Welcome to the first edition of our DC MAP newsletter! In this edition, we introduce you to the DC MAP program and provide practical information on managing ADHD. It is the goal of our program to provide consultative assistance to your practice as well education and training to help you manage the mental health concerns of your patients and their families. We are aware of the challenges you face managing multiple medical and psychosocial needs. We hope to be an on-going resource and look forward to hearing from you!

~DC MAP Team

What is DC MAP?
DC Mental Health Access in Pediatrics

DC MAP is based on a highly successful model that started in Massachusetts in 2003 and has since been adopted in over 30 other states.

- Supported by the DC Department of Behavioral Health
- Staffed by an interdisciplinary team from Children’s National and MedStar

Services provided:
- Live phone consultation with child mental health experts (psychiatrists and/or therapists, depending upon consultation question) within 30 minutes
- Brief, time-limited follow-up services as clinically indicated
- Mental health training and education
- Resource guide maintenance
- Psychotropic Monitoring Group

Tips for when to consult with DC MAP:

DC MAP services can be helpful to providers who are managing patients with mental health concerns in their practice but may need additional consultation from specialists. Some examples of when it may be helpful to utilize DC MAP services include when:

- Providers would like assistance in adjusting psychiatric medications.
- There is an increase in target symptoms such as aggression, impulsivity, and agitation.
- Providers would like information about managing conditions (e.g., tantrums, anxiety) in their practice.
- There is concern about co-morbid disorders (e.g., anxiety or mood disorders).
- Providers need assistance locating appropriate community-based mental health resources for a family.
Spotlight on Attention Deficit Hyperactivity Disorder (ADHD):

Patients with ADHD show a persistent pattern of inattention and/or hyperactivity-impulsivity that interferes with functioning or development in two or more settings. They may present with predominantly inattentive symptoms, predominantly hyperactive/impulsive symptoms, or both. Since symptoms can change over time, the presentation may change over time as well. Some of the symptoms must have been present before age 12.

**Rating Scales for identifying patients with ADHD:**
- NICHQ Vanderbilt Assessment Scales
- Conner's Rating Scales

**Typical Interventions:**
1) Parent and child education on diagnosis and treatment
2) Behavioral treatment including:
   - Behavior modification (charts, incentives, behavior tracking)
   - Sample behavior management strategies
   - Parent training (helping the child learn organization and planning skills, routines, improving task completion)

**Tips for parents**
- Social skills (individual therapy and group therapy)
- Parenting tips: Improving social skills
3) Educational interventions (504 plan, IEP, assessment for learning disabilities)
4) Medication management of symptoms of impulsivity and/or inattention

**Resources for Parents:**
- Information on ADHD (NIMH)
- Facts for Families (AACAP)

ADHD in the Classroom

As a provider, you may frequently be asked to make recommendations to schools regarding accommodations for students with ADHD. Some typical strategies implemented in 504 plans include:

1. Assignments reduced into manageable sections with specific due dates
2. Extra time for assignments
3. Repetition of directions and verification of understanding of directions.
4. Frequent structured and planned breaks
5. Use of earphones and/or study carrels, quiet place, or preferential seating to reduce distractions.
6. Extra time for testing. Consider testing orally
7. Providing student with an assignment notebook/agenda/organizer
8. Providing visual aids (schedules, rules, reminders)
9. Behavior plans to reinforce on-task, pro-social behaviors
10. Daily/Weekly progress reports home

A full list of additional accommodations and interventions can be found at: CHADD: Accommodations/Interventions for a 504 Plan

Why can’t I make friends? Social Skills and ADHD

Kids with ADHD may struggle with maintaining positive peer relationships. Some of the target areas in this domain include:

- improving turn taking in play and verbal interactions
- reducing impulsivity in social interactions
- improving awareness of social cues
- responding to negative feedback from peers without disruptive behaviors
- advocating for self in negative peer situations

**Some suggested interventions:**
- social skills groups to identify and practice appropriate social behaviors
- adult supervision, guidance, and coaching during unstructured peer activities
- pairing child with a peer buddy who can model some of the needed social skills

**Tips for teaching social skills:**
http://www.ldonline.org/article/14545/
ADHD in the Research World

Treatment of Attention-Deficit/Hyperactivity Disorder among Children with Special Health Care Needs
The Journal of Pediatrics
Published online: April 1, 2015:
http://dx.doi.org/10.1016/j.jpeds.2015.02.018

Effectiveness of a Telehealth Service Delivery Model for Treating Attention-Deficit/Hyperactivity Disorder: A Community-Based Randomized Controlled Trial
Journal of the American Academy of Child and Adolescent Psychiatry
Published online: July 3, 2014:
http://dx.doi.org/10.1016/j.jaac.2013.09.001

Persistence of Parent-Reported Attention-Deficit/Hyperactivity Disorder Symptoms from Childhood through Adolescence in a Community Sample
Journal of Attention Disorders
Published online: November 25, 2013:
http://www.cdc.gov/ncbddd/adhd/features/community-sample.html

The ADHD Workbook for Parents: A Guide for Parents of Children Ages 2-12 with Attention-Deficit/Hyperactivity Disorder
By Harvey C. Parker, PhD (2006)

By Russell A. Barkley, PhD (2013)

Putting on the Brakes: Understanding and Taking Control of Your Add or ADHD
By Patricia O. Quinn & Judith M. Stern (2012)

The ADHD Workbook For Kids: Helping Children Gain Self Confidence, Social Skills, & Self Control
By Lawrence Shapiro, PhD (2010)

Let’s Be Friends: A Workbook to Help Kids Learn Social Skills and Make Great Friends
By Lawrence Shapiro PhD (2008)
Using DC MAP Services:

• Free!
• Call about any issue pertaining to mental health
• Child insurance status or home state does not matter
• Enrollment strongly encouraged (though not required). We will be raffling off prizes for the first 50 practitioners to enroll:
  Practice Enrollment Form: https://cri-datacap.org/surveys/?s=XCj2q9Xbxk
  Provider Enrollment Form: https://cri-datacap.org/surveys/?s=2TUbz7XwG6
• Provide basic information about your question/patient and we will connect you with the appropriate team member

**Hours:** Monday – Friday 9am-5pm

Please note this is a provider-to-provider consultation service and **not intended to be used by families.**

For questions or to learn more contact:
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**Meet the DC MAP team:**

**MedStar Georgetown University Hospital**

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