



CBT FOR THE PCP

Pediatric Psychiatry in the Primary Care Setting ECHO
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Presentation: CBT for the PCP



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Dr. Ellen Lauer received her degree of Doctor of Osteopathy from the University of New England College of Osteopathic Medicine in 2009. In 2012, she completed her residency at Geisinger Medical Center in Danville, PA. Since that time, she has been practicing primary care pediatrics and osteopathic manipulation at Penobscot Community Health Center, which prides itself in providing head to toe health care services for the children and families within their community, regardless of their ability to pay.

Ellen has been a leader in implementing the COPE program; an in-office proactive program to meet the behavioral health needs of the patients in their care.

She is the mother of 3 and loves to spend time in the woods.

The planners and speaker for this presentation have no relevant financial relationships to disclose.



How I got involved

- Need for increased access to counseling services, long waiting list.
- Some patients don't want to meet with someone they don't know, but willing to talk to PCP
- Maine AAP was doing training/ECHO series for free for interested pediatric providers utilizing the COPE program
- Started 1 yr ago and have completed ~25 programs ages 7-20y. 10 have quit, 8 in progress.
- Can do via telemedicine or in person
- Mostly individual sessions, but did have siblings who elected to do their session together sometimes

COPE program

- Manualized based intervention, evidence based, designed to be delivered in primary care or school-based settings
- 7 weekly sessions
- ~30 min per session
- Can do follow up session ~2-4 weeks after to just check in
- For mild to moderate anxiety/depression in children, teens, young adults
- Can be useful to help with having a contact point while awaiting more formal counseling or as stand alone treatment



COPE Program

- COPE2Thriveonline.com
- Topics Covered:
 - thinking—feeling—behaving triangle
 - positive self talk
 - effective communication
 - problem solving skills
 - goal setting
 - mindfulness activities

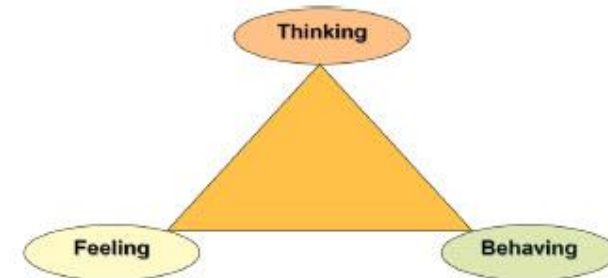


Session 1 Thinking, Feeling, and Behaving: What is the connection?

Everyone has a certain amount of stress and has to deal with difficult times in their life, but making a choice to deal with these things in a positive way will help you to feel good about yourself.

When you think positively, you will be happier and have less stress. How you think affects how you feel and how you behave.

Thinking, Feeling, Behaving Triangle



Many times, there is a trigger event that starts the negative thinking.

Becoming more “aware” of how you think is important so that you can help your thinking to be more positive.

Pros

- Rewarding, seems to really help people
- Spend time with your patients weekly and get to more fully assess their progress
- Fun!
- Low stress—follow the booklet
- Increased familiarity with basic CBT concepts, so can share with patients/families who are not enrolled in the program but coming in for anxiety/depression symptoms/ poor self-esteem, normal childhood
- Doing CBT with people is good for our own mental health
- Can bill as medical provider

Limitations

- Not as helpful if too sick—need to participate
- Not long term
- Harder in afternoon for kids with ADHD (when medications not active)
- Can be stressful sometimes to finish on time—first or last patient of the day
- Book cost \$23.00
- Some patients do not follow through (most commonly after 2nd week)
- Patient access for primary care is a challenge at times, so may be difficult to find the time in schedule

Case Example

- 16 yr old boy with moderate anxiety/depression sx, trauma hx, apathy, poor school attendance/effort, feels like there is no point to life as we are a speck of dust in vast universe
- Referred by his PCP for COPE program. 1st two sessions he stated he did not think this would be helpful, but might as well try it
- Consistently participated, did the homework, returned for all the sessions.
- By the 5th session he felt like he was starting to naturally change negative into positive thinking and felt better, completed all 7 sessions
- Did not show up for follow up check in ~3 weeks later
- Heard from his PCP a couple of months later—attending school, wanted to go back on his Lexapro, has a girlfriend, asked for referral to formal counseling