The BRAIN TRUST NETWORK [BTN]
Meeting Notes

Tuesday, February 11, 2020
4:30-5:30 pm
UTEP Health Science Center and School of Nursing Building
Room 384

Attending:
Maria Carrillo, Luis Chavarria, Valeria Contreras, Jaime Diaz, Dr. Amy Field, Claudia Fuentes, Nicole Gonzales, Rene Hurtado, Dr. Jacob Martinez, Dr. Holly Mata, Kristen Ortega, Dr. Krista Powell, Guadalupe Quezada, Claudia Fuentes, Christine Zimmerly

Welcome and Introductions:
Dr. Holly Mata convened the meeting at 4:35 pm and called for brief introductions.

Special Presentation - "What is the Child Psychiatry Access Network (CPAN)"
Sarah Martin, M.D., Texas Tech Health Science Center El Paso Department of Psychiatry Chief, Division of Child and Adolescent Psychiatry, Director, Psychiatry Residency Training Program, and Assistant Professor, provided a presentation on the opportunity developing as a result of the passing of Senate Bill 10 during the 86th Legislative Session. She summarized the events leading to the development of the Texas Child Mental Healthcare Consortium made up of Chairs of Psychiatry and other state leaders. Their charge is to implement a model program to share research among the medical schools and increase availability of child psychiatry consults for primary care and pediatric providers to care for their patient’s mental health needs. Dr. Martin responded to numerous questions resulting in a lively discussion from the group. Presentation slides are included with these notes.

Updates:
Punto de Partida is coordinating with Project Vida and El Pasoans Fighting Hunger to provide food packs at their location.
El Paso Child Guidance Center is providing trainings in Trauma Informed Care. The trainings are offered in 10 sessions 2 hours per session per week. For more information contact Guadalupe Quesada at 915-562-1999.
Emergence Health Network is working hard to provide CIT trainings for law enforcement. They are also working with the El Paso Jewish Federation to provide a training entitled “The Israel Trauma Coalition’s Emergency Preparedness and Response Workshop for First Responders, faith-based leaders and area clinicians.”
UTEP School of Nursing’s new Dean is Dr. Leslie Robbins, and long-time member of the Brain Trust and the reason the Brain Trust can meet in Room 384 of the UTEP College of Health Sciences and School of Nursing Building.

Congratulations Dean Robbins and thank you for your ongoing support of the Brain Trust!

Next Meeting:
The Brain Trust now has a standing meeting time of 4:30 pm every 2nd Tuesday of the month.

The Next Brain Trust Network meeting is scheduled for 4:30 pm, Tuesday, March 10th in room 384 at the UTEP Health Sciences Center and School of Nursing Building.
Child Psychiatry Access Network

- Senate Bill 11-school safety
- Texas Child Mental Health Care Consortium
- 12 medical schools
- Each medical school has its own region
- Critical shortage of child psychiatrists
Population of Children between 5 and 18 Years Old

Ratio of population to pediatrician

Population to Pediatrician
- At or below 1743.6
- 1743.7 to 3487.2
- 3487.3 to 5230.8
- More than 5230.8
- No Pediatricians

Ratio of child population to family practice

Population to Family Practice
- At or below 997.18
- 997.19 to 1994.36
- 1994.37 to 2991.54
- More than 2991.54
- No Family Practice

Catchment Areas
Early Intervention

Half of all mental health conditions manifest by age 14.

Interventions work best at this early stage, when symptoms are less severe, more treatable, and more readily prevented from escalating to more complex conditions.

By young adulthood, 75% of lifetime cases have presented.

Early Detection and Intervention + Appropriate Treatment
How Mental Health Needs Present in Primary Care

• Anxiety
• Depression
• ADHD
• Trauma
• Substance Use
• Psychosis
Nearly 30 states have implemented Child Psychiatry Access Programs (CPAPs).

The Massachusetts Child Psychiatry Access Program (MCPAP), established in 2004, is the longest running program.

The cost of MCPAP is approximately $2 a year per child.

MCPAP has three academic hubs across the state that provide consultation to PCPs for the mild to moderate mental health needs of their patients. Each hub covers up to 500,000 children and youth.

The Child Psychiatry Access Network (CPAN), the Texas CPAP model, will be a statewide system of regional children’s behavioral health consultation and referral hubs located at academic medical centers.
CPAN is a network of regional behavioral health consultation hubs located at academic medical centers across Texas. An example of staff within a regional CPAN hub includes the following: child psychiatrists, a behavioral health clinician, a referral specialist, and a program coordinator.

- **Telephonic clinical consultation** during business hours with a child psychiatrist or behavioral health clinician.
- **Care coordination** for assistance with referrals to community mental health services.
- **Continuing professional education** designed for primary care providers.
Workflow

- Pediatrician calls with question
- Behavioral Health Consultant (BHC) takes call for triage.

- What intervention is needed?
  - Refers to Psychiatrist on call (CAP)
    - CAP consults Pediatrician for 10-15 min about question.
    - CAP documents encounter in Trayt.

- BHC provides brief intervention for patient.
- BHC provides resources based on need.

- BHC creates and faxes letter of disposition to pediatrician's office.
Texas Child Health Access Through Telemedicine (TCHATT)

- The TCHATT component of SB 11 is intended to fund the establishment of telehealth programs for identifying and assessing behavioral health needs and providing access to mental health care services in the schools.
- Students referred to this program will receive a comprehensive evaluation and referral for continuing services.
- Target population - at risk for violence.
- If medication is indicated, we will work with students’ pediatricians.
Texas Child Health Access Through Telemedicine (TCHATT)

A Texas initiative to improve the mental health of our children
TCHATT

• Texas legislature funding child psychiatry services- Senate Bill 11
• Services in our region will be provided by Texas Medical Schools
• High Risk children are the focus
• Maximum of 4 sessions (Comprehensive evaluation and/or brief treatment)
Timeline for SB 11

August 23, 2019
First meeting of Texas Child Mental Health Care Consortium

November 30, 2019
Implementation plan for SB 11 provisions, including identifying CPAN hubs, due to LBB

January 1, 2020
Funding flows to hubs

December 1, 2020
Biennial legislative report, due every even-numbered year
Purpose

• School shootings - brought the attention
• Focus on those at risk for illegal behavior
  – Legal problems
  – Alternative school placements
  – Suspensions
  – Absenteeism especially if at risk of not graduating
  – Psychiatric problems contributing to behavior
  – Not intended for those already in psychiatric treatment
Implementation

• Insurance is not required
• Schools will need to
  – Identify students
  – Gather info
  – Obtain initial consent
  – Provide private space
Implementation

• Space: can be centralized or by school
• Start in the high schools
• Therapist → initial evaluation
• Additional 3 sessions (if needed)
• Referrals to other existing programs
Information needed prior to appointment

• Consent for evaluation from parents
• Vanderbilt (ADHD)
• PHQ-9A (depression)
• SCARED (anxiety)
Information needed prior to appointment

• IEP/ARD or 504
• Psychiatric History form completed by parents
• Grades
• Disciplinary history
• Attendance record
After the 4 sessions

- A comprehensive treatment plan will be produced
- If therapy is recommended
  - Community therapist
- If medication is part of the treatment plan
  - Primary Care provider