

## KSKidsMAP

Kansas Together for Pediatric Mental Health Care Access

Topic: Getting Help When You Are Out of Your Depth



This project is supported by federal funds from the U.S. Department of Health and Human Services (HHS) as a part of an award totaling \$1,200,000 with 0% Federal funds (non-Federal match). The contents and those of the authors do not necessarily represent the official views of HHS or any agency thereof.

## Disclosure

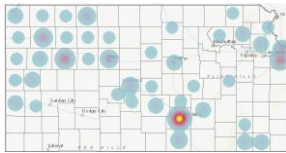
- We have no relevant financial relationships with the manufacturer(s) of any commercial products(s) and/or provider of commercial services discussed in this CME activity
- We do not intend to discuss an unapproved/investigative use of a commercial product/device in our presentation. *However, given that we are discussing medications in children, some medications are not currently FDA approved and are being recommended based on anecdotal evidence and published literature.*



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## KSKidsMAP network

- KSKidsMAP has enrolled 79 physicians/clinicians who serve 42 of the 105 Kansas counties



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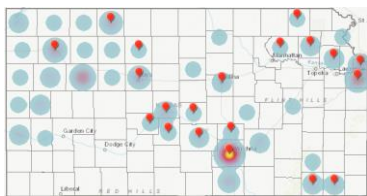
## Consultation Line and TeleECHO Clinic

- Consultation Line inquiries
  - Mental health toolkits and websites (18%, n=29)
  - Mental health resources for referral (20.5%, n=33)
  - Physician wellness (21.7%, n=35)
  - Telehealth resources (0.6%, n=1)
  - Case consultation request (25.5%, n=41)
  - Other community resource (13.7%, n=22)
- TeleECHO Clinic
  - Trained 48 physicians and clinicians



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## Case consultation's originating sites



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## KSKidsMAP Pediatric Mental Health Team

- Kari Harris, M.D., board certified pediatrician
- Rachel Brown, MBBS, board certified child and adolescent psychiatrist
- Nicole Klaus, Ph.D., board certified child and adolescent psychologist
- Polly Freeman, LBSW MSW, social work care coordinator



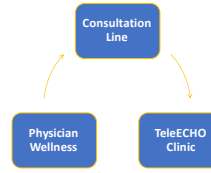
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## KSKidsMAP Project Aim

- To support primary care physicians and clinicians in Kansas to screen, diagnose and treat uncomplicated pediatric mental health concerns in their own practice
- Increase access to care for children and adolescents with mental health concerns
- Build a network for PCPs to support one another



## Program Components



## KSKidsMAP TeleECHO Clinic

- All Teach/All Learn environment
- Focus on treating mental and behavioral concerns in children and adolescents in the primary care setting
- Mentorship through case-based learning
- Clinical discussion
- Brief-focused didactics
- Supporting knowledge in practice
- Facilitated by Pediatric Mental Health Team
- CMEs and continuing education opportunities



## Mock KSKidsMAP TeleECHO Session

Presenter: Manish Dixit, MD



## Didactic: Anxiety Disorders

- How to use screening tools and make diagnosis
- First line treatment and interventions
- Monitoring, following up, and when to refer



## Screening

- Remember -
  - Screening tools are typically
    - Inexpensive
    - Easy to use
    - Quick
    - Identify people who need follow up
  - Screening tools do NOT make a diagnosis; for a diagnosis you need a clinical interview (with or without an appropriate rating scale)



## Clinical Assessment

- Clinical interview
  - History
    - What problems, how long for, when do they occur
    - Impact on functioning
    - Past medical, past psychiatric and family history
  - Examine the patient
    - Mental status exam (appearance, behavior, mood/affect, thought content and process, speech/language, insight and judgment)
- Ordering any diagnostic tests and obtaining collateral information



## Assessment will help in deciding

- Is an anxiety disorder present and, if so, which one
  - The SCARED (Screen for Child and Adolescent Anxiety-Related Disorders) is a helpful tool
- Or is there another explanation for the child's presentation
  - Physical
  - Substance use related
  - Another, more appropriate, psychiatric disorder
- Begin to plan for treatment



