

The Patient-Centered Mental Health in Pediatric Primary Care Program: Key Facts

The Resource for Advancing Children's Health (REACH) Institute is a 501c3 non-profit organization founded by Peter Jensen, MD in 2006 to ensure that the most effective, scientifically proven mental health care reaches all children and families. Through our Patient-Centered Mental Health in Pediatric Primary Care (PPP) Program, we have transformed the practices of over 4,000 primary care clinicians (PCCs), enabling them to deliver timely and effective primary care-based mental health services to children and families.

Patient-Centered Mental Health in Pediatric Primary Care (PPP) Program Description

- The program has two components: (1) a 16.25-hour interactive course focused on building skills and confidence in treating pediatric behavioral health problems, and (2) a 6-month, case-based learning program during which small groups of PCCs meet with PPP faculty twice a month for 1-hour video conference calls to discuss challenging cases and apply the skills they learned in the course.
- Participants can earn up to a total of 28.25 CME credits for both program components.
- Delivered virtually, through Zoom, or in-person (when it is safe to do so) for groups of 25-50 participants.
- Each course is delivered by a multidisciplinary faculty team composed of 2-3 primary care clinicians (or developmental-behavioral pediatricians) and 1-2 child and adolescent psychiatrists (CAPs).
- Based on basic behavior change science principles¹, and as a result, demonstrates greater impact on practice change and PCC effectiveness than either more "typical" CMEs or ad hoc phone consultation programs (see references below).

The PPP program is urgently needed in pediatric primary care settings. Here are the facts that have allowed the program to expand over the last 15 years, and why it may make sense for your organization:

FACT: Undiagnosed and/or poorly managed pediatric behavioral health (BH) problems (e.g, ADHD, depression) cost pediatric primary care systems in multiple ways:

- *Increased ambulatory medical costs* - for both the payer and the child's parents^{2,3}
- *Increased ER visits and hospitalizations* - behavioral and emotional crises, accidents, injuries, suicide attempts^{4,5}
- *Overuse of expensive psychiatric medications* – non-evidence-based prescribing and poly-pharmacy⁶⁻⁹
- *Increased use of specialty mental health services* if they are available⁹⁻¹³

FACT: After the PPP Program, PCCs deliver effective evidence-based BH treatments that reduce system costs:

- *Cost-effective*— Federally-funded research demonstrates that after completing REACH training, primary care - delivered BH services reduce costs by an average of \$120/child/year⁹ for all children across an

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entire pediatric panel, or more than \$2000/child/year for those with higher-end mental health diagnoses.¹⁴

- *Increased income for community PCCs* -- Because the PPP course also teaches PCCs optimal coding and billing strategies, most participants report that their practice income actually increases by \$12,000-15,000/year.
- *Substantial ROI for REACH training* – With typical caseloads (e.g., 50 pediatric patients w/ADHD) yearly costs saved amount to \$6000 per prescriber^{9,14,15}
- *Preferred*: Families and providers prefer and are more satisfied with BH services delivered by REACH- and similarly trained primary care providers^{16,17}
- *Improved staff morale* – reduced provider frustration due to unavailable specialty BH services, or families unwilling/unable to follow thru with specialty BH referrals¹⁶⁻²⁰
- *Greater effectiveness vs. alternative approaches* –independent studies have shown that REACH’s PPP program demonstrates great change in PCCs’ competence and clinical practices than more “typical” CME programs²¹ or ad hoc one-to-one clinical consultations with a CAP.²¹⁻²⁵

FACT: Delivered by sufficiently trained pediatric primary care providers, evidence-based treatments for pediatric BH problems can be:

- *Highly effective* – Supported by many dozens of controlled trials^{8,26-38}
- *Feasible* – Can be delivered within the workflow and staff of most primary care settings
- *Credible* - Supported by *American Academy of Pediatrics*-endorsed guidelines, and taught to your physicians by national key opinion leader pediatricians and child psychiatrists³⁹⁻⁴⁹
- *Teachable* – Delivered via a well-tested, superbly delivered, hands-on coaching program targeting key clinical skills, successfully applied by more than 4,000 clinicians^{9,50-53}
- *Palatable & Acceptable* - Readily accepted and applied by primary care clinicians, strong evidence shows that REACH-trained clinicians enjoy and are proud of their new skills, and in turn endorse/advocate for these practices to their colleagues^{16,50-54}
- *The Best Option* to transform your organization’s child BH services, using your own REACH-certified physicians to teach their colleagues these skills with high fidelity and impact, through our proven “train-the-trainers” support^{50,52,53}

The Patient-Centered Mental Health in Pediatric Primary Care (PPP) Program is unique and the only national clinical practice transformation program that uses scientifically-based, **evidence-based change methods** to help primary care providers adopt proven, more efficacious clinical practices for patients with high cost and common chronic health conditions.

For more information, please contact Lisa Hunter Romanelli, PhD, CEO of the REACH Institute, at lisa@thereachinstitute.org or 646-603-6891.

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