Introduction

Formal mental health curriculum to train pediatric (Pedi) and Med-Peds residents is often limited. This results in pediatricians feeling ill-equipped to assess and treat children with mental health concerns. Similarly, child psychiatry fellows often have minimal pediatric training, which can limit their understanding of common pediatric illnesses and well-child development.

Our goal was to increase resident comfort in screening, assessing, and treating child mental health disorders, while giving them experience in curbside consultations.

Methods

- Senior pediatric residents were paired with child psychiatry fellows (buddy).
- Pediatric residents shadowed their “buddies” at the child psychiatry clinic during adolescent and community rotations.
- Arranged to see patients with mental health concerns jointly with their “buddies” at the on-site pediatric clinic.
- Both parties were available for phone or e-mail consultation.
- Residents were given baseline and post-implementation surveys about comfort with pediatric mental health concerns and were asked to evaluate the buddy collaborative.

Pre-Survey Results

- Pre-survey data completed by 77% of the paired residents.
- At baseline, 60% of residents felt comfortable with ADHD while only 4% felt comfortable managing PTSD, bipolar disorder, and disruptive behavior disorders.
- 96% of residents “believe” that patients expect them to be familiar with their mental health issues and their management.
- Only 35% agreed that they know enough about childhood psychiatric disorders to adequately care for children and adolescents as a pediatrician.

![Chart showing resident reported clinical exposure to child psychiatry in medical school.](Image)

Post-Survey Results

- Post-implementation survey was completed by 48% of paired residents.
- Pediatric residents contacted their buddy 0-5 times during the first year.
- Child psych fellows contacted their buddy 0-3 times during the first year.
- Of those who consulted their buddy, 67% reported helpful experiences.
- After implementation, all paired residents reported having the skills necessary to have a collaborative relationship with mental health providers.
- 80% felt they had adequate knowledge to care for children and adolescents with psychiatric disorders.
- 90% of residents agreed that they know how to meet the needs of a psychiatrist/mental health care provider compared to 67% in pre-survey group.

![Chart showing resident reported level of knowledge for the diagnosis and treatment of common psychiatric disorders.](Image)

Summary

- Pairing pediatric residents with child psych fellows in this unique and collaborative “buddy” system allowed for helpful, timely and effective management of children with mental health illnesses.
- This initiative will help our residents continue to strengthen relationships with mental health providers in their community as they strive to develop Patient-Centered Medical Homes.
- Enthusiasm for this program was robustly positive among residents.
- Relationships between buddies required some effort to develop.
- Model requires modest buddies required some effort to develop.

Future Directions

- Expansion of program to include all resident training levels.
- Quarterly check-in with pairings to discuss “buddy” experiences and evaluate opportunities to improve system.
- Continued joint educational topics on mental health and pediatric primary care.

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Contact Information

Christopher Motyl DO - motylc@mmc.org