



“Perinatal Psychiatry Consultation Line (Perinatal PCL): Telepsychiatry Expansion”

UW Maternal Child Mental Health Program

PERINATAL MENTAL HEALTH DISORDERS ARE COMMON



- Perinatal depression 10 – 20%
- Perinatal anxiety 15 – 20%
- Perinatal PTSD 6 – 20%
- Postpartum psychosis 0.1%
- Alcohol use in the perinatal period - 9%
- Illicit substance use in the perinatal period - 5%

INTERGENERATIONAL IMPACT

Children of mothers with perinatal depression:

- Preterm birth, low birth weight.
- Increased dysregulation, irritability, crying, sleep difficulties
- Malnutrition, stunted growth
- Higher rates of hospitalization and mortality in the first year
- Cognitive, emotional and developmental delays
- Difficult temperament
- Internalizing and externalizing disorders
- Adolescent depression

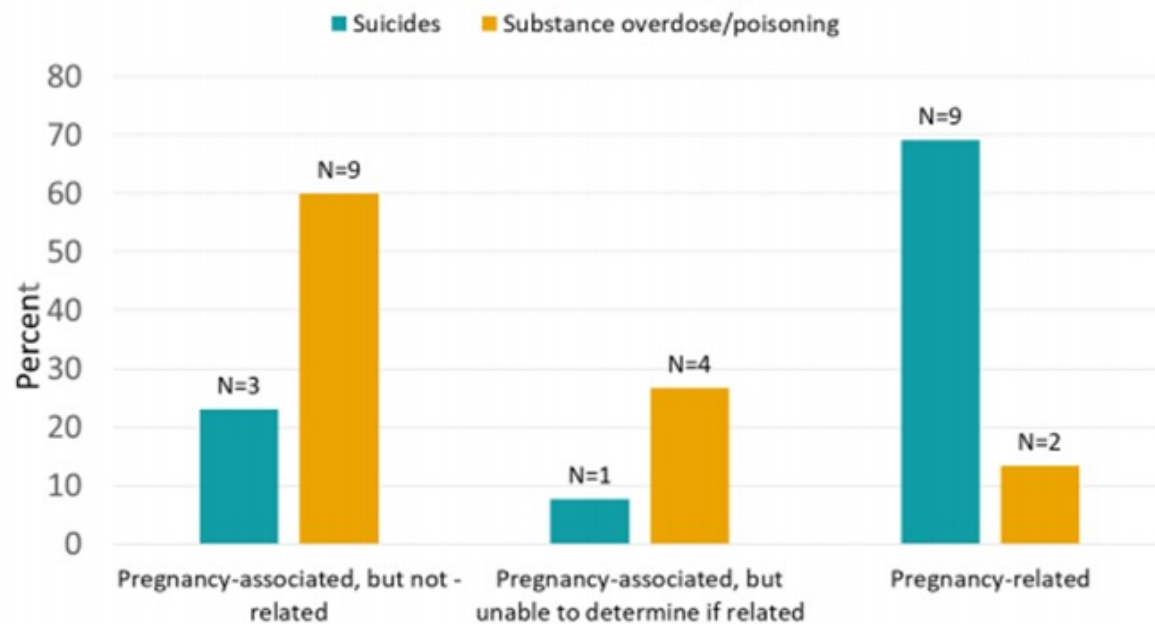
Families:

- Adverse effects on partner's mood
- Increased marital discord
- Impaired family functioning



OVERVIEW OF PROBLEM

Figure 14: Pregnancy-Associated Deaths Due to Suicide (N=13) and Substance Use Overdose (N=15), Washington State, 2014-2016



Of all women who died of pregnancy-associated deaths from substance overdose/poisoning...



