

SHARED DECISION-MAKING IN PEDIATRIC BEHAVIORAL HEALTH

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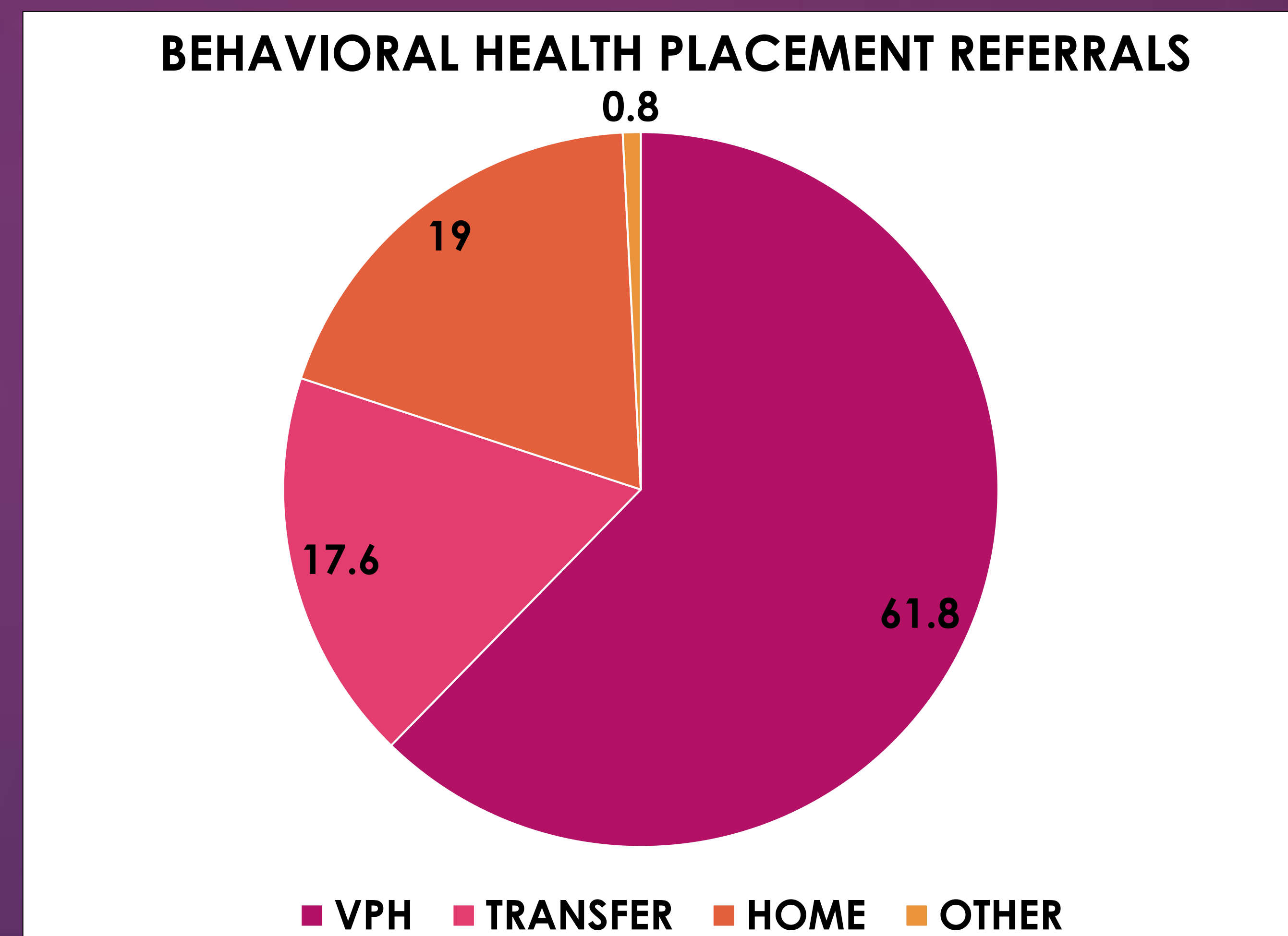
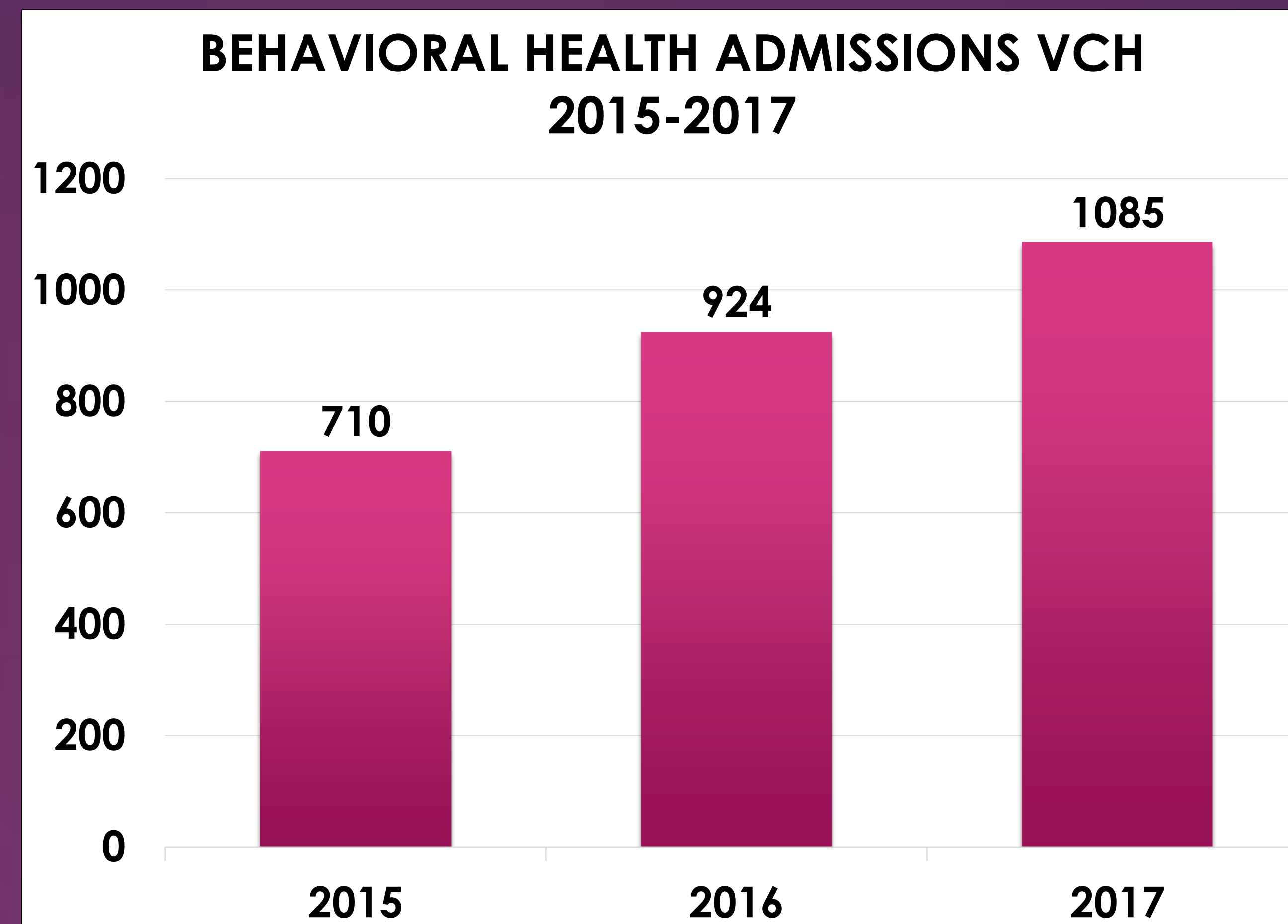
BACKGROUND

- Pediatric behavioral health population presenting to Vanderbilt Children's Hospital (VCH) has quadrupled over last 4 years.
- Most of these behavioral health patients require acute psychiatric stabilization.
- There are only 9 child / adolescent acute psychiatric facilities in the state; only 6 of these accept children less than age 13 years old.
- Many parents choose to stay and wait for transfer to Vanderbilt Psychiatric Hospital (VPH) versus transfer to outside psychiatric facility.
- When there is no bed availability at VPH, parents are often oppositional to transfer and remain at Vanderbilt Children's Hospital to wait for availability.
- This creates increased length of stay at VCH, increased frustration of patient, family, and staff, and decreased satisfaction of patient, family, and staff.

LITERATURE REVIEW

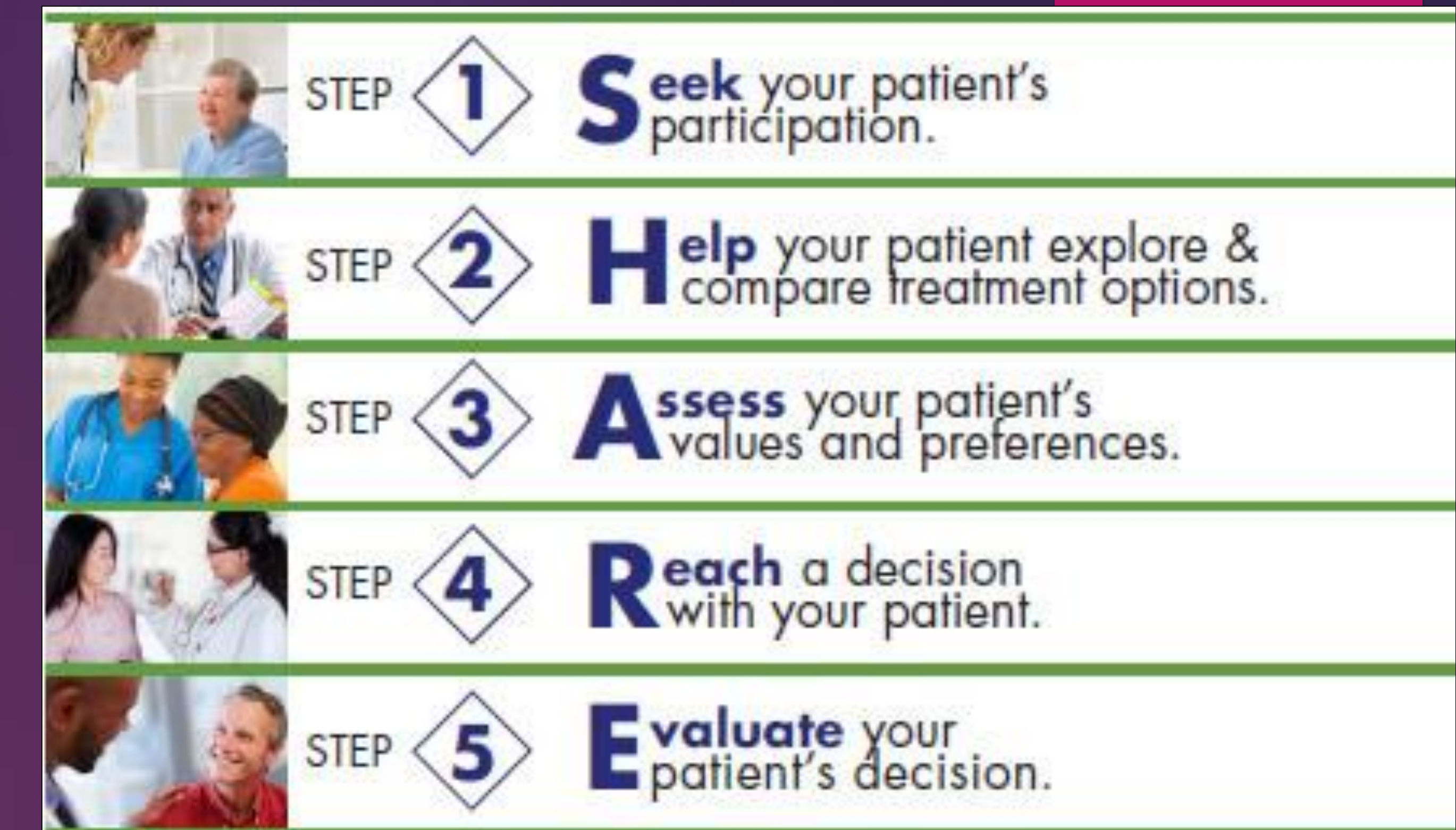
- Shared-Decision making is a supported, mutual, and dynamic process of information provision and exchange of the best evidence for making decisions for health care.
- Shared decision making is well-supported in pediatric medicine; however, evidence of use in pediatric behavioral health is scarce.
- Use of shared decision making, or lack thereof, directly correlates with degree of impairment with behavioral health
- Gaps are evident in the literature in relation to children's hospitals and behavioral health management
- The use of decision aids leads to increased knowledge, decisions consistent with patient values, reduction of passivity and indecision, and decrease in personal and institutional decisional conflicts
- Shared decision making is a holistic process encouraging relationship and taking into account whole person values

TABLES/FIGURES



References available upon request

PROPOSAL



SEEK = Multi-disciplinary Rounds
 HELP = Resource Guide
 ASSESS = Case Mgmt / Social Work: Barriers / Creative Problem Solving
 REACH = Communication
 EVALUATE = Reassessment / Relationship- Focused

EXPECTED OUTCOMES

- The use of a Shared Decision-Making Model would be expected to decrease length of stay and increase satisfaction of patients, families, and staff by increasing communication, collaboration, and knowledge.
- A Resource Guide will provide valuable facility information for parents and staff in regard to facility data, visitation, program, and contact information.
- Utilization of the SHARE Approach, a shared decision-making model designed by AHRQ, will be implemented by VCH staff.
- Training for all staff will be implemented to use the SHARE Approach as common language and procedure from admission to discharge on all units.
- Parents will be educated and empowered to utilize other acute placement options within the state.
- Improvements in length of stay will directly impact satisfaction of patients, families, and staff, as well as prove cost-effective and contribute to positive treatment outcomes.