

Behavioral Health Webinar Series for Primary Care

Wednesday, February 13, 2019
Noon to 1:00 p.m.

Non-Medical Management of ADHD in the Primary Care Setting

Presented by: Benjamin Fields, PhD with Lynda Wolfe, PhD and Ujjwal Ramtekkar, MD



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Join by Phone: 1-240-454-0887 Conference ID: 649 077 724

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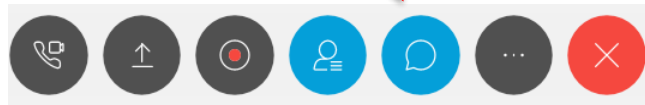
This session is eligible for 1.0 Category 1 CME credit upon completion of the CME Evaluation Survey
A link to the survey will be shared just prior to the presentation

Visit our website!

<https://www.nationwidechildrens.org/specialties/behavioral-health/for-providers/webinar-series>

Reminders

- We have **muted** all participants.
- **Chat with us during the webinar.** To **type a question or comment** for the speaker or a facilitator, type directly into the WebEx chat box.



- This webinar is being recorded.

Non-Medical Management of ADHD in the Primary Care Setting



Presented by Ben Fields, PhD, MEd,
with Lynda Wolfe, PhD, and Ujjwal Ramtakkar, MD

Objectives

- Participants will demonstrate familiarity with clinical guidelines for non-medical intervention for children and adolescents with ADHD, as well as a practical understanding of what that intervention entails
- Participants will demonstrate familiarity with research regarding adherence to the aforementioned clinical guidelines in primary care



Objectives



- Participants will demonstrate an understanding of the importance of parent education regarding evidence-based non-medical intervention for ADHD, as well as key educational points to offer parents.
- Participants will be provided info regarding comprehensive, evidence-based, educational resources to offer parents

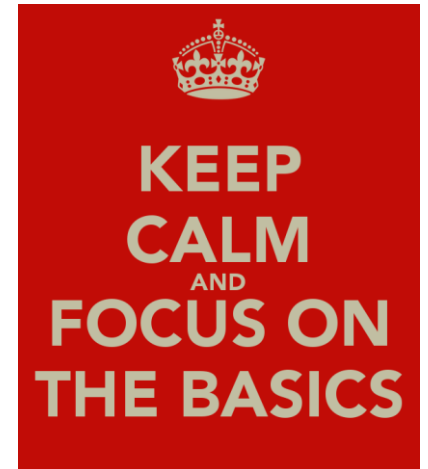
Objectives

- Participants will demonstrate an understanding of common barriers to families accessing evidence-based non-medical intervention for ADHD, as well as ways to mitigate these barriers.



ADHD – The Basics

- Differing presentations: Predominantly Inattentive, Predominantly Hyperactive-Impulsive, Combined (most common)
- Biologically based, neurodevelopmental disorder
- Best estimate: about 5% of kids
- As heritable as height (has implications for intervention)
- Typically chronic: managed, not cured



ADHD – Associated Problems



- ↑ accidental injuries
- ↑ dental problems
- ↑ acne
- ↑ auto accidents
- ↑ AOD abuse
- ↑ obesity
- ↑ teen pregnancy
- ↑ risk for STD

ADHD – Associated Problems



- ↑ CHD in adulthood
- ↑ suicide attempts
- ↑ early death
- ↑ hospitalization
- ↑ ED use
- ↑ medical costs
- Likely lower life expectancy

Evidence-based care for ADHD

- Four primary facets:
 - Medication (clearly most effective in decreasing core symptoms of ADHD, though not our focus today)
 - Behavioral therapy
 - Parent education
 - School support plan (e.g., IEP, 504 Plan)
 - Symptom monitoring via teacher rating scales
 - Symptom improvement doesn't always equate to improvement in school performance (e.g., grades)



Evidence-based care for ADHD

- AAP Guidelines (2011) suggest:
 - Behavior tx for 4-5, meds if sig. impairment persists
 - Meds and/or behavior tx, preferably both, for 6-11
 - Meds and possible behavior tx for 12-18
- However, 2014 *Pediatrics* study by Epstein et al. (Cincinnati Children's/NCH)
 - Meds prescribed 93% of cases
 - Behavior tx recommended only 13% of cases



Families referred for behavioral tx for ADHD often expect/request (but we do not recommend):

- “Coping skills” for the *child* to “learn to manage ADHD”
- “Anger management” skills for the child
- Executive functioning training for the child
- Talk therapy to help the child be more motivated
- Talk therapy to improve self-esteem (without addressing the functional impairments that cause it)



So what is “Behavioral Therapy”?

- NOT what parents are typically expecting when they hear “therapy”!
 - Parents*/teachers/environment as primary conduits for change, not the child him/herself (i.e., therapist works with parents and school to implement strategies and structure environment to improve functioning) ***The catch: remember heritability of ADHD!**
- Little evidence that working directly with child/adol with ADHD results in meaningful decrease in impairment (e.g., no CBT)



ADHD-related impairment typically involves deficient:



- **MONITORING:** noticing what you are doing and remembering what you are supposed to be doing at that time



- **MOTIVATION:** having a reason to complete the task at hand

When the problem is monitoring information:

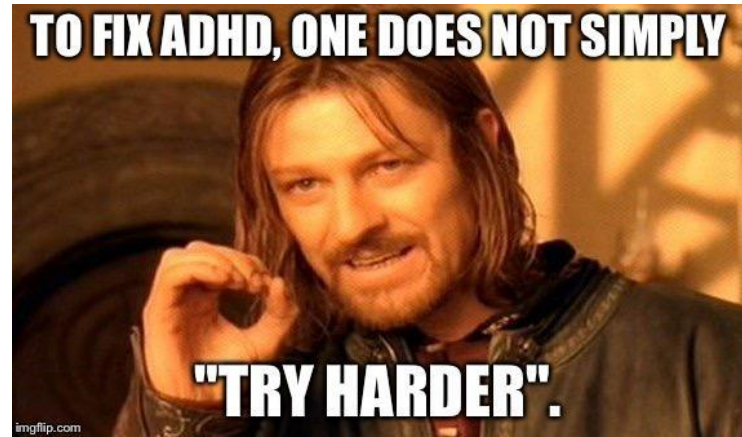
- Examples: forgetting, losing things, confusion, overwhelmed by amount of information
- Intervention: make information external, permanent, and step-by-step, rather than internal, temporary, and given in large chunks

Externalizing Expectations and Necessary Information

- Print instructions (e.g., lists, Post-Its)
- Visual schedules and reminders
- Organizational tools
- Electronic monitoring
- Methods of tracking time (e.g., timers)
- Encourage routines



When the problem is motivation:



- Limit the lectures
- Adults hold child accountable on *regular* basis (predictability of consequences is key)
- Consequences should be quick and external (e.g., access to electronics today, rather than satisfaction of earning a good grade at the end of the semester)

Summary: Key Info for Parents

- Therapist gives *parents* strategies to help child function better.
- Change environment around child, not child him/herself.
- Intervention works, as long as it's maintained (analogies: glasses, prosthetics, insulin). If you stop using it, the problem is still there.
- ADHD is deficit in performance, NOT knowledge. Kids know what to do, but can't do it consistently. Thus, just giving them ideas ("teaching skills") doesn't fix it.
- Intervention must be in place at the "point of performance" (e.g., school problems typically require school implementation of supports).
- Treatment requires intensive parent participation, but sessions may be intermittent after an initial course of treatment.



Parent Education on ADHD

Takes time and access to good info for parents to make cognitive shift to participate optimally in behavioral tx. Where to start?

YouTube: “Essential Ideas for Parents” by Russell Barkley, PhD

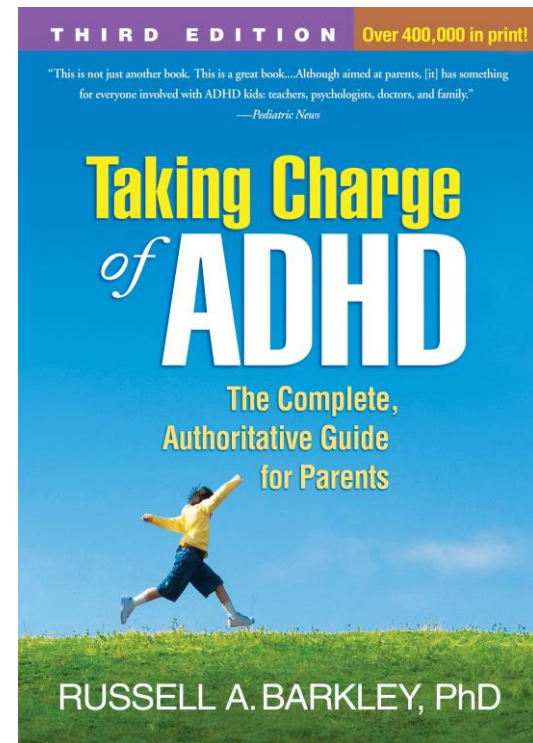
- Perfect “starter kit” for parents
- Long (3 hrs) – best digested in segments
- Great way for parents to use time productively while waiting for tx linkage
- Feedback: “This video changed my life...”
- Free, easily accessible!
- <https://www.youtube.com/watch?v=SCAGc-rklfo>



Parent Education on ADHD

Book, *Taking Charge of ADHD, Third Edition: The Complete, Authoritative Guide for Parents*, by Russell Barkley, PhD

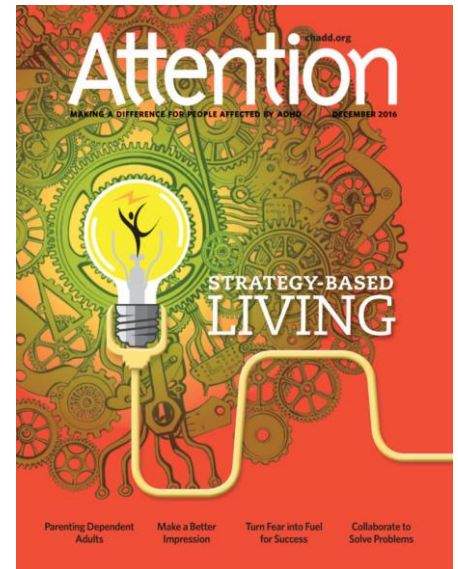
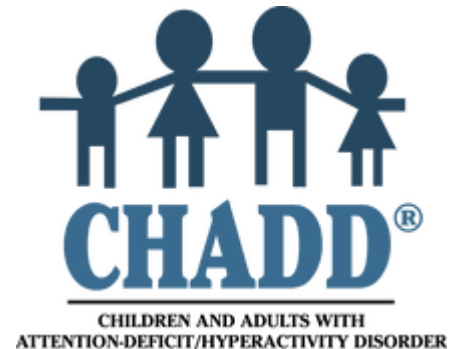
- Similar info as YouTube video
- Another great “starter kit”
- Also includes information regarding constructing a token economy system, (key for managing ADHD, though can be complex for parents to construct, implement, and adjust without help)
- Parents may be more likely to watch video than buy/read book
- Affordable, \$14
- May be available at library



Parent Education on ADHD

Website, chadd.org

- Lots of free content
- Non-profit; no snake oil
- Additional online content and magazine subscription (*Attention*) for members (\$53/yr)
- Oversees National Resource Center on ADHD, a national clearinghouse for evidence-based info on ADHD
- Example resource:
 - ADHD Overview handout for parents
 - <https://chadd.org/wp-content/uploads/2018/03/aboutADHD.pdf>



Parent Education on ADHD

Website, effectivechildtherapy.org

- Website of the Society of Clinical Child and Adolescent Psychology
- Provides info regarding concerns and disorders common to children and adolescents (including ADHD)
- Provides info regarding evidence-based approaches to treating said conditions



**SOCIETY OF CLINICAL
CHILD & ADOLESCENT
PSYCHOLOGY**

Parent Education on ADHD


Nationwide Children's Hospital's ADHD Academy

- Educational sessions for parents or caregivers of children with ADHD
- Couple of offerings for kids ages 8-12, as well
- \$10 per person, per session
- Wide range of topics, including Intro to ADHD, Medications, Educational Rights, Special Education Eligibility and Identification, Behavior Management, Self-Esteem
- Access schedule at <https://www.nationwidechildrens.org/family-resources-education/courses-for-parents-and-kids>



ADHD Academy

Barriers to accessing effective treatment

- Parents lacking appropriate information 
- Lack of providers offering recommended intervention
- Intervention is tedious (but effective) and does not result in sustained change if discontinued
- Tougher sell to parents the older kids get
- Fear of providing a “crutch”
- Parents may also have ADHD

Accounting for parents with ADHD

- High likelihood that at least one parent will also have ADHD (whether they know it or not)
- Children of parents with ADHD and/or depression (particularly when parent unmedicated for ADHD) have poorer response to beh. treatment for ADHD
- Consider screening/referring parents



Accounting for parents with ADHD

- Involve other caregivers, including school, when possible (e.g., for med admin)
- Utilize care coordination services
- Reminder calls
- Mail rating scales to guide med adjustments closer to appt date
- Providing written copy of info/recs (e.g., handouts from chadd.org)



QUESTIONS?



If you would like to receive CME credit for today's presentation, please complete the following survey **by**

Wednesday, February 20, 2019:

<https://www.surveymonkey.com/r/S5GGH7P>

Please note: we are unable to provide CME credit past this deadline



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April 11, 2019 from Noon-1p.m.

Visit Our Website for More Information!

<https://www.nationwidechildrens.org/specialties/behavioral-health/for-providers/webinar-series%C2%A0>



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CME Posting



CME POSTING

Series Name: Behavioral Health Webinar Series for Primary Care

Date: February 13, 2019 / Noon-1PM

Presentation Title: Non-Medical Management of ADHD in the Primary Care Setting

Speakers Name(s): Ben Fields, PhD with Lynda Wolfe, PhD and Ujjwal Ramtekkar, MD

Planning Committee: Jennifer White, MD; William Long, MD; Nancy Cunningham, PsyD; Alex Bishara; Megan Rhodes; Sherry Fletcher; Jessica Dudley

- No one in a position to control content has any relationships with commercial interests

Session Objectives:

At the conclusion of this activity, participants should be able to:

1. Demonstrate familiarity with clinical guidelines for non-medical intervention for children and adolescents with ADHD, as well as a practical understanding of what that intervention entails.
2. Demonstrate familiarity with research regarding adherence to the aforementioned clinical guidelines in primary care.
3. Demonstrate an understanding of the importance of parent education regarding evidence-based non-medical intervention for ADHD, as well as key educational points to offer parents.
4. Demonstrate an understanding of common barriers to families accessing evidence-based non-medical intervention for ADHD, as well as ways to mitigate these barriers.
5. Participants will be provided information regarding a number of comprehensive, evidence-based (and mostly free!) educational resources to offer parents of children and adolescents with ADHD.

Commercial Support: N/A

Join by Phone: 1-240-454-0887

Conference ID: 649 077 724

Join by WebEx: <https://bit.ly/2HHfmIK>

SAVE THE DATE(S) for the 2019 BH Webinar sessions!

Thursday, April 11, 2019

Wednesday, June 12, 2019

Thursday, September 12, 2019

Wednesday, October 16, 2019

Thursday, November 14, 2019

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<https://www.nationwidechildrens.org/specialties/behavioral-health/for-providers/webinar-series%C2%A0>

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