

MaineHealth

MaineHealth Knowledge Connection

MaineHealth Performance Improvement

2020

MMP Psychiatry FY20 Child Referral Guidelines Metric

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Problem/Impact Statement

A high burden of mental illness exists in primary care with insufficient specialty resources. Guidelines to be used by PCPs in referral decision support might result in more appropriate resource utilization.

Scope

- The scope of this project includes outpatient pediatricians who manage children and adolescents with psychiatric conditions, and who make referrals to outpatient child & adolescent psychiatrists.
- This project does not include adult patients or referrals for inpatient psychiatric care.

Goal/Objective

A clinical pathway for a common pediatrics referral request will be developed by Child & Adolescent Psychiatry physicians by the end of FY20 with the goals of standardizing both referral processes and treatment approaches for primary care physicians.

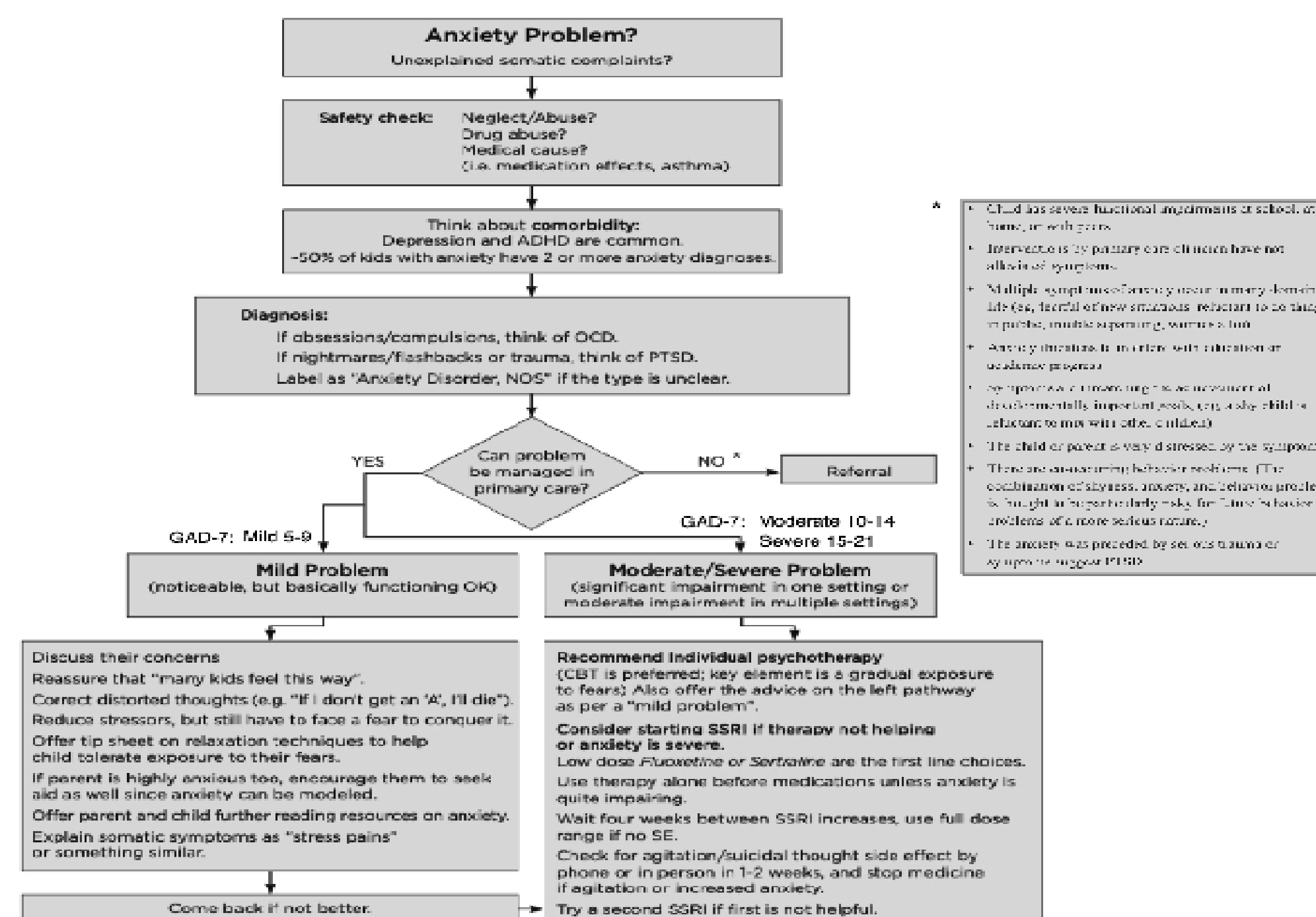
Baseline Metrics/Current State

- All referrals from a 1 month sample were reviewed.
 - DBT and Gender Clinic were not included in the sample.
- Depression, Anxiety, and ADHD were identified as the most commonly referred diagnoses.
- An ADHD guideline had been previously completed by Developmental Pediatrics.

Root Cause Analysis

- A robust literature search was conducted regarding practice parameters for referrals and treatment of pediatric anxiety, from both psychiatric and pediatric publications.
- Based on the literature review, a consensus reached by team members on MaineHealth specific adaptations, breadth of content, and standardized tools to include.

Anxiety Algorithm



Barriers

- Access to historical referral data
- Q2&3: COVID19 pandemic, several staff working remotely, meetings canceled to make room for pandemic planning and moving the entire practice to telehealth
- A State-wide pediatric mental health access grant opportunity became available and resources were diverted to that effort.

Countermeasures	
By When & Status*	Deliverable
End Q1	<ul style="list-style-type: none"> Review outpatient psychiatric referrals to identify common diagnoses that would benefit from establishing clinical pathways.
End Q2	<ul style="list-style-type: none"> Review literature regarding chosen topics to identify established practice parameters. Assign topics to child psychiatry providers.
End Q3	<ul style="list-style-type: none"> Complete draft clinical pathways for child providers to give peer feedback, revise drafts, choose referral guideline v. algorithm. Finalize version for pediatrics to review.
End Q4	<ul style="list-style-type: none"> Gain feedback from the Pediatric Service Line. Complete selected pathways and ready for publication.
Outcomes	
<ul style="list-style-type: none"> Anxiety was chosen as the target diagnosis. The clinical pathway format was chosen. Child providers provided feedback on a draft of the Anxiety Algorithm. Changes were implemented and finalized. Feedback from the Pediatric Service Line regarding the pathway content was favorable. 	
Next Steps	
<ul style="list-style-type: none"> Work with the Pediatric Service Line in the context of the mental health access grant evolved towards creating video instruction. <ul style="list-style-type: none"> Initial assignments of common pediatric mental health topics/diagnoses to child providers has taken place. Existing written presentations are being compiled in preparation for creating short educational videos during FY21. 	

Do

Study

Act

Plan