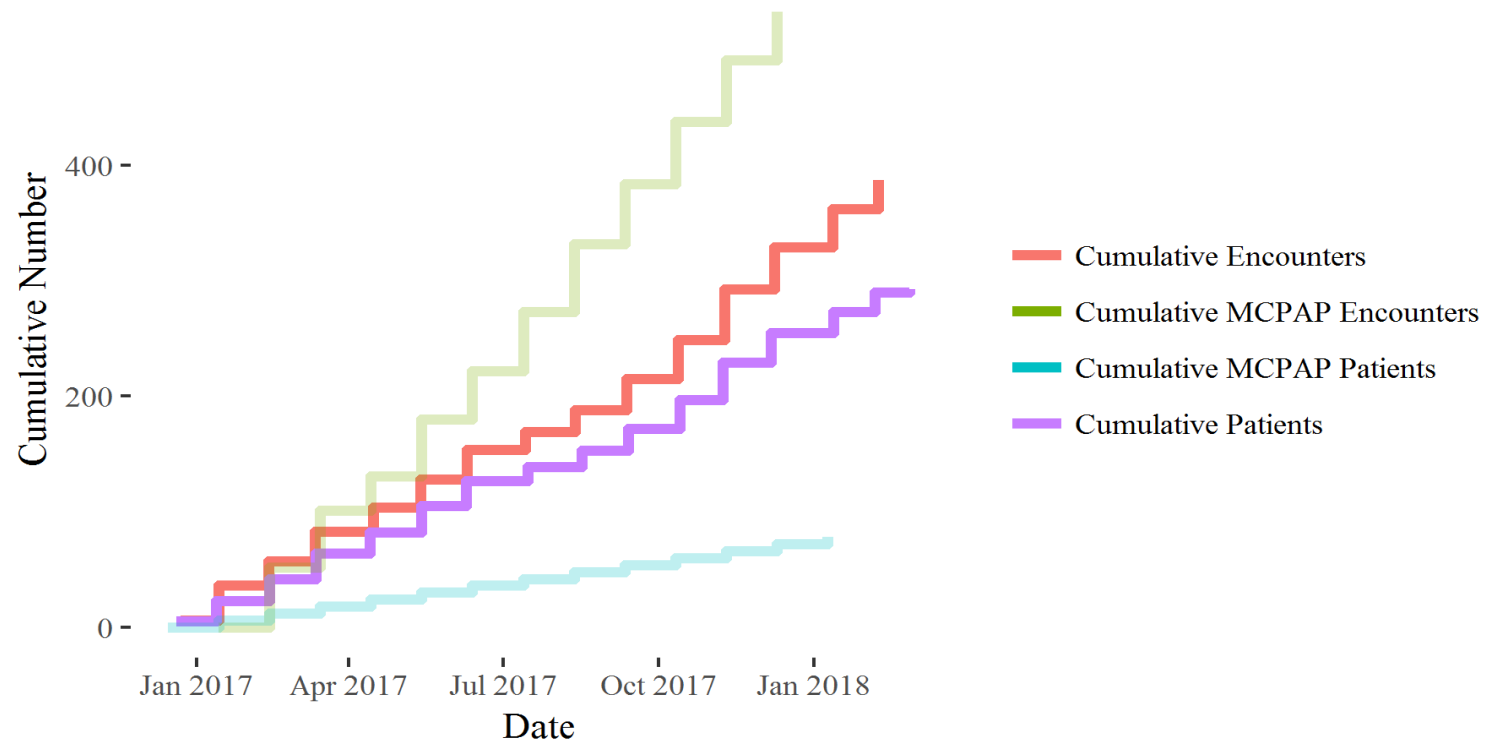
## Insurance Providers (C.13)

Variable	Level	% (n)
<b>Insurance</b>	<i>BCBS</i>	31% (121)
	<i>UBH</i>	28% (108)
	<i>NHP</i>	27% (104)
	<i>Missing</i>	3% (13)
	<i>HPHC</i>	3% (10)
	<i>Cigna</i>	2% (8)
	<i>Tufts</i>	2% (8)
	<i>Tricare</i>	1% (3)
	<i>Actna</i>	1% (2)
	<i>Medicaid</i>	1% (2)
	<i>None</i>	1% (2)
	<i>Unknown</i>	1% (2)
	<i>EDS</i>	0% (1)
	<i>Harvard</i>	0% (1)
	<i>Health Plans, Inc.</i>	0% (1)
	<i>Healthnet</i>	0% (1)
	<i>Healthnet Federal Services Tricare North</i>	0% (1)
	<i>UHC Choice Plus</i>	0% (1)
<i>United Health Choice Plus</i>	0% (1)	
<i>US Family</i>	0% (1)	

