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Conference Abstract

Using Social Work Interns to Assist in Creating Integrated Pediatric Primary Care

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Abstract

Introduction and description: It is estimated that less than twenty-five percent of children in the United States with diagnosable mental health conditions are receiving treatment (1). Expanding services within the primary care office would provide early screening, identification, and treatment for mental health conditions. Maryland's BHIPP program (a partnership between Johns Hopkins University, University of Maryland, and Salisbury University, with funding from Maryland's Behavioral Health Administration and the Maryland State Department of Education) was established in 2012, and consists of a phone consultation line for pediatric medical providers, resource mapping, professional training, and the placement of co-located MSW social work interns. BHIPP Salisbury explores collaborative relationships with medical providers, student interns, and faculty field supervisors. Through the training, placement, and supervision of the social work student interns, the program increases early access to screenings, and increases care capacity in the pediatric medical office.

Theory of change: BHIPP Salisbury utilizes Systems Theory to examine the patient and their family from an ecological context. This approach allows patients to receive coordinated services in primary care to address health, basic needs, and behavioral health concerns. The target populations are the children and families served within medical practices.

Highlights: The innovative components of the Salisbury model include the selection, training, and supervision of master's level social work student interns in screening and brief behavioral health intervention services in the primary care setting. Irregular contact between primary care and specialty care providers is a barrier to integrated care (2). BHIPP Salisbury addresses this barrier by providing consultation services in this host environment and serving on the inter-professional care team. As a member of this care team, the student interns support increased access to care, and increase the capacity of care provision in rural, underserved pediatric primary care medical offices.

Sustainability and transferability: There is evidence of sustainability and transferability in this emerging program. Thus far, 18 interns have participated in the program with over 900 patient contacts. Year 2 yielded a contact rate increase of 65%. Year one began with 11 partner medical

providers and Year 3 has increased to 29. Sustainability is supported by the growth rate, publicity, and state-level funding support. Consistency in practice participation and continued growth supports the applicability of this model across host settings.

Discussion and lessons learned: The BHIPP Salisbury model is an example of effective implementation of integrated behavioral health care in a rural practice setting. The innovations have encouraged increased access to services for clients in a largely underserved population. The student interns are also able to develop a unique skill set focused on implementing advanced clinical skills within a pediatric host environment.

There have been many lessons learned during the implementation of the program. A major insight involves the identification of the needs of pediatric care providers specific to rural settings. Various challenges which impact effective inter-professional collaborations between interns and medical professionals have also been discovered.

Keywords

social work interns; host environment; collaborative care; pediatric

References

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