Can you believe it’s already September? As if 2020 hasn’t thrown enough challenges our way, we (especially those of us who are parents, pediatricians, mental health professionals, patient and families) have juggled so much stress and uncertainty this year, and now “online school” is in full swing.

Mary Jacob, our CAPP team OA, shares her experience of working full-time, with her daughter and two sons who are in school on Zoom: “It has definitely been a challenge having three kids in school. Trying to balance it all has been close to impossible, but with the support from my job and some family, we are able to push through.”

Expanding Our Network of Practices Served

CAPP continues to expand and enroll more practices. We are excited to announce that we now have 37 practices enrolled in our program, and serve 7 California counties – Alameda, Contra Costa, Marin, San Francisco, Santa Clara, Siskiyou and Sonoma, with an estimated 175,000 lives covered.

ACES and Pediatric Trauma-Informed Care Training

October 10, 2020

Please see our website for details about the event, including invited speakers and partners on our website.

Registration link: REGISTER HERE

CAPP Meet and Greet “Virtual Happy Hour” – New Time (5pm)

Thanks to those who joined for our “Virtual Happy Hour” this past Thursday September 10. With the smoke, heat, and pandemic outside, we were grateful to connect online with a fun “show and tell” of adventures of afar: hiking in Nepal, visiting family in Transylvania, exploring China, running a marathon in Hawaii, and remembering different global health experiences. We look forward to our next month’s virtual meet and greet and hope you can join us. Look out for the invitation for our next event in October!

We’ve moved our Virtual Meet and Greet to a new time: the 2nd Thursday of the month @ 5pm.

Zoom ID: 350 833 2619

Thank you for participating in our CAPP Enrollment Session Focus Groups!

We have wrapped up our focus group study! Thank you to all who participated in our focus groups during our CAPP enrollment meetings. We have deeply appreciated learning from you how COVID-19 has impacted the mental health of many of patients and families. We have also learning more about how practices are adapting to virtual workflows, including mental health screening and referrals in COVID-19. Your feedback has been invaluable in shaping our CAPP service, and we will continue to invite your feedback as we further refine our service lines and offerings.
The parents of “Javi”, an 8-year old Latinx boy, report concerns about his school and home functioning to the PCP during an annual check-up. Specifically, Javi’s teachers describe that he rarely pays attention during class and instead stares out the window, talks to classmates, and gets out of his seat. He is missing about 50% of his assignments and the assignments he does turn in have many careless errors. When teachers ask Javi about his missing assignments, he explains that he has trouble understanding the work, particularly related to math. Javi’s classmates complain that he interrupts them during seatwork, intrudes upon their conversations and games, and doesn’t respect their personal space. At home, Javi frequently argues with his parents when asked to complete chores or homework. His room is messy and he often can’t find materials needed for school or soccer practice, making him late leaving the house.

Safety: No concerns for danger to self or others

Specific Behaviors: Inattention, talking out of turn, difficulty remaining seated, interrupting/intruding on others, disorganization, non-compliance to home routines and school expectations

Setting: Home, school

Scary Things: None noted

Screening/Services: ADHD-Combined presentation diagnosed by PCP given parent and teacher report of 8 inattention and 6 hyperactivity/impulsivity symptoms on child symptom inventory, as well as reported impairment at home and school

Given the descriptions of Javi’s difficulties at school and home, as well as his ADHD diagnosis, the PCP recommended the family engage in therapy. The therapist obtained information about the specific behaviors Javi was displaying, as well as what happens before and after these behaviors. Next, the therapist recommended that the parents formally request an Individualized Education Plan (IEP) evaluation in writing through Javi’s public elementary school. The therapist informed parents that the school is legally required to conduct an IEP evaluation within 60 days of a written request. The therapist also provided the parents with example accommodations and services that can result from an IEP, such as seating or homework accommodations, as well as tutoring. Lastly, the therapist implemented 8 sessions of Parent Management Training (PMT) with the family; PMT is an evidence-based program to coach parents on how to manage child behaviors.

### For children with ADHD, parents should support attention and compliance through clear expectations and consistent consequences.

Decades of research support Parent Management Training (PMT) alone or in combination with medication as an effective approach for treating youth with attention and behavior disorders, such as Attention-Deficit/Hyperactivity Disorder and Oppositional Defiant Disorder (Mingebach et al., 2018; Pfiffner & Haack, 2014). Encouragingly, PMT appears effective when offered in a variety of settings and to families from diverse backgrounds (Haack et al., 2019; Pfiffner et al., 2016; Power et al., 2012). PMT improves the impact of youth inattention and hyperactivity/impulsivity on impaired functioning at home, school and with peers by teaching parents strategies to reduce their negative parenting (for example, inconsistent discipline and poor monitoring) and increase their positive parenting (for example, warmth and involvement; Booster et al., 2016; Haack et al., 2017). Indeed, Javi’s functioning improved as his parents learned to set clear expectations and provide consistent consequences (both positive and negative) in PMT.

Scheduling in daily “special time” helped improve Javi’s relationship with his parents. Each day, Javi’s mom or dad spent time with Javi engaged in a non-competitive activity of Javi’s choosing, often drawing or building Legos. The parents made a concerted effort to stay present during Javi’s “special time” and avoid distractions from their cell phones or work.

Parents noted specific behaviors that Javi was doing sometimes but they wanted to see more of, such as putting his soccer bag away and starting homework with one reminder. Javi’s parents made a list of labeled praise statements to use when they noticed these behaviors, such as saying “Great job getting started on homework the first time I asked you - high five!” Just as the therapist suggested, the parents reported that Javi appeared more likely to repeat these behaviors after receiving praise for them.

The therapist coached Javi’s parents to establish a morning routine with clearly stated expectations and an immediate reward. When Javi gets out of bed with 1 reminder, gets dressed, brushes his teeth and hair, eats breakfast, and packs his backpack, then Javi can earn freetime until it is time to leave for school. The parents noticed less arguing from Javi as he gained confidence and independence with his morning routine.

Lastly, the therapist helped parents set clear negative consequences for behaviors Javi was still struggling with, such as failing to follow parent instructions. The parents set a house rule that after 1 warning, Javi would lose 5 minutes of screentime each time he needed a repeated instruction. The parents reported that after they followed through on removing screentime a few times, Javi learned that he would rather follow through on the instruction than lose screentime and his compliance at home improved.

After engaging in PMT and practicing the strategies taught by the therapist, Javi’s parents reported less stress and more family harmony. They were encouraged to see Javi’s behavior improve and also reflected that he appeared more confident and happy. The therapist encouraged the parents to continue consistency with the strategies, because research suggests that behavior can deteriorate if expectations and consequences are not maintained.