# Comparison PediPRN to MCPAP in 1<sup>st</sup> Year



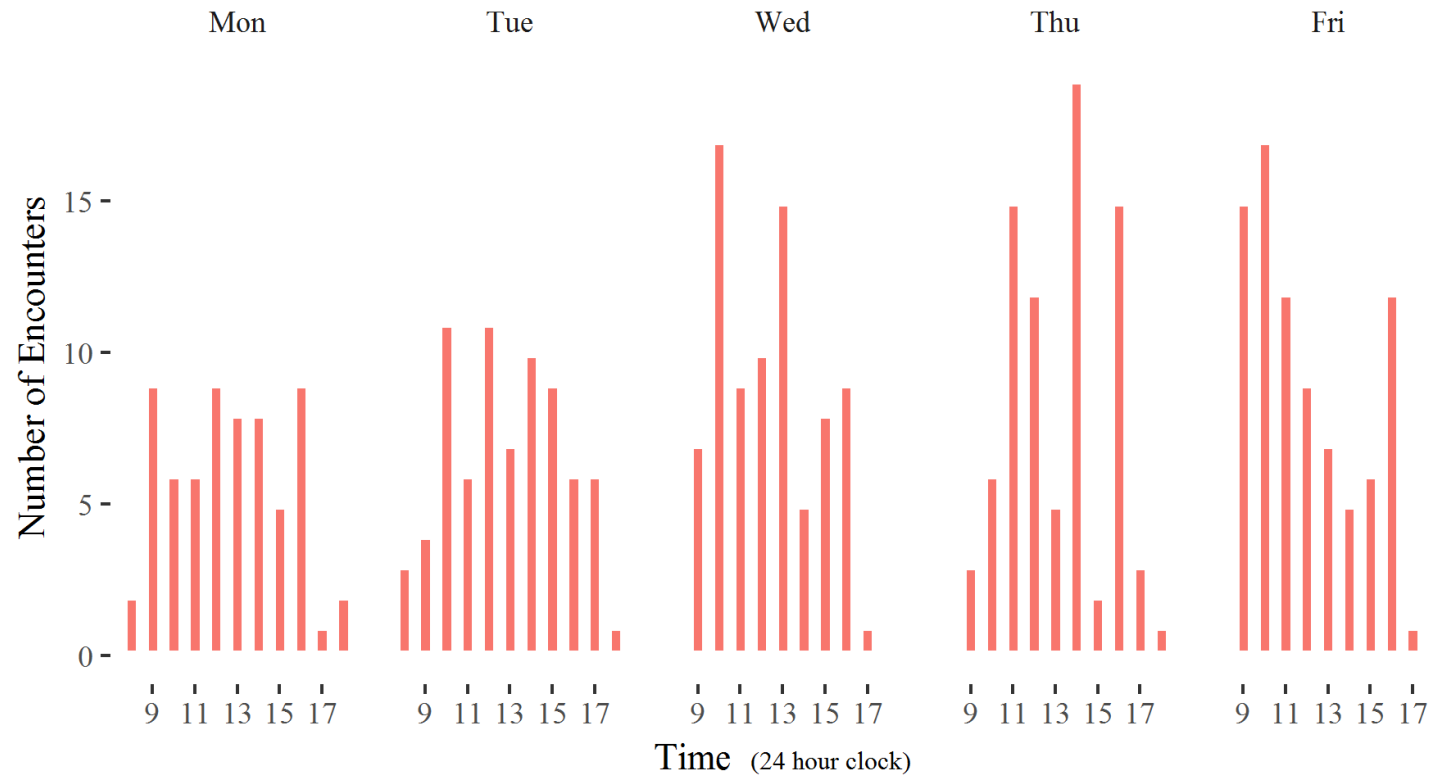
Cumulative use of Pedi-PRN services across time



