Who & How Can Mental Health Clinicians Help in a Primary Care Setting?

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Child & Youth Issues

Who / How / What….

• WHO gets referred to our service?
• HOW do we help them?
• WHAT do the participating physicians find most helpful?

Child & Youth Mental Health Team

• Operating since 2005
• Psychologist – 4 days per week
• Psychiatrist – 1 day per week
• 2 Family Practice office sites
  – Referrals from 12 GPs & 1 Paediatrician
Our Program’s Characteristics

- No exclusionary criteria on referrals
- Loose age limits (0 – 19)
- Early intervention
- Longstanding problems
- Facilitate access for individuals with special requirements (e.g., translator)

Data Sample

- From the caseload of 2 Family Practice GPs at one site + 1 Paediatrician
- 160 Referrals
- Mean age 10.4 yrs (2 – 25 yrs)
- Males = 58% Females = 42%
  mean = 10.0 yrs  mean = 11.7 yrs

Who Is Being Referred?

- Graph showing age distribution among referred males and females.
Assessment

Initial meeting
(10 – 30 mins)
• Within 2 wks
• Program Info
• Rapport
• Psychoeducation
• Connors Rating Scales

Assessment
(90 mins)
• Multidisciplinary
• Feedback
• Formulate treatment plan
• Consultation letter to physician

Diagnostic Clarification

% of Referrals

2-4 5-8 9-12 13-16 17+

When Diagnosis Differs

• Younger ages
  – confusion re Pervasive Dev. Disorder
  – Behaviour issues » ADHD/LD, anxiety
  – Parental mental health issue

• Older ages
  – ?ADHD » Relational Problems / Anxiety /
    Mood / Adjustment Issues
History & Severity

Age | 2-4 | 5-8 | 9-12 | 13-16 | 17+
---|-----|-----|-----|------|-----
Past MH (us) | 18% | 29% | 56% | 49% | 58%
---|-----|-----|-----|------|-----
CGAS | 40-82 | 31-85 | 40-85 | 35-75 | 35-80

# of Sessions

Age | 2-4 | 5-8 | 9-12 | 13-16 | 17+
---|-----|-----|-----|------|-----
Mean | 4.4 | 4.8 | 4.2 | 7.3 | 7
---|-----|-----|-----|------|-----
Range | 0-22 | 0-29 | 0-22 | 0-46 | 0-23

Recipient of Service
How Do We Help?

- Psychoeducation – family / GP
- Cognitive Behaviour Therapy
- Behaviour Management
- Medication Management
- Case Management – accessing other resources, school services

Service Received

Physicians Value

- Access to services in reasonable time
- Both psychiatric services & counselling
- Diagnostic clarification
- Information obtained in assessment/therapy sessions
- Ability to discuss issues informally to aid own case management
Physicians Value

- Support regarding medication issues
- No restrictions on referrals
- Services for sub-clinical patients, especially young children
- Knowledge of and access to other resources

Reiterates Program Objectives

- Prevention & Early Intervention
- Stigma Reduction
- Collaborative Care over the Long-term
- Best Practice
- Knowledge Transfer

Child & Youth Issues

Q & A

Thank You