

What We're Learning About the Patient Navigator Role in Supporting Behavioral Health Access and Utilization: Discussing Insights with Dr. Jennifer Mautone

[Behavioral Health](#)

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In a [2023 blog post](#), we explored how pediatric researchers and clinicians are using patient navigation to support children and families in accessing behavioral health care. This approach builds on patient navigation research for children with [special health care needs](#), which finds improved health and well-being for families and children when navigation services are available. Related to behavioral health, emerging research and pilot studies find families are [more likely to complete](#) mental health assessments, [connect to care](#) and to stay engaged in care once connected when they work with patient navigators.

Today, I am following up with my PolicyLab colleague Dr. Jennifer Mautone who works with [patient navigators](#) to connect families to health care providers and resources, provide brief interventions, support family engagement in care, advocate for the patient and family, or help the caregiver problem-solve. I sat down with her to learn more about what they are observing in their research and patient care.

In your research, how are you considering the navigators' impact on patient care? What are you learning so far?

With our study about the effectiveness of an enhanced behavior therapy program for families of children with ADHD, [Partnering to Achieve School Success \(PASS\)](#), we call our patient navigator a Community Health Partner (CHP). The CHP is part of the team and promotes family engagement in treatment and cultural effectiveness of care. In this role, the patient navigator is working to establish trust, listen attentively and use motivational interviewing strategies. We are seeing that the more contacts families have with the patient navigator, the more likely they are to attend therapy sessions. Behavioral health clinicians and families have

also indicated that the patient navigator is an extremely helpful extension of the care team.

And what are you learning about the patient navigator role?

In [PASS](#), we are finding that the patient navigator spends most of their time working with patients' families on scheduling, reminding them about appointments and assisting in overcoming barriers to care. Occasionally, the navigator supports parents with implementation of strategies they learn in therapy sessions, such as how to consistently provide positive attention to their children and limit their use of punishment. The patient navigator has also become involved in supporting family-school collaborations.

What do you see as priorities for future research related to patient navigators supporting families in engaging in behavioral health care?

Our study is unique in that we are connecting children with ADHD to care and also providing the intervention, so our patient navigators are critical in supporting families' initial attendance and ongoing engagement in care. We believe that higher levels of engagement will result in better child and family outcomes. As such, one question that we hope to answer is how the patient navigator role influences outcomes for children with ADHD.

Additionally, we are thinking about how this position could be sustained in the care team. We are exploring if these activities could be billable as part of collaborative care or case management, and we are collaborating with health systems leaders to consider other options for sustainability.

Putting this conversation into context

In reflecting on my conversation with Dr. Mautone about PASS and the context about [other interventions](#) that engage patient navigators, I noticed a few themes:

- Patient navigators' time is primarily focused on helping patients get to appointments and connect to resources responsive to families' needs and what is available in the community. These roles might be able to be expanded to more fully support patient and family engagement in care and adherence to care plans.
- Care teams are observing improved attendance at appointments. This metric is valuable and perhaps a major indicator of success as attributing the impact of patient navigation on the child's health is complex. There is going to be variability in individual family needs and the subsequent referrals made. And, unless a standard intervention is offered—as is the case with PASS—the care received following the referral will be individualized, making it difficult to get a full understanding of the link between navigation and health outcomes.
- Sustaining these service models will be reliant on a flexible reimbursement mechanism that can accommodate different applications and patient populations.

We also know that continued research related to patient navigator roles and their contributions to improved patient outcomes is needed to justify the cost of these professionals and sustain their involvement in clinical services. We look forward to continuing to explore how to best support families through this unique role.

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