

PLEASE TAKE A FEW MINUTES TO ANSWER SOME QUESTIONS REGARDING YOUR EXPERIENCE WITH CHILDREN'S MENTAL HEALTH ISSUES. PLEASE NOTE THAT ALL OF YOUR RESPONSES WILL BE KEPT CONFIDENTIAL.

1. In the past several months, what percent of patients coming to your office have presented with complaints related to mental health? _____ %

2. If you have patients that have presented with complaints related to mental health, what are the top 3 mental health issues that you have encountered in your patient population in the past several months? Please rank them in order.

	1 st	2 nd	3 rd	Not encountered or not in top 3
Attention/ADHD	1	2	3	N/A
Anxiety Disorders	1	2	3	N/A
Bereavement	1	2	3	N/A
Conduct Disorder	1	2	3	N/A
Depression	1	2	3	N/A
Other [PLEASE SPECIFY BELOW]	1	2	3	N/A

3. In addressing children's mental health issues, pediatricians can choose to proceed in numerous ways. Please circle "yes" or "no" to indicate what you are most likely to do in your practice relative to each of the following conditions.

	A) Do you informally screen?			B) Do you formally screen using an instrument?			C) Do you establish a DSM-IV Diagnosis?			D) Do you treat and manage with or without psychiatric consultation?			E) Do you refer out for diagnosis and treatment?		
	Yes	No	DK	Yes	No	DK	Yes	No	DK	Yes	No	DK	Yes	No	DK
Anxiety disorders	1	2	99	1	2	99	1	2	99	1	2	99	1	2	99
Attention problems or ADHD?	1	2	99	1	2	99	1	2	99	1	2	99	1	2	99
Depression?	1	2	99	1	2	99	1	2	99	1	2	99	1	2	99

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4. Do you currently use any of these instruments to detect children with mental health complaints in your practice?

	Yes	No	Don't Know
Pediatric Symptom Checklist (PSC-35)	1	2	DK
Pediatric Symptom Checklist (PSC-17)	1	2	DK
Strengths & Difficulties Questionnaire (SDQ)	1	2	DK
GAPS questionnaire	1	2	DK
Child Behavior Checklist (CBCL)	1	2	DK
Child Depression Inventory (CDI) or Beck Depression Inventory (BDI)	1	2	DK
Patient Health Questionnaire (PHQ-A or PHQ-9)	1	2	DK
Vanderbilt or Conners' parent form	1	2	DK
Vanderbilt or Conners' teacher form	1	2	DK
Other [PLEASE SPECIFY BELOW]	1	2	DK

THE FOLLOWING QUESTIONS ASK ABOUT YOUR SKILLS AND KNOWLEDGE OF CHILDREN'S MENTAL HEALTH ISSUES.

5. On a scale of 1 to 10, how would you rate your knowledge of the following mental health issues in children?

	Not Very Knowledgeable → Very Knowledgeable										Don't Know
Attention problems or ADHD?	1	2	3	4	5	6	7	8	9	10	DK
Anxiety Disorders?	1	2	3	4	5	6	7	8	9	10	DK
Bereavement issues?	1	2	3	4	5	6	7	8	9	10	DK
Depression?	1	2	3	4	5	6	7	8	9	10	DK
Post Traumatic Stress Disorder or PTSD?	1	2	3	4	5	6	7	8	9	10	DK
Suicidal ideation?	1	2	3	4	5	6	7	8	9	10	DK

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6. On a scale of 1 to 10, how would you rate your skills in diagnosing the following mental health issues in children?

