

# PEDIATRIC MENTAL HEALTH CARE ACCESS PROGRAM





# PEDIATRIC MENTAL HEALTH CARE ACCESS GRANT HISTORY

## **Purpose:**

To promote behavioral health integration in pediatric primary care by supporting the development of new or the improvement of existing statewide or regional pediatric mental health care telehealth access programs.



**CHILDREN'S**  
**MENTAL**  
**HEALTH**  
**MATTERS**



# PEDIATRIC MENTAL HEALTH CARE ACCESS GRANT HISTORY

- Grant Guidance released July 11, 2018 by the Health Resources & Services Administration (HRSA), Maternal and Child Health (MCH) Bureau – MCH Workforce Development
- Award amount up to \$445,000 per year for a 5-year period of performance – September 30, 2018 to September 29, 2023 – North Dakota is fully funded!
- Eligible applicants – states, political subdivisions of states, Indian tribes and tribal organizations. The State Maternal and Child Health (MCH) Program is required to be involved as either the lead applicant or as a collaborative relationship with a letter of support.



# PEDIATRIC MENTAL HEALTH CARE ACCESS PROGRAM SUPPORT

- North Dakota Department of Human Services, Executive Director, Chris Jones
- North Dakota Department of Human Services, Behavioral Health Division, Pam Sagness and Laura Anderson
- North Dakota Department of Public Instruction, Safe and Healthy Schools, Valerie Fischer (in 2018)
- University of North Dakota School of Medicine and Health Sciences, Department of Psychiatry and Behavioral Science, Dr. McLean
- University of North Dakota, Center for Family Medicine, Dr. Connell (Pediatrician) and North Dakota Department of Health, Field Medical Officer



# PEDIATRIC MENTAL HEALTH CARE ACCESS PROGRAM SUPPORT

- North Dakota Department of Human Services, Center for Rural Health and Area Health Education Center, Lynette Dickson
- Sanford Bismarck, Director of Behavioral Health Services, Jennifer Harrington
- North Dakota Federal of Families for Children's Mental Health, Carlotta McCleary
- Family Voices of North Dakota, Donene Feist
- And many others.....

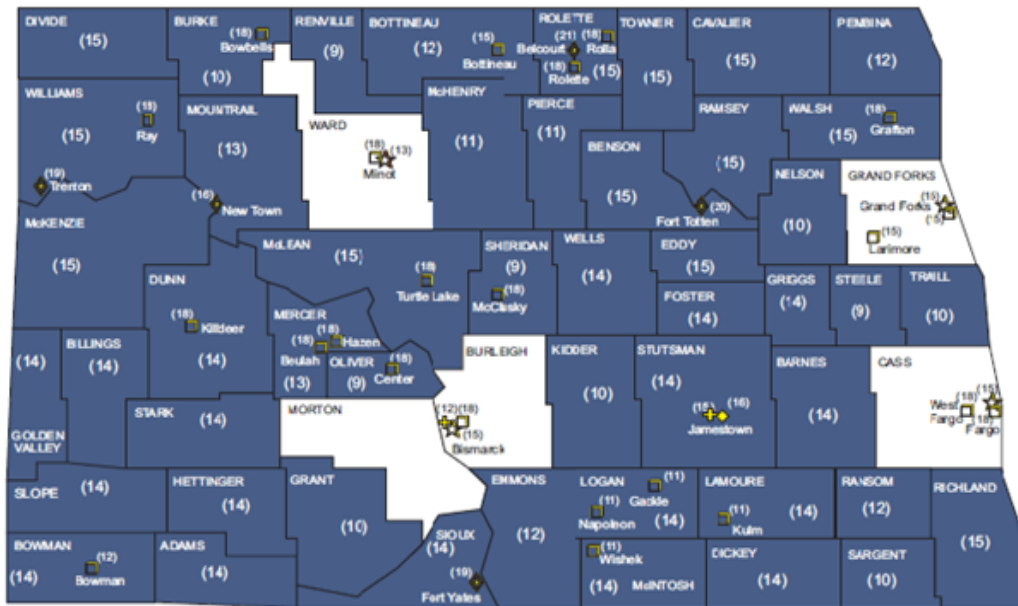


# PEDIATRIC MENTAL HEALTH CARE ACCESS PROGRAM

- Project Administrator– Kim Mertz  
NDDoH, Section Chief, Healthy and Safe Communities and MCH Director
- Program Director– Jenn Faul  
Sanford Health, Head of Special Projects
- Program Manager, Kathryn Lancaster  
Sanford Research North
- Erika Lovaas, Program Coordinator  
Sanford Research North
- Health Equity Coordinator – Krissie Guerard  
NDDoH, Health Equity/MCH Partnership Coordinator
- Data Manager/Evaluation – Tracy Miller  
NDDoH, State Epidemiologist, Li Cao, Bio statistician  
Sanford Research North
- Fiscal Manager – Lawrence Hopkins  
NDDoH, Assistance Director, Division of Accounting,



## North Dakota Mental Health Professional Shortage Areas



- Mental Health Professional Shortage Area
- Automatic designated mental health facilities
- Designated Health & Human Service Centers not located within current geographic area/region
- Designated State Mental Health Hospital
- Automatic designated IHS facilities
- Designated Correctional Facility



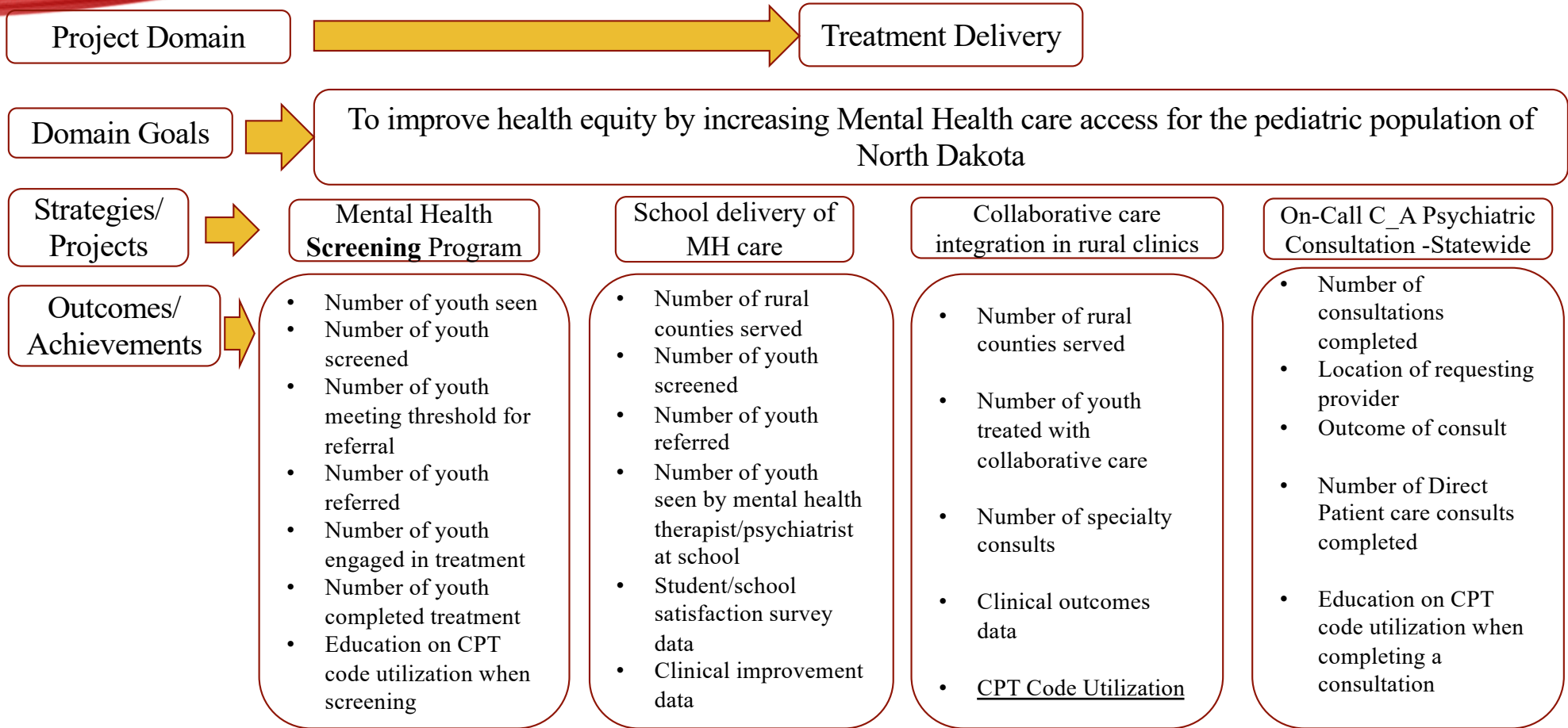
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**GOAL ONE:**  
 Increase telehealth behavioral health services to children and adolescents living in underserved areas of the state





# OUTCOMES/ ACHIEVEMENTS





#### PATIENT

- Right Care
- Right Place
- Right Time

#### PROVIDER

- Acquire New Knowledge
- Treat More Patients
- Build Community of Practice

#### COMMUNITY

- Reduce Disparities
- Retain Providers
- Keep Patients Local

#### SYSTEM

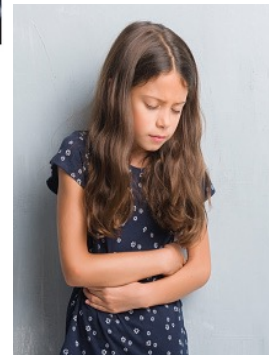
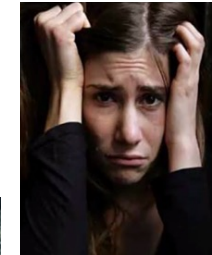
- Increase Access
- Improve Quality
- Reduce Cost

## GOAL TWO:

Extend knowledge to pediatric primary care professionals across the state for the early identification through **screening**, diagnosis, treatment and referral of mental health disorders

# WHY THE EMPHASIS ON SCREENING?

- Approx. 50% of pediatric office visits involve behavioral, psychological, or educational concerns
- Among preschoolers, the most common psychiatric disorders have a prevalence of up to 16%
  - <20% are referred for mental health treatment
- Primary care providers have the most professional contact with preschoolers
- Parents TRUST primary care physicians' recommendations



# OUTCOMES/ ACHIEVEMENTS

Project Domain

Training/Education

Domain Goals

Extend pediatric mental health care knowledge to all pediatric providers across the state of North Dakota

Strategies/  
Projects

Bi-Monthly ECHO  
Sessions for  
Pediatric Providers  
and School Staff

September Pediatric  
Mental Health Care  
Access Symposium

Grand Rounds  
Series

Website  
Creation

Outcomes  
and  
achievements


- Satisfaction survey of course
- Changes in Provider knowledge
- Impact on Provider practice
- Likelihood of change of practice
- Barriers to change
- Number of Providers participating / by discipline
- Number of ECHO sessions

- Satisfaction survey
- Provider knowledge pre/post course
- Impact on Provider practice
- Likelihood of change of practice
- Barriers to change
- Number of Providers participating / by discipline

- Satisfaction survey of presentation
- Provider knowledge pre/post course
- Impact on Provider practice
- Likelihood of change of practice
- Barriers to change
- Number of Providers participating / by discipline

- Website Analytics
- Stored CME completion rates





Since the application and award of the NDPMHCA Grant in 2018, there have been many changes in the landscape of service delivery across North Dakota.

- 1915i services
- Behavioral Health Resource Coordinator position creation,
- School Behavioral Health Grant Applications
- Legislation in 2021 to purchase Kognito, a software training program for professional education regarding mental health matters and how to have conversations with students

The ND PMHCA program needed to defer this goal to the fourth year (which starts Oct. 1, 2021) in order to accomplish key initiatives in the primary care clinics.

The NDPMHCA program is assisting in a new survey to determine where services are being provided, including schools.

The NDPMHCA program included Amanda Francis as part of an advisory subcommittee on the future guidance of this grant.

## GOAL THREE:

Include direct school-based delivery of telehealth services due to the shortage of healthcare providers and the lack of an infrastructure of primary care clinics

### Spoon Parable

No one person needs to do everything, but everyone needs to do something.

There are many providers who are frustrated and trying to navigate care for their patients alone when they may not need to.

We, our youth, our state, can all begin to thrive when we begin to choose to work together through new collaborations, seeking the same goals – wellbeing of humankind.

Looking forward to the utilization of Collaborative Care with our partnering clinics.

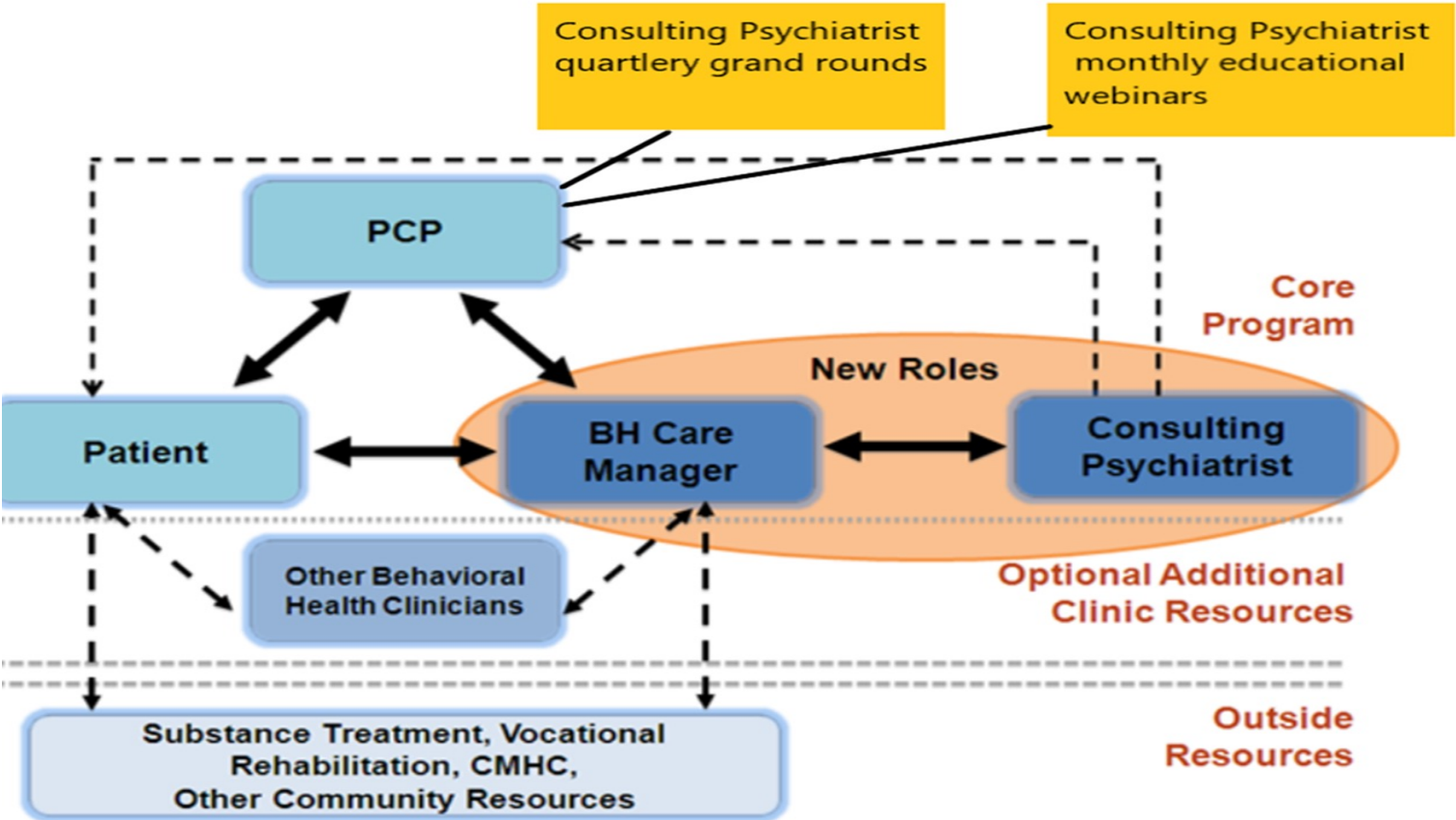
## GOAL FOUR:

Enhance existing partnerships and develop new relationships with entities that have goals and expectations that align with the ND PMHCA program





# COLLABORATIVE CARE AT A GLANCE



# HEALTH DISPARITIES


## Equality



## Equity



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A photograph of a spiral-bound notebook with a white grid page. The page is placed on a dark blue, textured surface. The words "next steps:" are written in blue ink in the center of the page. The notebook has a silver spiral binding at the top.

next steps: