Integrated care models for ADHD in children and adolescents: A systematic review

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Abstract

INTRODUCTION:
Attention-deficit/hyperactivity disorder (ADHD) in children and adolescents is commonly managed in primary care. Changes in United States health care have led to the integration of behavioral health services within a patient's "medical home" to improve access to, engagement in, and continuity of quality health care. Despite proliferation of these integrated care models, no studies have specifically examined models for managing ADHD in children and adolescents within primary care.

METHOD:
We searched PsycINFO, MEDLINE, and Google Scholar databases, and found 8 studies describing 6 integrated care models (i.e., combined psychosocial and medication treatments with coordination of care between primary care clinicians and behavioral health clinicians). We reviewed characteristics (i.e., settings, target populations, providers, levels of integration, evaluation and treatment approaches, and methods of interprofessional collaboration) and outcomes (i.e., access, outcomes, and acceptability) of these models.

RESULTS:
The 6 integrated care models demonstrate the potential to improve access to and acceptability of ADHD care for children and adolescents. The models also demonstrate that behavioral health clinicians can integrate at various levels within primary care to achieve superior clinical outcomes compared with nonintegrated models.

DISCUSSION:
We identified 6 effective integrated care models for addressing ADHD in children and adolescents that may be adaptable to local needs and internal capacities. We discuss results of these models with regard to their implications for clinical practice and research.