## Principles to consider

- Treatment should be patient centered, family focused, developmentally appropriate and evidence based
- Treatment follows careful evaluation and assessment
- Education (for child and family) is critically important
- Close follow up is important
  - Think of psychiatric disorders the way you think about the care of other chronic illnesses – relapse and remission with response to environmental stressors



## Safety first

- Abuse/neglect
- Bullying
- Neighborhood violence, gangs, gun shots, etc.
- War, famine, terrorism, disease, etc.
- Other environmental stressors
- Nothing works if a child is or feels unsafe
- Increased virtual connectivity may mean increased fear



## Evidence based treatments

- Cognitive behavioral therapy (CBT)
- Pharmacotherapy
- Combined CBT and pharmacotherapy
- Good medical practice always includes supportive therapy
- Other therapies (play therapy, family therapy, etc.) do not have good data to support their use for anxiety disorders in kids



## Combined treatment

- Milder disorders should probably receive CBT alone as first line
- Consider combined treatment
  - Severe anxiety
  - Comorbid disorder (such as ADHD for example)
  - Partial response to CBT alone
- Careful monitoring of treatment response is important
- Communication with other treating clinicians matters



## Consider medication

- Moderate-severe symptoms
- Causing impairment at school, home, hobbies etc.
- Either not participating (because of anxiety) or not responsive to therapy
- Initial lower dose, titrate to effectiveness, with close monitoring for side effects
- Plan for taper after 6 months or so



## Goals of treatment

- Improved symptoms and reduced distress
- Response is defined as 25-50% reduction in symptoms
- Remission is loss of diagnosis with no impairment
- Goal – FULL REMISSION WITH PREMORBID FUNCTIONING
- However, goals may need to be individualized for some patients with disorders that have been present since childhood as they may never have had adequate premorbid functioning.



## No response/partial response

- Is s/he taking the medication and working in therapy?
- Did you wait long enough?
  - 4-6 weeks at maximum dose (12 weeks for OCD)
- Did you dose high enough?
  - Equivalent of 130mg/day of sertraline



- Did you get the diagnosis correct?
- Is there substance use/abuse?
- Are there environmental stressors?
- Do you need another opinion?



## How long do you treat?

- Anxiety disorders tend to be relapsing, remitting conditions
- Long term treatment may be necessary, both of therapy and of medication
  - Six months medication and 12 sessions CBT
- Wean annually
- Consider booster sessions of therapy, especially at times of predictable stress – long term relationship with a therapist can be very protective



We see stable patients in outpatient clinics because outpatient clinics keep them stable



## How to become part of the KSKidSMAP Network?

- Visit:  
<http://bit.ly/KSKidsMapEnrollment>
- Complete enrollment form and attestation statements
- Sign
- Submit

**KSKidSMAP Consultation Line Enrollment**

The KSKidSMAP Consultation Line aims to improve access to pediatric mental health care for children and adolescents across Kansas by making resources, tools, and case consultations accessible to physicians and other child care providers across Kansas.

Only a licensed physician or clinical staff provider who has completed this form may enroll in the KSKidSMAP Consultation Line program. If you are a licensed physician or clinical staff provider who is not eligible under this program, please contact the KSKidSMAP Consultation Line administrator for more information. If you are a physician, please provide your primary medical specialty and the number of your medical license below. If you are a physician, please provide your primary medical specialty below. If you are a physician, please provide your primary medical specialty below. If you are a physician, please provide your primary medical specialty below.

Physician/Clinical Care Provider First Name: \_\_\_\_\_

Physician/Clinical Care Provider Last Name: \_\_\_\_\_

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## What does it mean to be a KSKidSMAP provider?

- Access to:
  - Social Work Care Coordinator's knowledge of mental and behavioral health:
    - Toolkits, websites, resources for referral and physician wellness resources
  - Case consultation with Pediatric Mental Health Team
  - A network of providers through KSKidSMAP ECHO Clinics

As simple as calling 1-800-332-6262 or emailing  
[KSKidsMAP@kumc.edu](mailto:KSKidsMAP@kumc.edu) with your inquiry!



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## Questions



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## Thank you