# PediPRN Encounter Density



Encounter density across weekdays & time of day



# PediPRN Next Steps



- **Ongoing Care Delivery**
- **Sustainability**
  - MCPAP as model
  - NNCPAP resources
  - Legislative, grant, and institution options
- **Increase volume**
  - Outreach efforts/focus groups
  - Community education
  - Considering peer supervision group
  - Participate in events with pediatric primary care providers
  - Bradley Conference
  - Website and e-blasts



# Cases



**[HTTP://TURNTO10.COM/FEATURES/HEALTH-  
LANDING-PAGE/HEALTH-CHECK-  
KIDS/HEALTH-CHECK-SCREENING-FOR-  
TEEN-DEPRESSION](http://turnto10.com/features/health-landing-page/health-check-kids/health-check-screening-for-teen-depression)**

# Case #1



- 12 year-old female with severe anxiety (separation anxiety and school avoidance) presented to the ED twice within 2 weeks with severe somatic symptoms
- No medical findings aside from tachycardia
- Lorazepam 0.5mg PRN prescribed from ED with follow-up visit to PCP
- Received call from PCP with questions about benzodiazepine use in young adolescent and next steps for treatment
- Had completed the SCARED with significant elevations in all areas

## Case #2



- 12 year-old female with recent suicide attempt and admission to psychiatric hospital
- Discharged from inpatient setting to PCP with an appointment for therapist and no psychiatrist follow-up appointment
- Discharge note suggested PCP to initiate medication and acknowledged family history of bipolar disorder
- Received call from PCP prior to meeting with family regarding which medication to pick and how to monitor given family history

# Case #3



- 16 year old girl at boarding school with escalation of anxiety in context of multiple family stressors
- PCP consulted about use of benzodiazepine prn and break from school
- Advised against use of a benzodiazepine due to potential risks
- Recommended SSRI and counseled PCP on considerations in selecting an SSRI, typical starting dose, typical dose titration schedule, monitoring frequency and informed consent
- Discussed value in patient resuming regular structure rather than encouraging school avoidance
- Provided psychoeducation on anxiety and avoidance
- Discussed therapy options for this patient in school, as well as out of school

# Case #4



- 17yoF with h/o depression and anxiety
- Has therapist for herself, mom not engaged in treatment
- PMH: Pituitary adenoma s/p resection
- PCP started patient on fluoxetine 20mg and increased to 40mg one month ago
- Drowsy and sluggish in the am but improvement per therapist (more engaged, improved sleep, motivation and energy)
- Discussed option of decreasing fluoxetine to 30mg and re-evaluate in 2 weeks
- If side effects continue (if side effect!) consider switch to alternate SSRI or SNRI
- Monitor closely and **encouraged** to call back for consult if desired to either augment Prozac, if gains but still symptoms of anxiety/sedation

# How to Contact PediPRN



- Call PediPRN at (401) 432-1KID (432-1543)
- Visit website ([www.pediprn.org](http://www.pediprn.org))
  - Resources
  - Registration
  - Upcoming educational events
  - Educational resources
- **Marianela Dougal, LICSW (Clinical Coordinator)**
- **Hours of operation**
  - Monday through Friday
  - 8:30am to 5pm

# PediPRN website: [www.pediprn.org](http://www.pediprn.org)



Pediatric Psychiatry Resource Network (PediPRN)

**Pediatric Psychiatry Resource Network (PediPRN)**

**About PediPRN**

- Provider Resources**
- Frequently Asked Questions
- Useful Links
- How the Program

**Provider Resources**

**About Enrolling**

It is preferred that practices enroll in PediPRN before using the free service. Pediatric primary care physicians are requested to use **the enrollment form** and complete **the pre-enrollment survey**. If practices are not enrolled at the time of call, the care coordinator will assist in getting your practice enrolled at that time. PediPRN services are

**Take our pre-enrollment PediPRN survey.**

**Enrollment form**

**Take our post-enrollment PediPRN survey.**

# References



- Massachusetts Child Psychiatry Access Program – [www.mcpap.com](http://www.mcpap.com)
- National Network of Child Psychiatry Access Programs – [www.nncpap.org](http://www.nncpap.org)
- Partnership Access Line (PAL) Washington - [www.palforkids.org](http://www.palforkids.org)
- Integrating Behavioral Health and Primary Care for Children and Youth: Concepts and Strategies <http://www.integration.samhsa.gov/integrated-care-models>
- American Academy of Child & Adolescent Psychiatry - [www.aacap.org](http://www.aacap.org)