



Core Pediatric Mental Health Competencies

The Aim of This Tool

The Accreditation Council for Graduate Medical Education has organized competencies into 6 domains: patient care, medical knowledge, interpersonal and communication skills, practice-based learning and improvement, professionalism, and systems-based practice. This framework was used to develop a detailed outline of pediatric mental health competencies for use by pediatric educators. This tool is a quick reference to the competencies that may be most relevant to your practice.

Core Clinical Skills

Pediatricians providing care to children and adolescents can maximize the patient's and family's health, agency, sense of safety, respect, and partnership in care by developing competence in performing the following activities:

Promotion and Primary Prevention

- Promote healthy emotional development by providing anticipatory guidance on healthy lifestyles and stress management.
- Routinely gather an age-appropriate psychosocial history, and apply appropriate tools to assist with data gathering.

Secondary Prevention

- Identify and evaluate both risk factors to healthy emotional development and emerging symptoms that could cause impairment or suggest future mental health problems, and apply appropriate tools to assist with screening and to refer to community resources when those steps are appropriate (ie, parenting programs).

Assessment

- Recognize mental health emergencies such as suicide risk, severe functional impairment, and complex mental health symptoms that require urgent mental health specialty care.

- Analyze and interpret results from mental health screening, history gathering, physical examination, and observations to determine what brief interventions may be useful and whether a full diagnostic assessment is needed.
- In school-aged children and adolescents, diagnose the following disorders or problems: attention-deficit/hyperactivity disorder, common anxiety disorders (eg, separation anxiety disorder, social phobia, generalized anxiety disorder), depression, and substance use.

Treatment

- Apply fundamental (eg, common factors, motivational interviewing) communication skills to engage youth and families and to overcome barriers to their help seeking for identified social and mental health problems.
- Apply common-factors skills and common elements of evidence-based psychosocial treatments to initiate the care of the following populations:
 - Children and youth with medical and developmental conditions who manifest comorbid mental health symptoms
 - Parents with depression and the children of those parents
 - Infants and young children manifesting difficulties with communication or attachment or manifesting other signs and symptoms of emotional distress (eg, problematic sleep, eating behaviors)
 - Children and adolescents with at least one of the following signs and symptoms:
 - Anxious or avoidant behaviors
 - Exposure to trauma or loss
 - Impulsivity and inattention, with or without hyperactivity
 - Low mood or withdrawn behaviors
 - Disruptive or aggressive behaviors
 - Substance use
 - Learning difficulties



Treatment (*continued*)

- When a higher level of care is needed for children and adolescents with one or more of the mental health problems listed above, integrate—alone, with the practice care team, or in collaboration with mental health specialists—patient and/or family strengths, needs, and preferences; the clinician’s own skills; and available resources into the development of a care plan for those children and adolescents.
- Demonstrate proficiency in selecting, prescribing, and monitoring (for response and adverse effects) attention-deficit/hyperactivity disorder medications and selective serotonin reuptake inhibitors that have a safety and efficacy profile establishing their appropriateness for use in pediatric care.
- Develop a contingency or crisis plan for a child or an adolescent.
- Develop a safety plan with patients and parents of children and adolescents who have suicide risk or depression.
- Apply strategies to actively monitor adverse and positive effects of non-pharmacological and pharmacological therapy.
- Facilitate a family’s and patient’s engagement with and transfer of trust (ie, “warm handoff”) to a mental health professional.
- Demonstrate an accurate understanding of privacy regulations.
- Refer, collaborate, comanage, and participate as a team member in coordinating mental health care with specialists and in transitioning adolescents with mental health needs to adult primary care and mental health specialty providers.

Core Practice Enhancements

Pediatricians providing care to children and adolescents can improve the quality of their practice’s (and network’s) mental health services by developing competence in performing the following activities:

- Establish—within the practice, virtually, or off-site—collaborative and consultative relationships and define respective roles in assessment, treatment, coordination of care, exchange of information, and family support.
- Build a practice team culture around a shared commitment to embrace mental health care as an integral component of

pediatric practice and around an understanding of the impact of trauma on child well-being.

- Establish systems within the practice (and network) to support mental health services; elements may include
 - Preparation of office staff and professionals to create an environment of respect, agency, confidentiality, safety, and trauma-informed care
 - Preparation of office staff and professionals to identify and treat patients with suicide risk and facing other mental health emergencies
 - Electronic health record prompts and culturally and/or linguistically appropriate educational materials to facilitate offering anticipatory guidance and to educate youth and families on mental health and substance use topics and resources
 - Routines for gathering the patient’s and family’s psychosocial history, including conducting psychosocial assessment and/or behavioral assessment
 - Registries, evidence-based protocols, and monitoring and/or tracking mechanisms for patients with positive psychosocial screening results, adverse childhood experiences and social determinants of health, behavioral risks, and mental health problems
 - Directory of mental health and substance use disorder referral sources, school-based resources, and parenting and family support resources in the region
 - Mechanisms for coordinating the care provided by all collaborating providers through standardized communication
 - Tools for facilitating coding and billing specific to mental health
- Systematically analyze the practice by using quality improvement methods with the goal of mental health practice improvement.

Derived from Foy JM, Green CM, Earls MF; American Academy of Pediatrics Committee on Psychosocial Aspects of Child and Family Health, Mental Health Leadership Work Group. Mental health competencies for pediatric practice. *Pediatrics*. 2019;144(5):e20192757. doi:10.1542/peds.2019-2757.

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