	Not Very Skilled $\xrightarrow{\hspace{10em}}$ Very Skilled										Don't Know
	1	2	3	4	5	6	7	8	9	10	DK
Attention problems or ADHD?	1	2	3	4	5	6	7	8	9	10	DK
Anxiety Disorders?	1	2	3	4	5	6	7	8	9	10	DK
Bereavement issues?	1	2	3	4	5	6	7	8	9	10	DK
Depression?	1	2	3	4	5	6	7	8	9	10	DK
Post Traumatic Stress Disorder or PTSD?	1	2	3	4	5	6	7	8	9	10	DK
Suicidal ideation?	1	2	3	4	5	6	7	8	9	10	DK

7. On a scale of 1 to 10, how would you rate your skills in treating the following mental health issues in children?

	Not Very Skilled $\xrightarrow{\hspace{10em}}$ Very Skilled										Don't Know
	1	2	3	4	5	6	7	8	9	10	DK
Attention problems or ADHD?	1	2	3	4	5	6	7	8	9	10	DK
Anxiety Disorders?	1	2	3	4	5	6	7	8	9	10	DK
Bereavement issues?	1	2	3	4	5	6	7	8	9	10	DK
Depression?	1	2	3	4	5	6	7	8	9	10	DK
Post Traumatic Stress Disorder or PTSD?	1	2	3	4	5	6	7	8	9	10	DK
Suicidal ideation?	1	2	3	4	5	6	7	8	9	10	DK

8. On a scale of 1 to 10, how appropriate are the following actions by a primary care pediatrician who is assessing a child with an emotional issue?

	Not Very Appropriate $\xrightarrow{\hspace{10em}}$ Very Appropriate										Don't Know
	1	2	3	4	5	6	7	8	9	10	DK
Establishing a diagnosis using DSM-IV criteria?	1	2	3	4	5	6	7	8	9	10	DK
Setting goals with the family?	1	2	3	4	5	6	7	8	9	10	DK
Scheduling a follow-up visit for an identified psychosocial problem?	1	2	3	4	5	6	7	8	9	10	DK

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9. On a scale of 1 to 10, how would you rate your knowledge of the following clinical strategies used to address mental health issues in children?

	Not Very Knowledgeable → Very Knowledgeable										Don't Know
Interpersonal Therapy? (working on interpersonal skills in specific relationships)	1	2	3	4	5	6	7	8	9	10	DK
Bereavement Counseling?	1	2	3	4	5	6	7	8	9	10	DK
Use of Selective Serotonin Reuptake Inhibitors (SSRIs)?	1	2	3	4	5	6	7	8	9	10	DK
Use of stimulant or non-stimulant medications for ADHD?	1	2	3	4	5	6	7	8	9	10	DK
Behavior Modification? (ex., time outs or sticker charts)	1	2	3	4	5	6	7	8	9	10	DK
Self-Management Techniques? (ex., coping and relaxation skills)	1	2	3	4	5	6	7	8	9	10	DK
Cognitive-Behavioral Therapy?	1	2	3	4	5	6	7	8	9	10	DK
Other Counseling [PLEASE SPECIFY BELOW]	1	2	3	4	5	6	7	8	9	10	DK

10. In the past several months, what percent of all patients coming to your office have an established diagnosis of a mental health disorder? _____ %

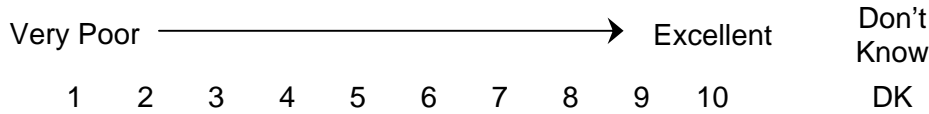
11. Of children with an established diagnosis of a mental health disorder, what percent do you treat in your practice? _____ %

12. Of children with an established diagnosis of a mental health disorder, what percent do you refer to mental health specialists including those you may have treated in your practice? _____ %

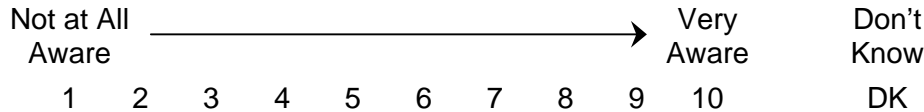
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13. If you refer children out to a mental health specialist, on a scale of 1 to 10, how would you rate your overall communication and care coordination with the mental health specialists to whom you refer children?



