PRACTICE TOOLS

Mental Health

Mental Health Practice Readiness Inventory

Scoring Guidelines

The aim of this tool is to help you "score" your practice to determine the strength of your organization's readiness to provide essential mental health services.

To evaluate your practice, use the following scoring system:

1 = We do this well; substantial improvement is not currently needed.

2 = We do this to some extent; improvement is needed.

3 = We do not do this well; significant practice change is needed.

For areas with scores of 2 or 3, determine which ones align with a strong interest of the practice team and are feasible in the broader context of the health system. These can become the priority for practice change.

Mental Health Practice Readiness: Community Resources				
Topic	Score			Target
Inventory of referral resources	1	2	3	Practice has an up-to-date inventory of accessible developmental and behavioral pediatricians, adolescent medicine specialists, or child psychiatrists (or any combination of those); community- and school-based mental health and substance use professionals trained in evidence-based therapies, including trauma-focused care; early intervention program services; special education program services; evidence-based parenting education program services; child protective agencies; youth recreational program services; family and peer support program services; evidence-based home visiting program services; and mental health care coordinators.
Core services	1	2	3	Practice team is knowledgeable about eligibility requirements, contact points, and services of the programs and providers listed above and type or types of payment they accept.
Collaborative relationships	1	2	3	Practice team has collaborative relationships with school- and community-based providers of key services.

Mental Health Practice Readiness: Health Care Financing				
Topic	Score			Target
Third-party payment	1	2	3	Practice has access to specialty provider lists and authorization procedures of major public and private health plans insuring patients in the practice and has processes for addressing claim denials and gaps in benefits and payment.
Coding	1	2	3	Practice has coding and billing procedures to capture payment for primary care services related to mental health and covered by major health plans.

Mental Health Practice Readiness Inventory

Mental Health

Mental Health Practice Readiness: Support for Children, Adolescents, and Families			
Topic	Score		Target
First contact	1	2	3	Staff has good "first-contact skills" to help children, adolescents, and families feel welcome and respected.
Culturally effective care	1	2	3	Practice team is supportive of people facing mental health challenges, by demonstrating sensitivity to cultural differences and avoiding stigmatizing language. Primary care practice team has worked together to understand structural racism and its impact on health and ensures care is delivered to achieve racial and ethnic equity.
Mental health promotion	1	2	3	Practice team promotes the importance of mental health through posters, practice websites, newsletters, handouts, or brochures and by incorporating conversations about mental health into each office visit.
Confidentiality	1	2	3	Practice team assures children, adolescents, and families of confidentiality in accordance with standard medical ethics and state and federal laws.
Adolescents	1	2	3	Practice team is prepared to address mental health and substance use needs of adolescents.
Engagement	1	2	3	Practice team actively elicits mental health and substance use concerns, assesses patients' and families' readiness to address them, and engages children, adolescents, and families in planning their own mental health care at their own pace.
Self-management and family management	1	2	3	Practice team fosters both self-management and family management (eg, provides patient and family educational materials appropriate to patient's and family's literacy level and culture, articulates patient's and family's roles in the care plan, stays abreast of online and print self-care resources).
Referral assistance	1	2	3	Practice is prepared to support families through referral assistance and advocacy in the mental health referral process.
Care coordination	1	2	3	Practice team routinely seeks to identify children and adolescents in the practice who are involved in the mental health specialty system and, once they do, ensures that those patients receive the full range of preventive medical services and monitors their mental health or substance use conditions.
Special populations	1	2	3	Practice team is prepared to address mental health needs of special populations within the practice (eg, those with adverse childhood experiences and other social adversities; those with disrupted families caused by military deployment, separation, divorce, incarceration, or foster care; lesbian, gay, bisexual, transgender, queer/questioning, intersex, and asexual/aromantic/agender children and adolescents; those in the juvenile justice system; those whose family members have mental health or substance use problems; those who have experienced immigration, racism, homophobia, homelessness, violence, or natural disasters).
Family centeredness	1	2	3	Practice has family members (parents and youth) reflective of the diversity of the practice involved in advising the practice; practice team periodically assesses the family centeredness of the practice.
Trauma-sensitive care	1	2	3	Practice team is knowledgeable about the impact of trauma; considers the impact of adversities and traumatic life events in the context of behavioral concerns and pays attention to resilience factors and trauma reminders; offers support, resources, and referral to evidence-based trauma services; monitors patient and family adjustment over time; and attends to staff members' psychosocial needs with attention to impact of secondary traumatic stress.
Quality improvement	1	2	3	Practice periodically assesses the quality of care provided to children and adolescents with mental health problems and takes action to improve care in accordance with those findings.

Mental Health Practice Readiness Inventory

Mental Health

Mental Health Practice Readiness: Clinical Information Systems and Delivery System Redesign				
Topic	**Score**			**Target**
Registry	1	2	3	Practice has a registry in place for identifying children and adolescents with risks (patient or family), positive results of mental health or substance use screening, and mental health or substance use problems (including those not yet ready to address problems).
Recall and reminder systems	1	2	3	Recall and reminder systems are in place to identify missed appointments and to ensure that children and adolescents with mental health or substance use concerns (including those not ready to take action) receive appropriate follow-up and health supervision services.
Medication management	1	2	3	Practice has a system for monitoring medication efficacy, adverse effects, adherence, and renewals.
Emergency	1	2	3	Practice has a crisis plan in place for the handling of psychiatric emergencies, including suicidality.
Information exchange	1	2	3	Practice has office procedures to support collaboration (eg, routines for requesting parental consent to exchange information with specialists and schools, fax-back forms for specialist feedback, psychosocial history accompanying medical records of children and adolescents in foster care).
Tracking systems	1	2	3	Practice has systems in place and staff roles assigned to monitor patients' progress (eg, checks on referral completion, periodic telephone contact with the family and therapist, periodic functional assessment, periodic behavioral scales from classroom teachers and parents, communications to and from the care coordinator) as appropriate to the setting.
Care plans	1	2	3	Practice includes patients, families, schools, agency personnel, primary care team, and any involved specialists in developing a comprehensive plan of care, including a definition of each party's role, for a child or an adolescent with one or more mental health problems.
Collaborative models	1	2	3	Practice team is prepared for participation in the full range of collaborative approaches and has explored innovative models (eg, a colocated mental health specialist, a child psychiatry consultation network, telepsychiatry) to fill service gaps and enhance quality.
Interactive web-based tools	1	2	3	Practice is current with web-based treatment options.
Screening and assessment tools	1	2	3	Office systems are in place to collect and score findings from mental health and substance use screening and assessment tools at or before scheduled health supervision visits and visits scheduled for a mental health concern and to perform a brief mental health update at immediate care visits and visits scheduled to monitor chronic conditions as appropriate to the setting.

Mental Health Practice Readiness Inventory

Mental Health

Mental Health Practice Readiness: Decision Support for Children			
Topic	**Score**		**Target**
Functional assessment	1	2	3	Clinicians use validated functional assessment scales to identify and evaluate children and adolescents with mental health problems and to monitor their progress in care.
Clinical guidance	1	2	3	Clinicians have access to reliable, current sources of information concerning diagnostic classification of mental health and substance use problems, evidence about safety and efficacy of psychosocial and psychopharmacological treatments of common mental health and substance use disorders, and information about the safety and efficacy of complementary and integrative medicine therapies often used by children, adolescents, and families.
Psychiatric consultation	1	2	3	Clinicians have access to a psychiatrist with expertise in pediatric and adolescent psychiatry for consultation and guidance in assessment and management of their patients' mental health problems.
Protocols	1	2	3	Practice has tools and protocols in place to guide assessment and care and to foster self-treatment of children and adolescents with common mental health and substance use conditions.
Screening and surveillance	1	2	3	Clinicians routinely use psychosocial history and validated screening tools at health supervision visits and brief mental health updates at immediate care visits to elicit mental health and substance use problems and to identify patient and family strengths and risks.

Our Practice Summary

Topics Scored "1": What We Do Well

Topics Scored "2": Where We Need a Little Improvement

Topics Scored "3": Where We Need Significant Change

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN®