

Integrating Mental Health Services into a High-Risk Infant Follow-Up Program

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BACKGROUND

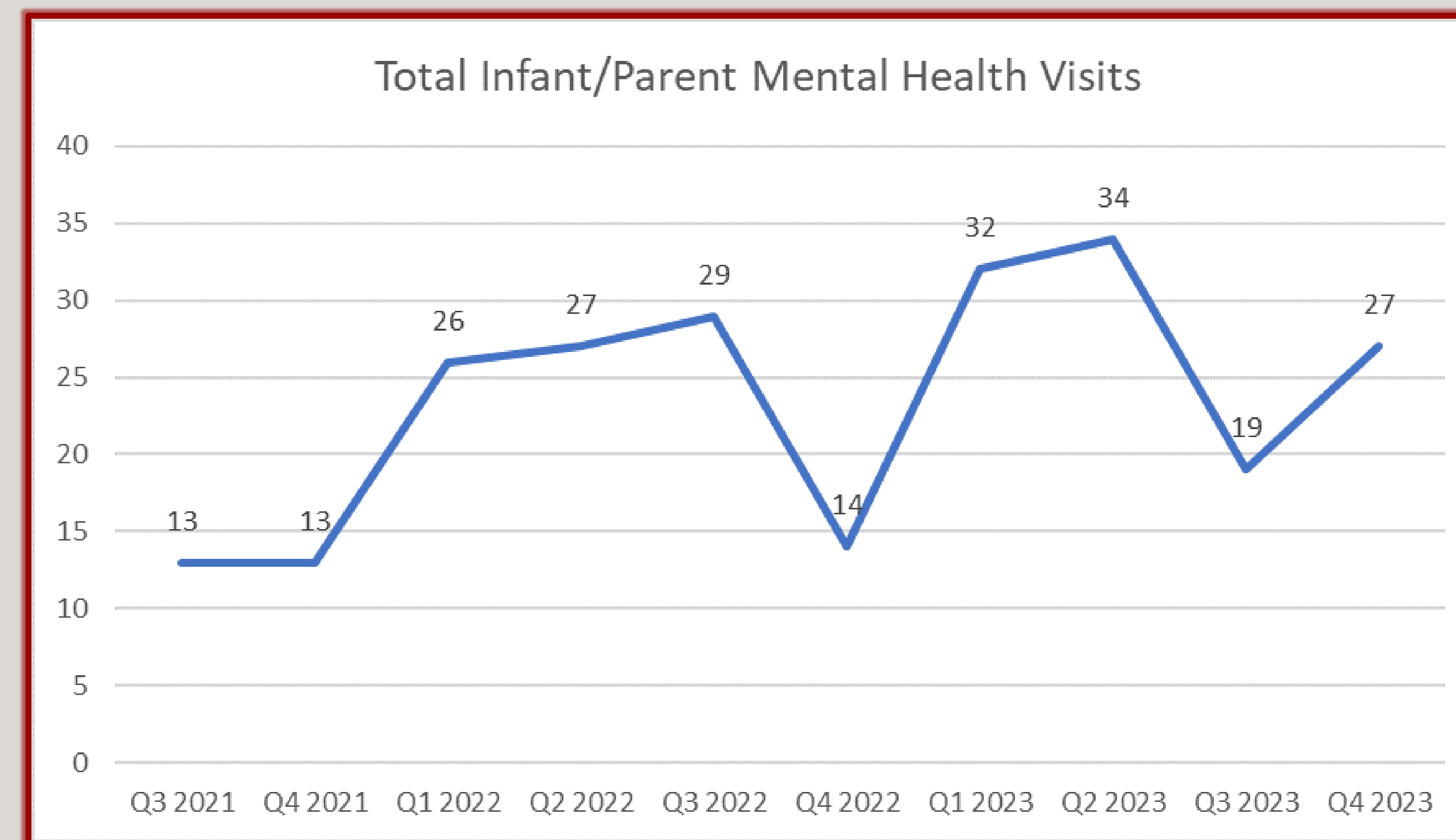
- Parents of medically complex infants have increased risk for PMADs and traumatic stress in the perinatal period¹
- Post NICU, parents may experience high levels of stress caring for their babies and managing their medical needs
- Symptoms of PMADs and traumatic stress can negatively impact the parent-child relationship²

HIGH-RISK INFANT FOLLOW-UP PROGRAM

- Interdisciplinary team based at academic children's hospital
- Program enrolls ~250 new patients annually and supports Level III & IV academic NICUs and community-based NICUS
- Referral criteria: Born <32 weeks gestation; diagnosis of moderate/severe BPD or complex CHD; had surgery as a neonate; and/or discharged with NG tube or high-calorie feedings

ACTION

- Two psychologists (combined .5 FTE) began providing infant and perinatal mental health services for HRIF families in August 2021
- Psychology referral criteria: positive EPDS screen; emotional distress related to baby's medical diagnoses and care; parent-child relationship problems impacting baby's medical care
- Psychology appointments offered virtually or in-person

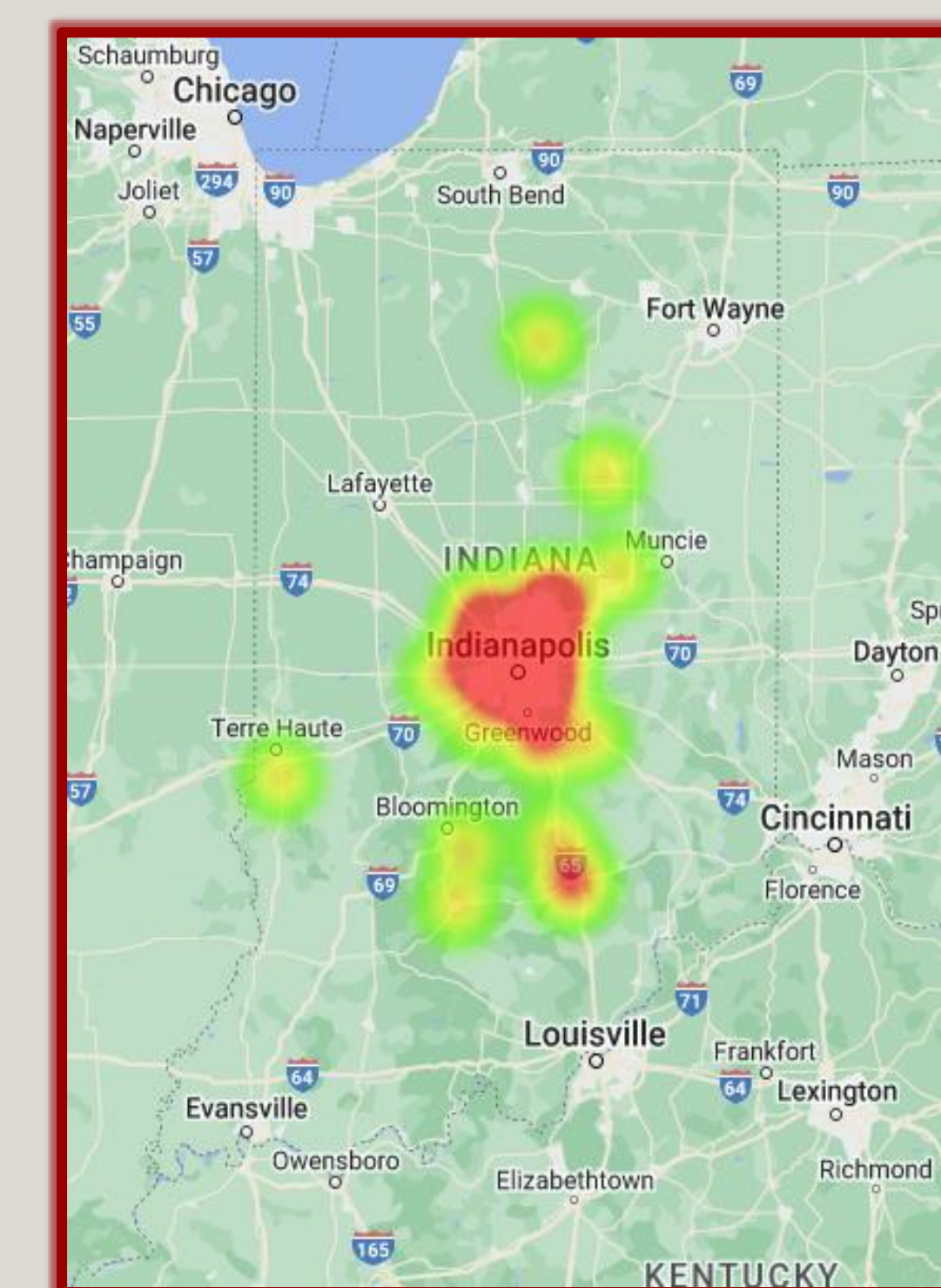
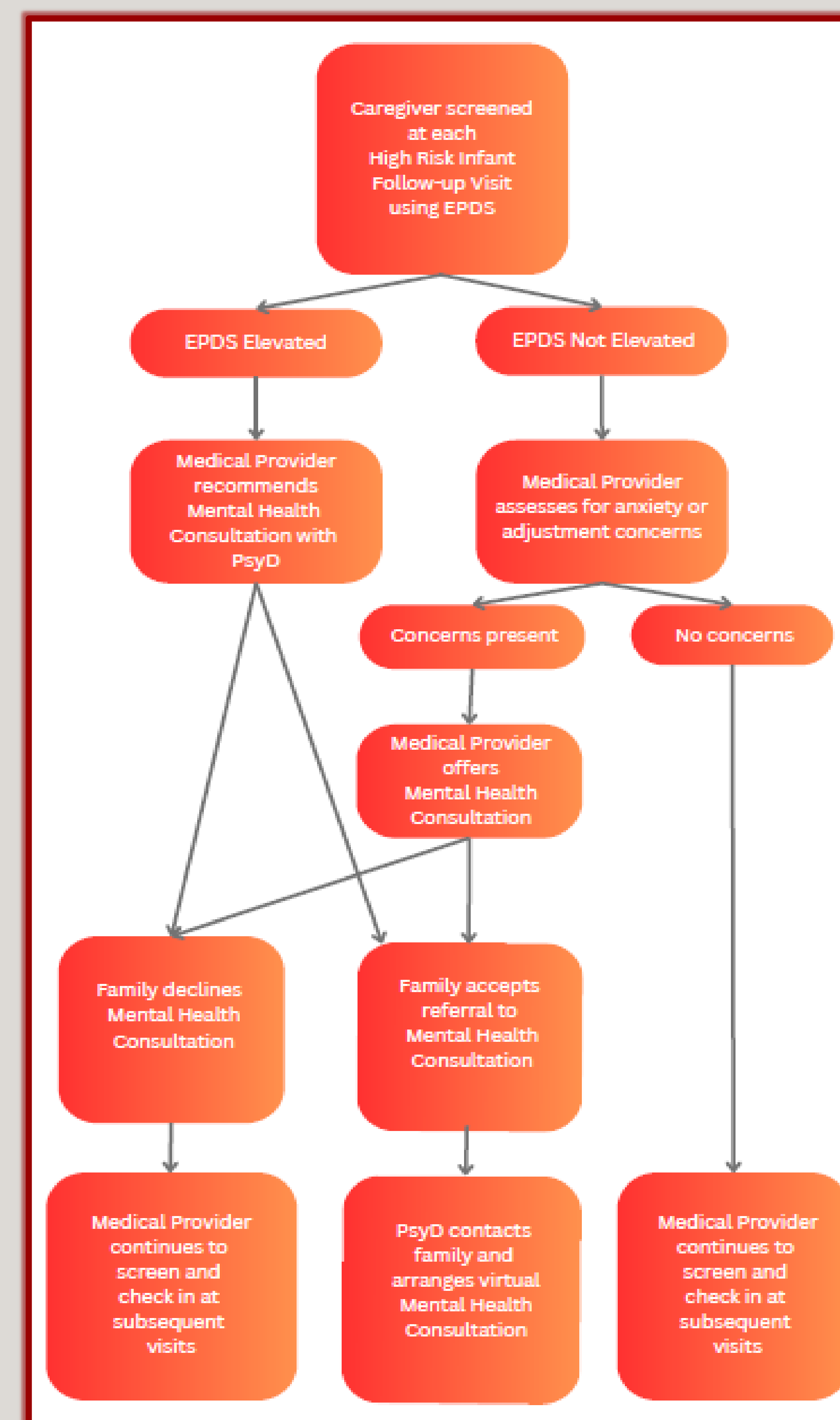


RESULTS

- From August 2021 to December 2023:
 - 35 new patient intakes completed
 - 31 families engaged in ongoing treatment
 - 238 total psychology sessions completed

IMPLICATIONS

- Parents express appreciation for psychologists who understand their children's medical diagnoses and treatment plan
- Psychology service provides additional opportunities in HRIF program to support parent-child relationships and implement preventative strategies
- Majority of sessions are telemedicine, increasing access for families across the state (see map)



REFERENCES



LESSONS LEARNED

- Psychologists can fulfill multiple roles in a HRIF program (infant and perinatal mental health; developmental and autism-specific assessment; provider consultation)
- Integration of psychology into an existing HRIF requires trusting relationships with providers, staff education, and adaptability

NEXT STEPS

- Develop psychoeducational virtual support groups for parents; topics may include feeding difficulties, challenging toddler behavior, and coping with PMADs