

COMMITTEE ON COLLABORATION WITH MEDICAL PROFESSIONALS

# The American Academy of Pediatrics Task Force on Mental Health:

## A Call for Collaborative Mental Health Care for Children in Primary Care

*... safe and effective child mental health care requires effective collaborative partnership between mental health clinicians and primary care clinicians.*

■ **L. Read Sulik, M.D., D. Richard Martini, M.D., and David R. DeMaso, M.D.**, AACAP Committee Members, and **Jane Foy, M.D.**, and **Linda B. Paul**, AAP Task Force on Mental Health

*This article is in follow-up to the article "The American Academy of Pediatrics Medical Home," published in the September/October 2008 issue of AACAP News. It is jointly submitted with the AAP. AAP ran a companion piece in AAP News online in September 2008.*

The critical national shortage of mental health clinicians has pressured many primary care clinicians (PCC) to extend their care into assessing and treating children with psychiatric disorders. To address this growing need, the American Academy of Pediatrics (AAP) formed the Task Force on Mental Health (TFOMH) in 2004. This task force has stated that *PCC can and should be able to provide mental health services to children and adolescents in the primary care setting.* The TFOMH also recognized that safe and effective child mental health care requires effective collaborative partnership between mental health clinicians and PCC. As such it is critical for child

and adolescent psychiatrists to understand the current status of the TFOMH.

Under the direction of Jane Foy, M.D., the TFOMH identified the need for PCC to respond to ADHD, depression, anxiety disorders including those related to trauma, and substance abuse. In facing these problems, the TFOMH has recognized that early identification and intervention, counseling, guidance, care coordination, and chronic illness management can be provided effectively by the PCC with the appropriate tools, collaboration, and support. As a direct result, the TFOMH has developed useful tools and summarized models of support that will assist the PCC in providing mental health services to children. This approach is being implemented at the local AAP chapter level and at the local pediatric clinic level to prepare primary care clinicians to better address the mental health needs of their patients.

Through the liaison efforts of **Read Sulik, M.D., Frances Wren, M.D., and Penny Knapp, M.D.**, the AACAP Committee on Collaboration with Medical Professionals has provided regular input to the TFOMH. Additional AACAP members involved with AAP Task Force on Mental Health activities include **Alan Axelson, M.D., Mary Margaret Gleason, M.D.,**

**Peter Jensen, M.D., Barry Sarvet M.D., and Larry Wissow, M.D.** These efforts have been in line with the AACAP's mission to establish collaborative partnerships with the AAP as well as with the AACAP's Committee on Collaboration with Medical Professionals' mission to foster further development and implementation of collaborative practices between child and adolescent psychiatrists and primary care clinicians.

Child and adolescent psychiatrists should be aware of the following products that are currently under development by the TFOMH, which they plan to have available between now and the fall of 2009.

### The Future of Pediatrics: Mental Health Competencies for the Care of Children and Adolescents in Primary Care Settings

This policy statement on mental health competencies for primary care clinicians was jointly developed with the AAP Committee on Psychosocial Aspects of Child and Family Health. This statement should be helpful in developing and guiding continuing medical education opportunities for practicing clinicians and assisting training programs in formulating curriculum.

### Improving Mental Health Services in Primary Care: Reducing Administrative and Financial Barriers to Access and Collaboration

This position paper on administrative and financial barriers to collaborative mental health care has been jointly developed with the AACAP and should be helpful to advocacy efforts at the local, regional, and national levels.

### Enhancing Pediatric Mental Health Care: Strategies to Prepare a Community

This guidance describes approaches to enhancing pediatric mental health services at the community level. Included in this report are models of collaboration involving primary care clinicians, mental health professionals, schools, and youth-serving agencies.

### **Enhancing Pediatric Mental Health Care: Strategies to Prepare a Primary Care Practice**

This report describes approaches to enhancing mental health care provided in the medical home setting. Included in this report are elements to the provision of mental health care such as a practice's capacity to provide mental health care, consideration of a business framework, clinical relationships with mental health professionals, application of chronic care principles to children with mental health concerns, data collection, use of care plans, strategies for improving identification of mental health concerns, and more.

### **Clinical Algorithms for Mental Health Care, Birth to 21 Years**

This report serves as a practical guide for an idealized clinical process of mental health practice in the primary care setting. Algorithm 1 presents prevention, early identification, initial assessment, and initial intervention. Algorithm 2 represents further assessment and care of children with identified problems not

responsive to initial intervention. Each step will be keyed to the requisite competencies and the procedural codes used to bill for the activities in that step of the algorithm.

### **Mental Health Clinical Tool Kit**

This tool kit will consist of tools to assist PCCs with implementation of the process described by the algorithms including screening, diagnosing, and managing mental health conditions in practice. The tool kit is estimated to be available for purchase in the fall of 2009.

### **Strategies for Systems Change in Children's Mental Health: A Chapter Action Kit**

Developed in collaboration with the Department of Community, State, and Chapter Affairs, the *Chapter Action Kit* outlines numerous strategies that AAP chapters can use to improve children's mental health programs and services in their state. Suggestions include establishing collaborations at the state chapter level with the corresponding state or regional chapter of the AACAP. Also

included in the tool kit is a summary of collaborative programs around the country involving mental health services interfacing with pediatric clinical care settings. This kit is available at [www.aap.org/mentalhealth](http://www.aap.org/mentalhealth).

### **Educational Opportunities**

There are several educational opportunities that have been offered and will be offered on mental health. These include the teleconferences on rural mental health, the "15 Minute Mental Health Visit," and an upcoming teleconference on early childhood mental health. The TFOMH has been sponsoring sessions at the AAP National Conference and Exhibition (NCE); and this year collaborated with members of the AACAP to develop mental health training sessions pertinent for pediatricians. Finally an online module on collaborative models of mental health practice in primary care, the *Pedialink Module on Providing Collaborative Care of Children's Mental Health* has been developed and will be available in fall 2008 at [www.pedialink.org](http://www.pedialink.org). ■

## **Mark Your Calendar for AACAP's Future Annual Meetings**

### **56th Annual Meeting**

October 27-November 1, 2009  
Honolulu, Hawai'i

### **57th Annual Meeting**

October 26-31, 2010  
New York, New York

### **58th Joint AACAP/CACAP Annual Meeting**

October 18-23, 2011  
Toronto, Ontario, Canada

### **59th Annual Meeting**

October 23-28, 2012  
San Francisco, California

# **Call for Exhibitors**

**Don't miss the opportunities to be part of upcoming AACAP meetings!**

Besides exhibiting at the AACAP Annual Meeting, you can also exhibit at each of our three annual institutes: Psychopharmacology Update Institute, Lifelong Learning Institute; and the Annual Review Course. Please see our ads in this issue of *AACAP News*. We offer tabletop exhibit space to allow exhibitors the chance to connect with specific demographics within the child and adolescent psychiatry community. Approximately six tabletop exhibits are available at each of our three annual institutes and are placed in high-traffic areas at each of these institutes, providing exhibitors with the greatest opportunity to meet attendees. The vast majority of our attendees are practicing physicians.

For more information, or to download a copy of the AACAP Small Meetings Exhibitor Application, please visit <http://www.aacap.org/cs/root/meetings/exhibit.opportunities> or contact:

Lindsay Schlauch  
AACAP Meetings Manager  
Phone: 202.966.7300, ext. 104  
Fax: 202.966.5894  
E-mail: [exhibits@aacap.org](mailto:exhibits@aacap.org)