



**This letter is being written on behalf of the Child Mental Health and Wellness Department.**

This letter is to address ongoing concerns with inconsistent reception and frontline support. The Mental Health and Wellness Department depends on our frontline support to be the face of the department. They are as much a part of our team as therapists and psychiatrists. When members come in for mental health appointments they may be anxious, nervous, uneasy, unsure, and overwhelmed, among many other feelings. Many face stigmas and have been building up the courage to seek help long before they scheduled their appointments. Many are in acute crisis. Having a friendly face to welcome and register our members is a crucial step to helping our members feel at ease and taken care of in our department. Moreover, it sends the message that our members are valued and can trust us with their mental health care.

In the department of Mental Health and Wellness we also depend on our frontline staff to provide valuable pre-session assessments to members. These assessments are often the first time a member is able to voice their specific concerns to be shared with their provider. We do not have Medical Assistants in our department to assist with these tasks. Our frontline staff provides clinicians with invaluable information to help prepare for sessions and know the best ways to support our members at each encounter.

One of Kaiser's core tenants in its value system and model of care is to provide exceptional care to our members at each point of entry, every time. When we do not have consistent reception coverage, our members suffer. Below are some thoughts and patient stories/experiences from the providers in the Child Mental Health and Wellness Department regarding the lack of reliable reception:

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**NVLY Wide - Supportive Duties Performed by Reception/Frontline Staff**

- Reception helps to notify security if there are safety concerns that arise in the waiting room and helps to assist providers in getting in touch with security if needing immediate assistance in a session.
- Reception helps to establish a safe environment in the waiting room. The frontline staff is able to privately attend to members by politely and empathetically talking through member concerns and alerting providers or managers if further assistance is needed. This helps to ease member's concerns and ensure all members in the waiting room have a safe environment to access care with their providers.
- Reception is able to inform providers/managers if patients walk in without a scheduled appointment and are in need of an appointment or crisis services.
- Reception provides our members with intake paperwork and pre-assessment questionnaires. They are also able to receive letters, ADHD evaluations, and other screening materials from members to be provided to clinicians. Without this support, members are not able to complete important documentation in a timely manner as part of their mental health care.

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## Clinic: Folsom

- “In the Folsom Mental Health and Wellness Department, when we do not have reception coverage, our members are met with signage that tells them to walk across the hall to Pediatrics or Women’s Health to register for their appointment. This can be a confusing and stressful process for mental health members who are juggling the needs of children’s meltdowns or anxious distress about attending appointments. Additionally, the other departments are not always equipped to provide our members with the necessary paperwork and pre-assessment questionnaires that are crucial to providing care to our members. The other departments have also voiced concerns about the emotional escalation mental health members may have upon registering for their appointments. After registering across the hall, members are redirected to wait in the Mental Health waiting room, which is at times left unmonitored by any staff or security.” – *Child Mental Health Provider*
- “During timeframes when there is no reception coverage at all (lunch hour, later afternoon/evening appts) within the department or building, members are asked to sit in the waiting room without registration, to wait for their provider. Providers have no way of knowing if their member has arrived. There are occasions when members arrive late, and their provider was not aware that they were in the clinic waiting for care. Providers spend time walking back and forth out to the waiting room to see if their member has arrived. This time cuts into member’s appointment time, as well as time that could be spent on other patient care duties between appointments such as writing notes, writing and providing school letters to members, responding to member messages, and returning member phone calls. Mental health clinicians do not have any Medical Assistants or other staff to support these needs.” – *Child Mental Health Provider*
- “Not having reception has impacted my workload and clinical work in a variety of ways including the following:
  - Having to walk back and forth to reception area from my office several times to check if my patient has arrived if they arrive late. This impacts my ability to do other tasks I would otherwise do while I wait for my patient to arrive.
  - I am not able to give the iPad for pts to complete Lucet which impacts my ability to track outcomes and use FIC (*Feedback Informed Care*) in my practice.
  - Historically reception has played a large part in the registration process for groups. If they are not present during group start time, patients will not be able to join the group if they arrive late (no one available to let them in the locked area). Also the number of patients registering for group will create long waits for all patients arriving for appointments at the same time in other departments/reception areas. This could be up to 15 families waiting in line around the same time. This will also impact our ability to start groups on time.” – *Child Mental Health Provider*

