

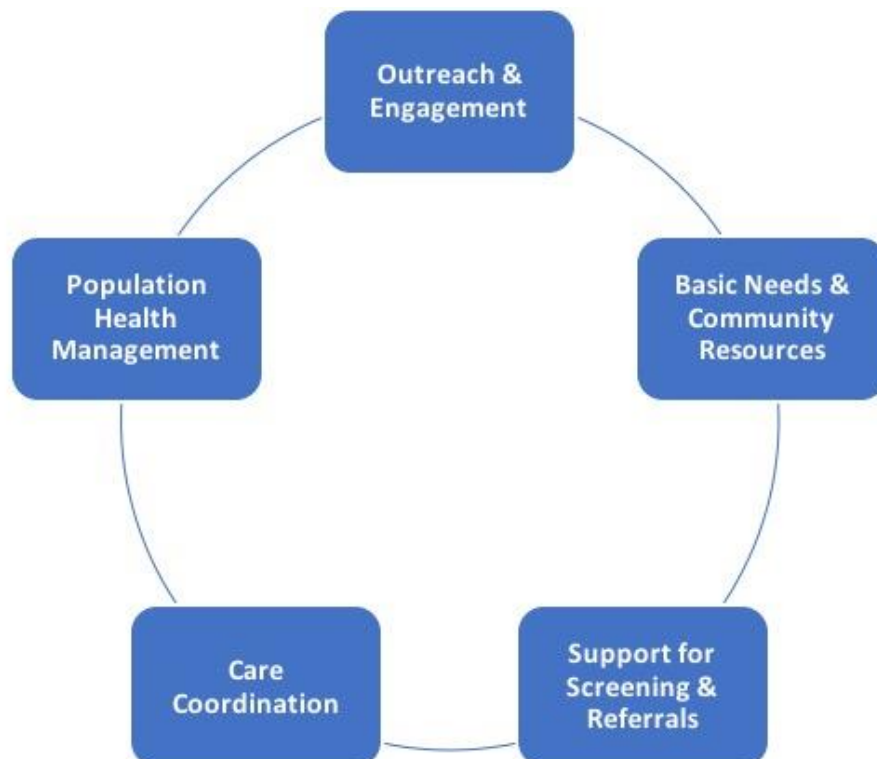
ANXIETY DISORDERS MINI WORKBOOK

TEAM UP FOR CHILDREN COMMUNITY HEALTH WORKERS

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All activities within the TEAM UP for Children initiative are made possible through the contributions of Codman Square Health Center, Dimock Health Center, Lowell Community Health Center, Boston Medical Center, and Boston University School of Medicine. Funding for the TEAM UP for Children initiative was provided by the Richard and Susan Smith Family Foundation and the Robert Wood Johnson Foundation.

How to use this workbook	
Goals for this workbook	<ul style="list-style-type: none"> • Workbooks are designed to accompany the core framework for CHW work within Team Up with 5 core areas described below • Depending on the site, CHWs may work more in one core area than another • Each site has the flexibility to adapt the CHW role within core areas to best match the needs of families in their sites • CHWs should coordinate with their clinical care teams on all tasks • CHWs should direct work outside of the core areas back to clinical care team • CHWs should use this workbook to guide their work with families • Workbooks accompany the learning community modules (webinars) by topic area
Adapting this workbook	<ul style="list-style-type: none"> • This workbook may be adapted to better match each site's needs and clinical protocols • Core topic areas in this workbook reflect the core framework and should not be changed to ensure similarity across sites using this CHW curriculum • Please maintain all acknowledgements of this work



OVERVIEW	
Anxiety Disorders	<p>Overview:</p> <ul style="list-style-type: none"> • Anxiety disorders are very common in children • Different types of anxiety disorders • Normal levels of anxiety: typical for child’s developmental stage (fears and worries do not persist) and does not interfere with child’s daily life • Problematic levels of anxiety: fears and worries persist and disrupt child’s functioning at home and school • Parents/Caregivers may also have problematic anxiety that reinforces child’s problematic anxiety <p>Core symptoms:</p> <ul style="list-style-type: none"> • Worries a lot and worrying causes distress • Complains of aches and pains • Absent from school or enjoyable activities • Afraid and avoidant of new situations or everyday activities • Visits medical providers with nothing wrong • Poor concentration • Negative relationships at home and/or school • Associated with depression and exposure to traumatic events <p>Families may</p> <ul style="list-style-type: none"> • Describe not understanding when or why anxiety is a problem • Feel frustrated by the child’s inability to cope with fears/worries
CHW-Role in Anxiety Disorders	<ul style="list-style-type: none"> • Engage families in the process of understanding normal versus problematic anxiety • When necessary, provide education on how to help children or caregivers with problematic anxiety • Offer support for parents, encourage problem-solving and positive parenting to help manage child’s anxiety • Coordinate care and help navigate medical and community-based systems as needed <ul style="list-style-type: none"> ○ Assist with referrals ○ Assist with initiating school-based services
Screeener	<ul style="list-style-type: none"> • Pediatric Symptom Checklist (PSC-17 or PSC-35) • SCARED: Screen for Child Anxiety and Related Disorders

ENGAGEMENT	
Logistics	<input type="checkbox"/> Review the “ask” from providers about working with family <input type="checkbox"/> Review the medical chart <input type="checkbox"/> Gather materials needed to meet with family
Introduce yourself	<p><i>-Hello, my name is ____ and I am a CHW/FP part of your medical team. I help families access resources and services and can offer ongoing support to you as needed. Your child’s provider asked me to talk to you about ____.</i></p> <p><i>-Do you have time now to talk about this?</i></p>
Set an Agenda	<p><i>-I am going to talk about _____. (Getting your child help for anxiety.)</i></p> <p><i>-Do you have anything else that you would like to talk about?</i></p>

EDUCATION	
Reason for Referral	<p><i>Your child has been referred for _____. (i.e. behavioral health services)</i></p> <p><i>-What do you think about the referral?</i></p> <p><i>-What are the goals and expectations you may have for your child with this referral?</i></p> <p>(Explain how referrals can help child and family)</p> <p><i>-Services will help your child and your family learn new skills to cope with the ways anxiety is impacting your daily life.</i></p> <p><i>-Do you have any questions or concerns about anxiety? We can loop back with your child’s provider.</i></p>
Diagnostic Process	<p><i>-Your child’s provider is referring your child for an anxiety assessment. What do you think about this?</i></p>
Explain the Process	<p><i>-We are going to submit a referral to (provider/clinic/hospital).</i></p> <p>OR</p> <p><i>-Your child’s PCP can diagnose your child with an anxiety disorder.</i></p> <p><i>-Typically, the way this will work is you will have to go in for an intake, fill out paperwork and go through a series of questions on how much of a problem your child’s anxiety is.</i></p>
Address barriers or concerns	<p><i>-What do you think? Is this something you’d be willing to try?</i></p> <p><i>-What might make it difficult for you to try this?</i></p> <p>(ASK about specific barriers: Transportation, childcare for other children, work demands, stigma?)</p>

<p>Create an action plan</p>	<p><i>-I am going to send this referral over to the _____. They will call you in a week. If they don't call you, you will call them at this number_____.</i></p> <p><i>-I will call you on (date) in a week to see when the appointments are scheduled for.</i></p> <p><i>-It will be helpful to get signed releases from you as a parent today so that we can communicate directly with your child's school and/or the other medical providers.</i></p> <p><i>-You will need to bring paperwork to the appointment. I can help you fill that out or get any documents you might need.</i></p> <p><i>-You can always reach me at _____.</i></p>
<p>Services</p> <p>Explain Services</p> <p>Address barriers or concerns</p> <p>Create an action plan</p>	<p><i>-Your child's provider thinks you and your child might benefit from seeing a _____ for services to help your child with _____.</i></p> <p><i>-Kids with problematic anxiety may benefit from seeing a counselor, getting school-based services or supports and medication treatment.</i></p> <p><i>-Parents may also benefit from counseling to help them plan how to manage their child's anxiety.</i></p> <p><i>-Families can also work on mindfulness and relaxation together.</i> (Explain the type of service. You may have to do some research or ask another team member to help you learn about how these services work.)</p> <p><i>-What do you think? Is this something you'd be willing to try?</i></p> <p><i>-What might make it difficult for you to try this?</i></p> <p><i>-Some parents like to talk to other parents. Would you like us to connect you to other parents through support groups?</i></p> <p><i>-Some parents like to talk to a counselor to think about parenting strategies. Would you like us to connect you to a counselor?</i></p> <p><i>-You will need to call_____ to start the process.</i></p> <p><i>-I will make the referral and they will call you.</i></p> <p><i>-I will call you on (date) in a week to see when the appointment is.</i></p> <p><i>-You can always reach me at _____.</i></p>

