Brief educational "curbside consultation": Impact on attention-deficit/hyperactivity disorder referrals in an integrated healthcare setting.

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Abstract

INTRODUCTION:
As behavioral health providers integrate into primary health care clinics, it is important to examine methods used to increase primary care providers' (PCPs) knowledge of behavioral health providers' areas of expertise and service provision. Attention-deficit/hyperactivity disorder (ADHD) has been identified as one of the most common behavioral health disorders PCPs diagnose and treat in children.

METHOD:
This study examined whether 2 brief educational "curbside consults," during which a psychologist provided information regarding the assessment and treatment of ADHD, had an impact on PCPs' referral practices. Information was collected via medical records review for the same 6-month period prior to and following provider education.

RESULTS:
The results indicated that there was an increase in ADHD referrals to the behavioral health clinic (BHC) following educational consultation. In addition, there was some evidence to suggest that following PCP education, fewer children were diagnosed by the PCP with ADHD and fewer children were previously prescribed a psychotropic medication upon referral to the BHC. Treatment (e.g., behavioral therapy, pharmacotherapy, combined approach) also differed between families previously diagnosed and prescribed psychotropic medication.

DISCUSSION:
The current study provides some preliminary evidence that brief educational consultation with PCPs may increase both referrals for ADHD concerns and may influence the way PCPs diagnose and address behavioral health concerns. Implications of these findings and suggestions for future research are discussed.