

BUGL's Outpatient Unit

Information for Parents



**The Outpatient Unit of the Child and Adolescent Psychiatric Department
of the National University Hospital of Iceland
Dalbraut 12, 105 Reykjavík, Tel: 543-4300**

An appointment for your child's first interview has now been made at BUGL's outpatient unit. It is important that you confirm your intention to attend.

The purpose of this booklet is to answer some of the questions that often arise for parents who are going to their child's first interview. Reasons for referrals differ. Children who come in for a diagnosis and treatment at BUGL's outpatient unit generally have had to cope with complex problems which call for the specialized services of BUGL for some period of time until the services in their immediate environment are sufficient.

Close cooperation between parents and the child's therapists is very important. The parents know their child best and are aware of their child's strengths and weaknesses; therefore, their perspective is important when working with the child. Both the parents and the child provide information to the therapist and help with outlining the problem. Following the diagnostic process the parents cooperate with the therapist in making a treatment plan based on the child's needs and which treatment options and resources will prove effective for the child and family. An important role of the parent is to be the child's advocate. After the initial diagnostic work the next step is decided. Parents must actively work with the case manager and other treatment parties. They must also effectively get information or questions across regarding the proceedings of the case to ensure that the treatment goes smoothly.

If parents/guardians have any comments and/or complaints in regard to a child's treatment/service they may contact the service manager, division manager and the medical director by calling BUGL's outpatient unit at this number: 543-4300.

Coming in for your first interview

An interview usually takes between 1-1½ hours. The child must attend, as well as both parents if possible. Please remember to bring supporting documents such as the questionnaires for parents and teachers which were included in the envelope from BUGL, and other documents. All psychological assessments and tests that have been done on the child should have been attached to the referral. If you know of any additional documents, please bring them with you. As you may have a lot of questions it's a good idea to write them down beforehand. You may even want to take notes during the interview in case something comes up that you want to consider.

When you come to the first interview you will be greeted by your child's case manager. Sometimes parents are called in for the first interview without the child, and in those cases the child will get another appointment (see your appointment letter). The interview will cover your child's history, symptoms, family history, educational history and more. At the end of the interview the next course of action will be discussed. The child's physician does not usually attend the first interview but will be updated on the case during the next team meeting.

The next steps

After an interview with the child and parents, when all documents have been reviewed and the case has been presented at a team meeting, the parents are contacted and presented with a plan regarding the diagnostic process. After diagnosis a treatment plan is put together in cooperation with the parents. Usually an information meeting is held with the school and those who take care of the child in his/her immediate environment. At BUGL we base our work on the principle of proportionality in administrative law, which means that treatment in the outpatient unit is thoroughly attempted before other options such as admittance to the inpatient unit are considered.

The policy is to give parents a written treatment plan which then has to be reviewed regularly. When results from assessments are ready, a report is written and is usually submitted to the parents in a submission meeting. Parents should receive the written results within 8 weeks of the first meeting.

Discharge from BUGL

When a case has reached a point where a child and his/her family no longer needs the specialized services that BUGL provides and the services in their local area can take over, the child is discharged from BUGL. This is done in consultation with the parents/guardians of the child and a discharge report gets sent to the referrer with a copy for the parents.

Should any questions arise during the reading of this booklet, or if anything is unclear, please direct your questions to your local support contact or reach out to BUGL. It is also a good idea to write down your questions and discuss them in the first interview.

If you no longer consider BUGL's intervention necessary for your child's case we ask that you let us know as soon as possible. We will then send the referral back and the child will be taken off the waiting list. A new referral with new documents can always be sent to us again should the child's conditions worsen.

Phone number for BUGL's outpatient unit: 543 4300

Reception is open all weekdays from 8:00 am - 4:00 pm.

BUGL's emergency services are open all weekdays from 8:00 am - 4:00 pm through tel: 543 4300. Outside normal working hours the emergency calls are directed to BUGL's inpatient unit, tel: 543 4320 / 543 4338.

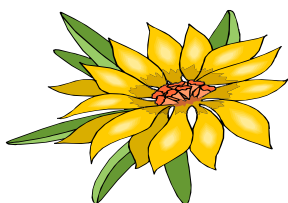
General information about the operations of BUGL's outpatient teams

When a referral is received at BUGL, the admission team reviews it. If the referral is approved the child goes on the outpatient unit's waiting list. For the past years the average waiting time has been around 6-8 months, and it is expected that children receive services in their immediate environment until BUGL takes over the case. An interdisciplinary group works in the outpatient unit consisting of child psychiatrists, psychologists, social workers, nurses, occupational therapists, and art therapy specialists. Team meetings are held once a week. At team meetings, new cases are presented, older cases discussed and decisions made in regards to the next steps for the cases. Each case has one case manager and a physician. Additional professionals are involved in cases depending on the need for them. When you are asked to come in for your first interview it is stated who your case manager is.

The role of the case manager is to supervise the child's treatment in the outpatient unit. He/she ensures that the child is provided with the treatment options that are considered useful for the child and attends meetings with parents and service parties outside of BUGL. It is the case manager that the parents can talk to when they need information about the status of the case, want to give information about changes in the case, or when they need support. The physician of the case usually meets the child and parents, particularly in cases where the child has to be assessed in regard to medication treatment or in the case of a complex symptom manifestation. When medication treatment is not deemed necessary the physician may not see the child, but still attends team meetings and follows the case through the case manager, and is responsible for the diagnoses and treatments that the child receives at BUGL.

Please note that if the case manager is not available when you call for information it is best to leave a message, which will then be responded to as soon as possible.

Please hold on to this booklet so that you can review it again if questions arise later in the process.



Best regards, with hopes of a pleasant cooperation,
The staff at BUGL's outpatient unit.

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SUPERVISION:

UNNUR HEBA STEINGRÍMSDÓTTIR
SERVICE MANAGER

RESPONSIBILITY

LINDA KRISTMUNDSDÓTTIR
DIVISION MANAGER

DESIGN:

MARKETING LSH