Child and Adolescent Psychiatry Fellowship + Pediatric Integrated Care Models: Paragons, Pragmatics and Pitfalls.

Megan McLeod, MD,1 Craigus Uscher, MD,1 Sanesa Jacobson, MD2 Julie M. Sadhu, MD,2 Sourav Sengupta, MD,2 Sarah Gibbons, MD2 Karen Saroca, MD3

1Department of Child and Adolescent Psychiatry, Oregon Health and Science University, 2Department of Child and Adolescent Psychiatry, University of Pittsburgh, 3Department of Child and Adolescent Psychiatry, Northwestern University, 4Department of Child and Adolescent Psychiatry, University at Buffalo, 5Department of Child and Adolescent Psychiatry, Tufts Medical Center.

Introduction and Background

...few candidates are ever trained to the extent that the skills they will need to practice cogently in their role... Because of these limitations, there is much more room for improvement in training in this important aspect of practice.

- Gregory Font, American Academy of Child & Adolescent Psychiatry Presidential Address 2018

Integrated care is an effective and cost-saving model to address the limited workforce of child and adolescent psychiatrists. A 2014 survey of the AAPFP/Integrated care task force found that of those who responded, 72% of child and adolescent psychiatry (CAP) training programs provide integrated care training.

A required first year rotation occurring every Monday and Wednesday afternoon. The fellow is expected to provide care for 60 minute visits, and any additional time is used for consultation. Fellows should be supervised for 60 min.


Development of training programs that are positive, meaningful, appropriately challenging, and which allow trainees to approach a generalist role, require an understanding of the essential aspects of training that are integrated care. To spark ideas for training programs, we describe four CAP training fellowships (Oregon Health and Science University, Northwestern University, University of Pittsburgh, State University of New York at Buffalo) and the experiences of their fellows in approaching this task. We detail how these four programs have designed integrated care training and managed this process.

Table 1: Comparing Integrated Care Models

<table>
<thead>
<tr>
<th>Program and Description</th>
<th>Funding</th>
<th>Supervision and Management</th>
<th>Comp</th>
<th>Cons</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oregon Health and Science University</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A required first rotation occurring every Monday and Wednesday afternoon. The fellow is expected to provide care for 60 minute visits, and any additional time is used for consultation. Fellows should be supervised for 60 min.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Case Examples: Successes and Learning Experiences

Case 1: Josie (a pediatric resident) asks Edie (a CAP fellow) to see a 7-year-old boy with a history of ADHD. Josie has been going to trouble school and his pediatrician is that he has been experiencing symptoms of depression and anxiety, and felt like making an appointment to see a child psychiatrist. Edie makes recommendations to adjust this young man’s ADHD medication. Josie’s parents are both relieved and grateful, and Josie is happy for the help. Edie discusses the case with the fellowship at the end of the day.

CAP fellow: Mike arrives at the clinic and pediatric resident. Jeff tells him that he has been seeing for his son a patient coming from the patient’s family. In addition, he is in a child and adolescent psychiatry rotation. Mike is satisfied by his responses, and he very quickly begins to see the potential in this patient. The fellow then begins to describe some of the issues, and to express his concern for the patient’s future. They discuss his progress: “We can’t do this alone,” he says, “We need to work together”. Mike agrees to sit in the pediatric clinic.

University of Pittsburgh

Accrued a 6-month rotation during the first year of CAP fellowship. Monday through Friday from 8 am to 5 pm. The fellow is expected to provide care for 60 minute visits, and any additional time is used for consultation. Fellows should be supervised for 60 min.


Table 2: Advanced Milestones that can be Assessed in Integrated Care Models

<table>
<thead>
<tr>
<th>Milestone</th>
<th>PC1</th>
<th>PC2</th>
<th>PC3</th>
<th>PC4</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>1</td>
<td>4</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>II</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>III</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td>4</td>
</tr>
</tbody>
</table>

- Usher, MD
- Craigus Uscher, MD
- Sarah Gibbons, MD
- Karen Saroca, MD

Competencies: The Milestones

Several Advanced ACCM milestones for Child and Adolescent Psychiatry can be assessed in integrated care training (Table 2).

- Case Examples: Successes and Learning Experiences

Case 1: Josie (a pediatric resident) asks Edie (a CAP fellow) to see a 7-year-old boy with a history of ADHD. Josie has been going to trouble school and his pediatrician is that he has been experiencing symptoms of depression and anxiety, and felt like making an appointment to see a child psychiatrist. Edie makes recommendations to adjust this young man’s ADHD medication. Josie’s parents are both relieved and grateful, and Josie is happy for the help. Edie discusses the case with the fellowship at the end of the day.

University of Pittsburgh

Accrued a 6-month rotation during the first year of CAP fellowship. Monday through Friday from 8 am to 5 pm. The fellow is expected to provide care for 60 minute visits, and any additional time is used for consultation. Fellows should be supervised for 60 min.


Table 2: Advanced Milestones that can be Assessed in Integrated Care Models

<table>
<thead>
<tr>
<th>Milestone</th>
<th>PC1</th>
<th>PC2</th>
<th>PC3</th>
<th>PC4</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>1</td>
<td>4</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>II</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>III</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td>4</td>
</tr>
</tbody>
</table>

- Usher, MD
- Craigus Uscher, MD
- Sarah Gibbons, MD
- Karen Saroca, MD

Competencies: The Milestones

Several Advanced ACCM milestones for Child and Adolescent Psychiatry can be assessed in integrated care training (Table 2).