

# Project ECHO: Sunflower Health Plan Case Presentation

## Presentation Information

Series: Preventative Health

Session: Treatment and Therapies

Name: Kat Sweeney

Date: 11/5/2020



## Patient Information

Gender:  Male  Female

Age: 13

Race:

- American Indian/Alaskan Native Asian   
  Native Hawaiian/Pacific Islander   
  Multi-racial Other  
 Black/African American   
  White/Caucasian   
  Prefer not to say

Ethnicity:

- Hispanic/ Latino   
  Not Hispanic/Latino   
  Prefer not to say

<b>Social and Trauma History</b> (Current living situation, employment status, pertinent legal history, level of education, relationship status, children, support system, etc.) Currently resides with his biological mother and two younger siblings, one younger sibling has autism. Biological father is not a consistent figure in his life. Has an IEP and is supported in a specialty classroom for students with autism. History of multiple psychiatric hospitalizations due to behaviors in the home, including IP and PRTF stays. Concern that an injury might have occurred during an IP stay. Home is often described as chaotic, family has moved homes often, issues with cleanliness and bedbugs.	
<b>Medical History</b> (Diagnosis, conditions, etc.) ADHD, hyperactivity type Autism Spectrum Disorder Disruptive Mood Dysregulation Disorder	<b>Medication Summary</b> (Name, dose, frequency, route) 250mg Depakote ER tab, 2x/day 0.1mg Clonidine Tab, 2x/day 9mg Invega tab, 1x/day 1mg Benztropine, 2x/day 100mg Trazodone, 1x/day
<b>Lab Summary</b> (Test, result, date, etc.) GeneSight testing previously completed	<b>Toxicology Summary</b> (Test, result, date, etc.) None
<b>Substance Use History</b> (Substance, age of first use, age where use became problematic, longest period of sobriety, how sobriety was achieved, method of use) None	
<b>Psychiatric History</b> (Age of first mental health contact, past diagnosis, self-harming behavior, suicide attempts, etc.) Previously was supported by the SED waiver, but this waiver was closed after a crisis request to access IDD waiver supports was approved. Still receives CPST/therapy (family)/med mgmt. through CMHC. Will engage in physical aggression when escalated, has destroyed property and will elope when upset. Will also engage in SIB in the form of head banging.	
<b>Treatment Summary</b> (Form of treatment, date entered, voluntary, etc.) Approved for self-directed PCS (no agency directed options in their area). Difficulty in identifying workers due to the intensity of behaviors. PSH DDT&TS referral was made, but they were unable to finish observations and recommendations due to individual admitting to PRTF. On ABA wait lists, but nearest ABA provider is around 25 minutes away. Family preservation has been involved a couple times and has been recommended, but mother does not think it is helpful.	

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## Barriers to Treatment

Rural area with limited provider options.

Concern that member's mother is quick to explore IP and PRTF when things become escalated.

Many providers have tried to offer ideas to individual's mother, but there is resistance in implementing and following through on recommendations.

School has expressed some sensory-related needs (does utilize OT in school), but rural area has limited OT providers.

Consistent transportation.