- “Some of my thoughts and examples of the impact of not having a receptionist in our Department:
  - I have had regular experiences of patients/families declining a school note, then getting out to the waiting room following a session, changing their mind, telling the receptionist, the receptionist ping me to let me know, me printing and providing the note.
  - Overall benefits of being greeted for their appointment, given the often state of their nervousness about coming to Psychiatry. This is an ongoing positive and support for our patients.
  - Receptionist responds to patients needing to turn in assessment paperwork, or needs to pick up something from the therapist from Will Call.
  - The receptionist has given me a confidential, “heads up” when there is an agitated child and/or parent. Our receptionist provides a presence that helps prevent escalation.
  - I have young teen patients that get dropped off by a parent. The presence of a receptionist provides a sense of safety as that patient waits for me to greet her and start our session.” – *Child Mental Health Provider*
  
- “There are many concerns about not having frontline coverage in the Mental Health Department, including: Confidentiality of mental health members, Parents with young children finding the right place, Will call for Mental Health materials, Mailing of letters, scanning/labels, tablets including storage, getting them back, charging, In person groups (checking in if late, buzzing in and out of door, large amount of people registering at once), and no eyes on members while they are in our waiting room.” – *Child Mental Health Provider*

**Clinic: Sacramento- Morse Ave**

- “I had members locked in the building and not able to get out several times. Members had to call me or send me a kp.org message to help them get out of the building. Another situation where members are in the waiting with the lights turned off, because there are no reception.” – *Child Mental Health Provider*
  
- “On 10/25/2023, I had my first in-office visit scheduled with a young patient with autism because I had difficulty engaging with him over video. This was in the afternoon when reception was not available. My patient was shut down from the moment I found him in the waiting room to the end of the visit, and sobbing the entire appointment. His mother told me he got scared downstairs in the waiting room with no reception and the light flickering. Beyond the distress this caused my patient, it also prevented me from gathering important clinical information.” – *Child Mental Health Provider*
  
- “I don’t have a specific story, but the common story is that a patient will be downstairs, we won’t know they have arrived and they might be down there waiting with no paperwork (if an intake), and no ipad. Sometimes the lights are turned off. Other times they will make their way upstairs and wander around.” – *Child Mental Health Provider*

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## Clinic: Roseville

- “When there is no reception available in the Child Department, patients arrive to see a sign directing them to a different building, where they are asked to check in. As providers, we then are walking between buildings between each appointment to greet and bring patients into session. This walk over can be more challenging during inclement weather. Very young patients struggle more with the long walk, as well as caregivers with mobility concerns. This walk also reduces the amount of clinical time we are able to spend with our members, resulting in sometimes rushed-feeling sessions, which in turn reflects poorly on member satisfaction (MPS).” – *Child Mental Health Provider*
- “Patient expressed that she was confused. She went to open door, it was locked, patient expressed that it was challenging to figure out where to go - how to find the adult suite (*to check in*). Patient expressed frustration having to go to a separate building.” – *Child Mental Health Patient*
- “One parent was stressed about needing to use the restroom and wondering how to get thru the door (it was unlocked but they hesitated to go there w/o permission).” – *Kaiser Member*
- “I sit next to the walkway between the 2 entrances. It is not uncommon to see families hurrying to adult after making their way to child, in order to check in and be on time. They appear stressed during this time, sometimes running to adult. I am assuming they are feeling stressed about being late. – *Child Mental Health Provider*
- It is an awkward maze to get them from adult, enter thru child down 1 hall, cross thru the waiting room and down the other hall for the apt and then needing to escort out again after. – *Child Mental Health Provider*
- “(*Not having reception in the Child Department*) takes time out of the appointment.” – *Child Mental Health Provider*
- “As a patient of Kaiser, when this has happened to me for my own apts in other depts, it was anxiety provoking and confusing about where to sign in, where to wait for my apt, and caused me stress about being late as well. I’m grateful the staff were understanding and relaxed about it however as a patient it was an unexpected experience.” – *Kaiser Member/Child Mental Health Provider*
- “I understand our side is nowhere near as busy as other depts but having reception is a basic principle in customer service, patient care and should be standard practice for any company, let alone a leading health organization.” - *Child Mental Health Provider*
- “I understand there’s priorities on staffing but patients’ are upset as they cannot get in where they’re supposed to, i.e. the Child Side (*Child Department Building*), and have to

trudge over to Adult (*Building*) and get in line. More time is needed to process the registration, some of them have refused Ipad, then have to be walked back (to the Child Department Building). The entire “in person” care experience is torpedoed as we have no front desk person.” They’re losing appointment time and Kaiser is losing good will.”  
– *Child Mental Health Provider*

- “The mornings have been cold and having a warm place to take shelter while waiting for an appointment is so important. I recently had a patient who was here with their mother and elderly grandparent and were found out in the cold, confused. Luckily, a coworker saw the family and kindly offered support. The family had shared with the colleague that they had waiting in the car and it had got too cold but they didn’t know where to go. My coworker kindly took it upon themselves to bring them inside for a place to safely wait, identified who their appointment was with, notified me as the provider and allowed the family to take shelter in our warm child-side lobby. I’ve often found when our lobby is closed that patients will be confused and uncertain even with signage due to the size and shape of our building. In this situation specifically, the grandparent and patient were able to wait in our lobby however mom still had to walk around to adult side to register and upon return needed to call grandparent so that I could go and let her in for the appointment. This type of care is so far from welcoming it’s unacceptable. Here was a family attending an appointment as support to one another, confused upon arrival, forced to deal with unbearable elements and delayed in beginning care due to trying to figure out where to go and how to gain access. This makes us appear disorganized and under prepared. It is vital as part of our care experience that our patients can navigate their care with ease. Having to figure out a puzzle to access registration and their appointment is cruel when it comes to supporting individuals needing care. Some of our patients have immense anxiety and leaving their home in itself is anxiety inducing, being able to be welcomed into an easy-to-find lobby where they’re safe from the elements, greeted by friendly and reassuring people and not having to lose time from their appointments due to both patients and providers having to-and-fro between buildings is vital to quality care experience. Those who are receiving in-person care deserve to be met and treated with dignity and respect as members of the Kaiser Permanente Care System.”– *Child Mental Health Provider*
- “We cannot afford to cut corners when it comes to the first stop of our care experience. As a patient of Kaiser, when this has happened to me for my own appts in other depts, it was anxiety provoking and confusing about where to sign in, where to wait for my apt, and caused me stress about being late as well. I’m grateful the staff were understanding and relaxed about it however as a patient it was an unexpected experience.” – *Kaiser Member/Child Mental Health Provider*
- “Due to delays in starting the appointment from lack of child reception the therapist is then rushed. Therapist is having to use other moments later in the day to finish notes. If there was a risk assessment needed, crucial time is lost in the session.” – *Child Mental Health Provider*

- “Outside of just checking in our patients, there are other reasons our reception area maintains great importance for the care we provide. Just today I was walking out of the building to go collect a patient from reception on the other side and was met by two individuals unrelated to one another, the first who was desperate for the restroom while waiting for their child who was inside with their therapist. Due to how our area is set up and the issue of our reception doors not latching behind folks, I walked her to the adult-side lobby (other side of the building) and directed her to the restrooms. Another woman was stood near our door extremely lost and looking for another Kaiser Permanente service, while this was not the correct building, having reception open with someone there would have been vastly more supportive than looking around and waiting for someone to exit and offer directions. I am hoping these examples can be considered for the vital support that reception and our team members in reception offer our members on a day-to-day basis.” – *Child Mental Health Provider*
- “Recently, I had a patient who came for a secondary appointment. The Adult side checked the family in. The family had a caregiver whose primary language was not English (of which I was unaware). Due to this reason, it took 20 minutes to fill out the Lucet questionnaire, which created a time constraint in our appointment. