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*AACAP Systems of Care Fellowship Program*

## Introduction

*§The Bellevue Child and Adolescent Outpatient Psychiatry Clinic provides clinical services for children and adolescents in NYC ranging from 2 to 17 years from very socioeconomically and ethnically diverse families. The clinic serves around 500 children and adolescents who reside in the NYC area. Many of the patients have managed Medicaid insurance.*

*§Services include individual psychotherapy, group psychotherapy, family therapy, medication management, special nursery and parenting programs, and the New York City public school located within the Bellevue Hospital Center.*

*§The multidisciplinary team consists of 7 clinical staff (psychiatry attendings, nurse practitioner, social workers, psychologist) and 36 trainees.*

*§The clinic functions as both an independent unit and as part of an NYU-Bellevue Medical Complex that includes multiple inpatient psychiatric units, the pediatric and adolescent medicine clinics, the pediatric consultation-liaison service, the Child Comprehensive Psychiatric Emergency Program, and the Child and Adolescent Day Treatment Program.*

*§It is also integrated with various community agencies including child welfare services and the state mental health department in order to provide for the needs of one of the most socioeconomically and culturally diverse populations in the country.*

*§Through an administrative chief position I have had the opportunity to learn about how to promote administrative skills in trainees, improving the quality and efficiency of clinical care for youth and families within a complex system of care.*

### The purpose of this poster is to:

*(1) Present various aspects of the administrative clinic experience including challenges, successes, and ongoing projects to improve administrative functions and quality of care.*

*(2) Provide recommendations for other clinics/trainees that may be facing similar challenges.*



## Creating a Manual

One of the initial needs of the clinic was assisting the Clinic Director in the development of a clinic manual for staff and trainees. Especially for trainees, it was important to:

- ✓ Introduce the organization of the clinic, clarify roles and expectations of all staff
- ✓ Explain clinic procedures for patient care in compliance with the NY State Office of Mental Health (OMH) regulations
- ✓ Provide instructions for billing, and
- ✓ Provide guidance for how to manage various crisis or high-risk situations.

Developing this manual was an invaluable learning experience into clinic structure and procedures. Fellows reported that the manual improved their understanding of the procedures of the clinic, and improved their ability to maintain compliance with the regulations. I also created a quick reference guide for fellows to utilize, which further assisted in orientation and compliance.

## Liaison for Fellows

One of the functions of the administrative chief is to serve as a liaison for fellows regarding administrative and clinical issues. This role facilitates communication and adjustment to the clinic.

- ✓ Administrative supervision is held weekly with the Clinic Director for feedback and to discuss any concerns for either fellows or the administrative staff.
- ✓ We have also begun tracking the number of intakes and monthly patient visits for all fellows.
- ✓ A central electronic database has been updated with resources including templates for progress notes, discharge letters, and the new clinic manual

## Clinic Environment

The Bellevue Child & Adolescent Psychiatry Clinic occupies one of the older wings of Bellevue Hospital and faces a great deal of funding limitations. Part of my project included finding ways to make the clinic more inviting and approachable for children, adolescents, and families. This has included:

- ✓ Improving clinic appearance by working with the assistant director of the clinic to repaint, redecorate, and maintain cleaner offices
- ✓ Compiling a list of clinic supplies including crayons, construction paper, board games, and toys to promote good clinical care and training experiences
- ✓ Creating a play room with adequate board games and toys for all clinicians to use with their children and families

## Finances & Billing

Continuing budget cuts for mental health are also affecting child and adolescent community clinics (Begler, 2013). Although the Bellevue clinic is funded by the NYC Health and Hospitals Corporation (HHC), effective billing helps ensure adequate funding and staffing for services. Billing issues for our clinic have included billing under the wrong visit, using non-billable diagnostic codes, notes with insufficient information to ensure billing, inappropriate billing codes, and administrative errors that delayed/prevented billing. Our approaches have included:

- ✓ Providing clear instructions for billing in the clinic manual, with additional reviews during fellow supervisions
- ✓ Promptly notifying providers when billing errors were made
- ✓ Planning for a finance quality improvement project to improve tracking and billing procedures for the clinic



## Meaningful Compliance

Much of the learning has involved how to function in a managed care environment (designed to contain costs) and maintain compliance with OMH regulations (designed to ensure comprehensive patient care), amongst others. Often compliance with regulations (e.g., documentation requirements) can appear to conflict with the need to provide efficient and effective patient care within complex systems (Pumariaga & Winters, 2003). One of the major challenges at Bellevue has been to find ways to achieve meaningful compliance to both the patient and provider, rather than a burden. The creation of a clinic manual has also provided increased clarification of how staff and trainees can ensure compliance with these regulations. Other approaches have included:

- ✓ Encouraging completion of treatment plans during the session
- ✓ Educating trainees about collaborative documentation
- ✓ Regular review of high-risk cases and reporting of adverse events

## Engaging Patients

Reducing missed/cancelled appointments improves clinic efficiency, improves patient services and timely care, and improves the financial viability of the clinic. Studies that have shown that providing appointment reminders, orienting patients to the clinic, and contracting with patients can reduce broken appointments (Macharia *et al*, 1992). For most clinics, the average visit compliance rate is 50%. Various strategies we have worked on to reduce the rate of no-shows include:

- ✓ Improving intake appointment compliance by requiring a 24h phone confirmation, essentially eliminating the clinic waitlist
- ✓ Providing clear and firm expectations of the clinic policy for no-shows, with contracts for when further missed/cancelled appointments will lead to closing patient cases
- ✓ Implementing a system for telephone reminders prior to appointments
- ✓ Tracking outcomes data for visit compliance

## Conclusions

The Bellevue Clinic Administrative Chief experience has provided a wealth of experiences in administrative psychiatry. Most trainee experiences do not emphasize the essential administrative skills that most child psychiatrists will need to navigate post-training. However, the lack of this type of training may leave child psychiatrists ill-equipped to work in community psychiatry positions and lead to higher burnout or leaving to private practice settings. By improving the trainee experience with a community clinic that serves highly underserved and diverse populations, our trainees may well be better prepared (and more likely) to practice in public psychiatry as future leaders in the field. Though these efforts have already resulted in many improvements with visible results that trainees have appreciated, there are many challenges that lie ahead to further improve these areas.

### Bibliography

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