THE UNIVERSITY OF NEW MEXICO-CRCBH COMMUNITY-ORIENTED STRENGTHS-BASED MULTIDISCIPLINARY CHILD AND ADOLESCENT TELEPSYCHIATRY PROGRAM

OVERVIEW

Through video and phone conferencing, the consulting child and adolescent psychiatrist is included as a key member of a nonhierarchical multidisciplinary team. This team often includes providers of education, health care and behavioral health care as well as family members and other essential social supports, and values the expertise each coparticipant brings to the interaction.

More than 80 different primarily rural and frontier communities in New Mexico have participated, with health care providers receiving continuing education credit for taking part in this activity.

COMPONENTS OF PROGRAM:

- Direct psychiatric service (primary responsibility for the prescription and management of psychotropic medication) to students diagnosed with severe mental disorders through telepsychiatry interviews of youth with or without their families or providers;
- Case-based consultation, training, and supervision of school-based primary care
 and behavioral health care providers regarding medication interventions;
 psychotherapy interventions; integrating medication and psychotherapy
 interventions; and referrals and disposition planning (including networking
 community resources;
- Interdisciplinary case conferences involving educators, behavioral health care
 providers, or primary care providers to create collaborative treatment plans and
 case management;
- Training and Q&A sessions for educators, behavioral health care providers, or primary providers regarding screening, assessing, diagnosing, and treating mental disorders (recent examples include suicidality; school bullying and violence; prescription drug abuse; classroom management; intervening early in severe mental illnesses);
- Case-based larger system telehealth interviews (of students, families, peers, educators, and both school-based and community behavioral health or primary care providers) to deal with interdisciplinary, interagency, and community barriers to collaboration and then arrive at a mutually agreed upon course of action;

- Case-based service delivery telepsychiatry consultations with the aim of creating a multifaceted, multisite, community-based system of care for students with mental health needs; and
- Email-based request/inquiry system school health personnel can use to seek consultation support with a response time 2-3 working days. Responses may be done by phone or electronically according to provider preference.

DIVERSITY IN TRAINERS

Presenters in trainings and case discussions involve not only physicians, but psychologists, nurses, social workers, counselors, anthropologists, epidemiologists, sociologists and clinical researchers.

DEVELOPING LOCAL CAPACITY

The following invites providers of education, health care, and behavioral care to youth throughout the state to participate in collaborative case consultation which results in increasing the capacity of local providers to provide expert care to youth and their families and peer supervision to their community colleagues.

Dr. Kriechman will facilitate a group discussion connecting you to the collective wisdom of your peers for suggestions regarding the assessment, diagnosis, treatment (both psychotherapeutic and psychopharmacological) and disposition planning of the children, adolescents and families with whom you work.

Educators, health care providers, and behavioral health care providers are all welcome. Dr. Kriechman will ensure that cases are de-identified to protect the confidentiality of all concerned.

This is not only an opportunity for case consultation, but for tapping into the wealth of expertise of your colleagues throughout the state.

CONNECTION OF PROGRAM TO NATIONAL MANDATES

The guiding philosophy of this strengths-based, community-oriented, systemic tele-psychiatry model corresponds well with the *Effective Schools* movement in education and Federal mandates laid out by the *President's New Freedom Commission on Mental Health*. Programs like UNM-CRCBH have the potential to improve the quality of mental health care for children and adolescents because they are transdisciplinary, located in schools, and strengths based; they integrate family, friends, and community, and emphasize sustainability and expansion through broad-based training.