14. On a scale of 1 to 10, how would you rate your awareness of the mental health resources in your area?



15. As a result of the recent RCI course you attended, how likely are you to do the following?

	Strongly Disagree → Strongly Agree										Don't Know
	1	2	3	4	5	6	7	8	9	10	99
Routinely use a screening tool (e.g., PSC, SDQ, CBCL, GAPS)	1	2	3	4	5	6	7	8	9	10	99
Use a diagnostic aid in evaluating an identified mental health problem (e.g., a depression or anxiety scale)	1	2	3	4	5	6	7	8	9	10	99
Elicit a trauma history	1	2	3	4	5	6	7	8	9	10	99
Recommend or provide cognitive behavioral therapy	1	2	3	4	5	6	7	8	9	10	99
Recommend or provide medication for depression	1	2	3	4	5	6	7	8	9	10	99
Provide bereavement counseling	1	2	3	4	5	6	7	8	9	10	99
Network with mental health specialists in my area	1	2	3	4	5	6	7	8	9	10	99
Schedule a follow-up appointment for psychosocial issues	1	2	3	4	5	6	7	8	9	10	99
Learn more about cognitive-behavioral therapy to prepare for implementation into your practice	1	2	3	4	5	6	7	8	9	10	99
Setting goals in partnership with the family for psychosocial issues	1	2	3	4	5	6	7	8	9	10	99

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16. In the past several months, what is the frequency that you initiated the following medications:

	Never	Rarely	Occasionally	Frequently
Stimulants	1	2	3	4
Atomoxetine	1	2	3	4
Clonidine	1	2	3	4
Tricyclics	1	2	3	4
SSRIs	1	2	3	4
Anxiolytics	1	2	3	4

17. Did you institute practice changes prompted by RCI? Yes _____ 1 No _____ 2

(GO TO Q18)

IF YES, please indicate the extent to which you agree with the following statement

Strongly Disagree \longrightarrow Strongly Agree Don't Know

Parents appreciated my interest in their child's mental health	1	2	3	4	5	6	7	8	9	10	99
Parents easily completed screening tools and/or diagnostic aids	1	2	3	4	5	6	7	8	9	10	99
Children and adolescents easily completed screening tools and/or diagnostic aids	1	2	3	4	5	6	7	8	9	10	99
I am more confident when prescribing medications for mental health disorders	1	2	3	4	5	6	7	8	9	10	99
Children and adolescents generally improved after taking medications	1	2	3	4	5	6	7	8	9	10	99
Networking with mental health specialists in my area improved	1	2	3	4	5	6	7	8	9	10	99
My practice was able to manage psychosocial follow-up visits	1	2	3	4	5	6	7	8	9	10	99
Parents did not welcome questions related to their child's mental health	1	2	3	4	5	6	7	8	9	10	99
Families appreciated being included in setting goals for psychosocial issues	1	2	3	4	5	6	7	8	9	10	99

Additional comments: _____



18. In the past several months, have you changed the management of mental health disorders not covered by the RCI course? Yes _____1 No _____2
(GO TO Q19)



If yes, please describe below.

19. Does your practice have any of these mental health professionals on site?

	Yes	No	Don't Know
Psychologist	1	2	DK
Social Worker	1	2	DK
Psychiatric Nurse Practitioner	1	2	DK
Other [PLEASE SPECIFY BELOW]	1	2	DK

20. Other Comments:

**THANK YOU FOR TAKING THE TIME TO COMPLETE THIS SURVEY.
PLEASE FAX THIS SURVEY USING THIS PAGE AS THE COVERSHEET.**

To: Danielle Laraque, MD, FAAP	From: _____
Fax: 212-241-8738	Fax: _____
Phone: 212-241-7886	Phone: _____
Re: RCI Follow-up Survey	Date: _____
Pages: 7	CC: _____