

BRIEFING POINTS

Highlights of the Community Access to Child Health (CATCH) Study: 2007 Survey Results

STUDY DESIGN AND PURPOSE

The key objectives of this study were to gather information from health care providers (i.e., pediatricians, family practice physicians, physician assistants, and nurse practitioners) in the Fargo-Moorhead metropolitan area (composed of Cass County, North Dakota, and Clay County, Minnesota) about current practices, barriers, and opportunities in identifying mental health concerns in children ages 0 to 5. A list of the target group of providers was provided by Clay County Public Health. The survey design used a census rather than a sample of providers; therefore, the typical discussion of standard error and confidence levels are not applicable. The census consisted of a mailing to all 232 providers on the list (see Table 1). A total of 96 surveys were returned for a response rate of 41%. Of the 96 surveys returned, 52 surveys (54% of those returned) were from providers who do see children ages 0 to 5 and thus were analyzed for this study. Data collection began in July 2007 and was completed in September 2007. The report and briefing points are available on the North Dakota State Data Center website at www.ndsu.edu/sdc/publications.htm.

Table 1. Survey status by type of health care provider

Type of health care provider	Survey status					
	Mailed		Returned		Analyzed	
	Number	Percent	Number	Percent	Number	Percent
Medical Doctors (MDs)	123	53.0	50	52.1	39	75.0
Physician Assistants	61	26.3	24	25.0	6	11.5
Nurse Practitioners	48	20.7	22	22.9	7	13.5
TOTAL	232	100.0	96	100.0	52	100.0

KEY FINDINGS

Identification and Treatment of Mental Health Issues in Children Ages 0 to 5

Providers were asked about methods they utilize when *identifying* mental health issues in children ages 0 to 5. The vast majority of providers said they use:

- Observations in the office by themselves or by nursing staff (96%)
- Previous documentation by other providers of mental health issues in patients' medical records (94%)
- Information from or questions asked by parents/guardians when identifying mental health issues (92%)

Providers were also asked about methods they utilize when *treating* mental health issues in children ages 0 to 5.

- 71% of providers said they evaluate themselves and then refer out for management
- 69% of providers said they refer out for evaluation and management
- 56% of providers said they evaluate and begin management themselves, then refer out for consultation

Barriers to Identifying and Treating Mental Health Issues in Children Ages 0 to 5

Providers were asked to identify the barriers relating to training, time constraints, external issues, and reimbursement/financial issues they experience when identifying and treating mental health issues in children ages 0 to 5.

Barriers relating to *training*:

- Treating mental health problems may be more of a barrier than identifying mental health issues; 58% of providers said they lack training in treatment of mental health problems, whereas 33% of providers said they lack training in identifying mental health problems.
- Confidence of the provider is also a barrier; 54% of providers said they lack confidence in their ability to treat mental health problems with counseling, 48% said they lack confidence in their ability to treat mental health issues with medication, and 42% said they lack confidence in their ability to treat mental health problems in general.

Barriers relating to *time constraints*:

- 79% of providers said long waiting periods for mental health providers to see the referred child is a barrier
- 60% of providers said lack of time in overall schedule to treat mental health problems is a barrier
- 46% of providers said lack of time during appointment to accurately diagnose is a barrier

Barriers relating to *external issues*:

- 67% of providers said the lack of providers with expertise to refer to is a barrier
- 58% of providers said the non-compliance of family members/guardians is a barrier

Barriers relating to *reimbursement/financial issues*:

- 33% of providers said unfamiliarity with CPT (Current Procedural Terminology) codes that reimburse for treating child mental health problems is a barrier
- 25% of providers said concern about liability coverage for treating child mental health problems is a barrier
- 25% of providers said inadequate reimbursement for treating child mental health problems is a barrier

Future Opportunities

Providers were asked to rate the priority of possible future opportunities relating to mental health services for children ages 0 to 5 (using a one to five scale where one is “not a priority” and five is a “high priority”).

On average, providers gave high priority ratings to:

- Access to referrals/referral sources when treating mental health issues (**mean=4.37**) (50% said “high priority”)
- A list of providers who identify and treat mental health issues (**mean=4.26**) (52% said “high priority”)

On average, providers gave moderately high priority ratings to:

- Greater access to resources in treating mental health issues (**mean=4.00**)
- A standard screening tool with which to identify mental health issues (**mean=3.91**)
- Information regarding the referral process when identifying mental health issues (**mean=3.82**)
- Communication/collaboration with other health providers who treat mental health issues (**mean=3.81**)

Patient Base

Providers were asked about the children ages 0 to 5 they see in an average month.

- On average, providers estimated they see **90** children ages 0 to 5 in an average month.
- On average, providers indicated that **47%** of the children they see in an average month are infants and toddlers (ages 0 to 2) and **46%** are preschoolers (ages 3 to 5).
- 90% of providers see children with **speech and learning issues** (mean percent of children=5%)
- 89% of providers see children with **behavioral disorders/hyperactivity/possible ADHD** (mean percent of children=6%)
- 89% of providers see children with **developmental delays** (mean percent of children=5%)
- 85% of providers see children with **behavioral/social/emotional difficulties** (mean percent of children=9%)
- 69% of providers see children with **mood disorders/possible mood disorders** (mean percent of children=3%)
- 89% of providers see children who are **Native Americans and other minorities** (mean percent of children=9%)
- 71% of providers see children who are **Refugees/New Americans** (mean percent of children=7%)
- 19% of providers said that more than 10% of the children they see are uninsured

Profile of Health Care Provider

- 75% of the providers who completed this survey and see children ages 0 to 5 are Medical Doctors (MDs)
- 52% of providers practice in a multi-specialty health system, 19% practice in a 1 to 5 physician setting
- 62% of providers indicated their area of expertise is family practice, 23% said pediatrics
- 79% of providers have a full-time appointment
- 63% of providers are 35 to 54 years of age
- 54% of providers are male
- 64% of providers have been practicing more than 10 years, 15% have been practicing between 5 and 10 years
- 44% of providers said they have attended continuing education events relating to infant/child mental health issues within the last five years, 50% have not