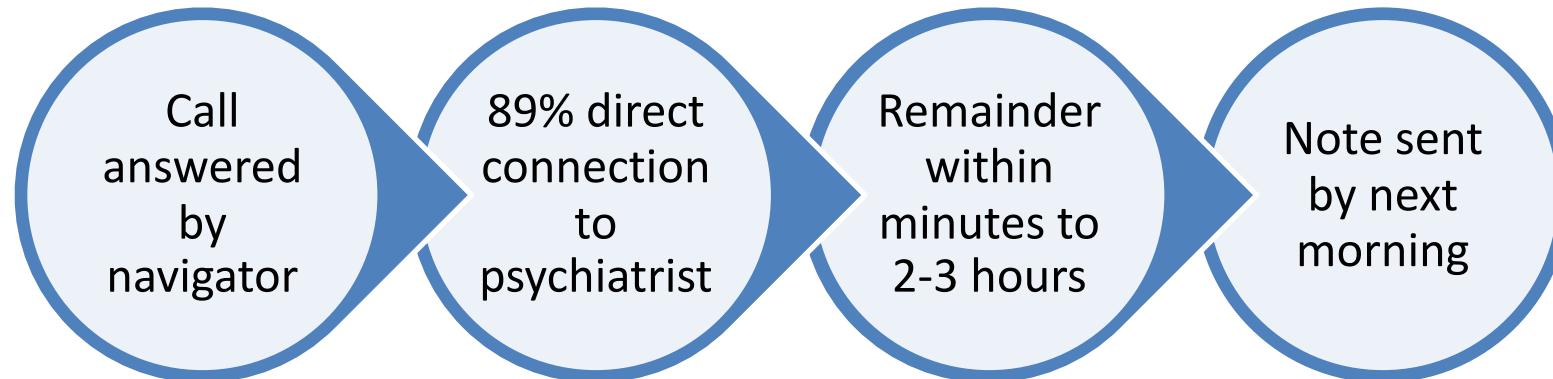
OVERVIEW OF PROBLEM

- Unmet need for perinatal mental health treatments – Less than 5% treated to remission
- Complexity of questions to PPCL increasing over time, many cases benefit from one-time perinatal psychiatry consult
- Many barriers to care not addressed by PPCL alone
 - Behavioral Health Provider shortages
 - Frontline provider comfort with perinatal mental health assessment and treatment
 - Fragmentation of care



PROPOSED SOLUTIONS

Broaden the scope of the UW Perinatal Psychiatry Consultation Line for Providers (PAL for Moms) by providing telehealth consultation for mental health and dual diagnosis (co-occurring substance use and mental health) conditions.



SOLUTION DEVELOPMENT

Psychiatric
assessment

- Increase provider and consultant confidence in recommendations provided for complex cases

Navigator support

- Support patients in navigating the mental health system

Outreach & follow
up

- Improve rates of follow up on recommendations from psychiatric assessment
- Provide virtual brief psychotherapy



MOVING FORWARD

- Continue to provide perinatal telepsychiatry consultation
- Add to services by providing enhanced care coordination and brief psychotherapy
- Augment SUD consultation in PPCL by including training and outreach re perinatal dual diagnosis
- Partners:
 - Peer support, SUD case management programs, home visiting programs
 - Any clinical or community-based organization that cares for underserved perinatal people without ready access to mental health and / or substance use assessment and treatment
 - Potential funders



PROGRESS TO DATE

- State funding for Perinatal PCL and psychiatric consultant with addictions expertise
- Successful pilot of statewide perinatal telepsychiatry consults
 - Feedback - *“The client felt the diagnostic process was more thorough than anything she had done previously. Client finally felt like she was diagnosed appropriately, and felt listened to and respected as she made a decision about taking the medication and the risks versus benefits”.*
 - *“This program is wonderful to have for the complex patient or in this case for addiction psychiatry, which is extremely difficult to access in our semi-rural location”.*
 - Suggestions for improvement – *“Facilitate a care coordination meeting with client, and other providers working with client to transfer care with entire 'care team' in the community”.*



VISION

We envision a world where all perinatal people in Washington have access to equitable perinatal mental health and dual diagnosis (co-occurring substance use and mental health) care.



HOW YOU CAN GET INVOLVED

- Advocacy for funding navigator support for the telepsychiatry clinic
- Suggest funding sources to support telepsychiatry clinic, consultation and training efforts
- Help to get the word out about the Perinatal Psychiatry Consultation line
- Suggest how to promote the consultation line to substance use disorder treatment settings





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