APPLICATION: Care Coordination & Key Tasks	
Engagement	<input type="checkbox"/> Highlight strengths of the child and family <input type="checkbox"/> Bring out hopes for the child and family <input type="checkbox"/> Encourage positive parenting and praise for brave behaviors <input type="checkbox"/> Encourage family activities that promote mindfulness and relaxation <input type="checkbox"/> Are there psychological or cultural barriers? <input type="checkbox"/> Did you offer any parenting support and resources?
Education and Support	<input type="checkbox"/> Does family understand referral for services and problematic anxiety? <input type="checkbox"/> Encourage problem-solving to manage child's anxiety <input type="checkbox"/> Encourage parents to provide appropriate structure so children know what to expect to reduce anxiety symptoms and face fears gradually <input type="checkbox"/> Encourage parents to reinforce brave behaviors not avoidant behaviors <input type="checkbox"/> Did you address barriers or concerns? <input type="checkbox"/> Did you create an action plan? <input type="checkbox"/> Did you loop back with PCP? <input type="checkbox"/> Did you connect to the school/teacher? <input type="checkbox"/> Did you document in the EMR? <input type="checkbox"/> Do you have signed medical releases? <input type="checkbox"/> Any other important information?
Diagnostic Process	<input type="checkbox"/> Does family have all necessary information for the diagnostic process? <input type="checkbox"/> Did you address barriers or concerns? <input type="checkbox"/> Does family need help scheduling appointments? <input type="checkbox"/> Does the family need help filling out paperwork or bringing materials? <input type="checkbox"/> Does the family need transportation to the appointments? <input type="checkbox"/> Did you document in the EMR? <input type="checkbox"/> Do you have signed medical releases? <input type="checkbox"/> Any other important information?
Services	<input type="checkbox"/> Does family have all necessary information to access services? <input type="checkbox"/> Did you address barriers or concerns? <input type="checkbox"/> Does family need help scheduling or coordinating appointments? <input type="checkbox"/> Does the family need transportation to appointments? <input type="checkbox"/> Did you document in the EMR? <input type="checkbox"/> Do you have signed medical releases? <input type="checkbox"/> Any other important information?

NAVIGATION PATHWAYS: Population Health Management	
Pre-diagnosis	<ul style="list-style-type: none"> • Screening and Education referral process • Referral to diagnostic assessment • Referral to school-based assessment • Signed releases for coordination of care across systems
Diagnostic Stage	<ul style="list-style-type: none"> • Diagnostic Assessment Process: <ul style="list-style-type: none"> ○ Forms, Scheduling appointments ○ Coordination with school • Logistical barriers: <ul style="list-style-type: none"> ○ Transportation, appointment times, childcare • Cultural and Psychological barriers: <ul style="list-style-type: none"> ○ Perceived need and importance of assessment ○ Perception of problematic versus normal anxiety
Post-Diagnosis	<ul style="list-style-type: none"> • Services <ul style="list-style-type: none"> ○ Recommendation for services: counseling and medication treatment ○ Specialized anxiety programs ○ Parent services for problematic anxiety if needed ○ Patient and Family Rights • School-based services <ul style="list-style-type: none"> ○ IEP process, including 504 Plan

RESOURCES	
Anxiety Disorders Overview	<ul style="list-style-type: none"> • Team Up Learning Community Modules • Substance Abuse and Mental Health Services Administration (SAMSHA) https://www.samhsa.gov/treatment/mental-disorders/anxiety-disorders
Information for Families	<ul style="list-style-type: none"> • American Academy of Pediatrics https://www.healthychildren.org/ • American Academy of Child and Adolescent Psychiatry: Facts for Families: Anxiety in Children