Medical Hospital

Description of Medical Hospitals

Medical hospitals are intended to provide an array of medical care to the community in both emergency situations and for specialty practices. They may be provided outpatient or there may be time spent overnight in the medical hospital in order to receive the most appropriate care. Medical Hospitals are capable of providing care to all ages, though there are specialty hospitals for children and adolescents. This section may include medical hospitals, emergency rooms, and urgent care settings.

Screener vs. Assessment

Screener
- Widely administered
- Brief
- Easy to complete
- Gives yes or no information
- Focused on a specific topic

Assessment
- Targeted administration
- In-depth
- Requires training to administer
- Gives unique client picture
- Informs treatment
- Completed over 1-3 visits

Recommendation

Universal trauma screening, or screening all youth clients that enter into medical hospitals, is recommended because a high number of youth have experienced traumatic events but have not received services specifically for the traumatic experiences. Trauma may be recognized through primary care, but for youth who do not have a primary care provider the hospital and emergency room setting can assist in recognizing the child's need for intervention. For youth that screen positive for trauma, a more in depth trauma assessment can be administered by a mental health professional at the hospital or by referring the family to an outside resource. Additionally, having basic knowledge, gained through a brief trauma screening, of trauma experienced by a child can help a doctor to better provide appropriate, trauma-informed care.

Potential Trauma Screening Tools (indicates availability of tool in other languages)*

- *Pediatric Symptom Checklist - http://www.massgeneral.org/psychiatry/services/psc_forms.aspx
- *Pediatric Emotional Distress Scale (PEDS) - http://www.nctsnet.org/content/pediatric-emotional-distress-scale
- *Child Behavior Checklist (CBCL) for ages 1½–5 http://www.aseba.org/forms/preschoolcbcl.pdf
- *Child Behavior Checklist (CBCL) for ages 6-18 - http://www.aseba.org/forms/schoolagecbcl.pdf

- *Patient Health Questionnaire (PHQ-9 & PHQ-2) - http://www.phqscreeners.com
- *Generalized Anxiety Disorder Screener (GAD-7) - http://www.phqscreeners.com
- *Child Reaction to Traumatic Events Scale (CRTES) - http://alrest.org/pdf/CRTES.pdf
- *Children's Revised Impact of Event Scale (CRIES) - http://www.childrenandwar.org/measures/children%E2%80%99s-revised-impact-of-event-scale-8-%E2%80%93-cries-8/
- *Trauma History Questionnaire (THQ) - http://ctc.georgetown.edu/toolkit
- *Strengths & Difficulties Questionnaire (SDQ) - http://www.sdqinfo.com

Resources

- Dehon, C. and Scheeringa, M. (2004). Screening for preschool posttraumatic stress disorder with the child behavior checklist. Journal of Pediatric Psychology 31 (4): 431-435. http://jpepsy.oxfordjournals.org/content/31/4/431.full
- Kazak et al. (2003). Identifying psychosocial risk indicative of subsequent resource utilization in families of newly diagnosed pediatric oncology patients. Journal of Clinical Oncology 21: 3220-3225.
- Winston, Kassam-Adams, et al. (2003). Screening for risk of persistent posttraumatic stress in injured children and their parents. JAMA290: 643-649.

Questions to Consider Before Implementation

- Who is responsible for distributing the trauma screener?
- How will you use the data and information collected to guide service delivery?
- Who is alerted if there is a positive screening?
- Is your agency qualified to provide a full trauma assessment? If yes, what assessment will your agency use?
- Will you track number screened versus the number who screen positive for trauma?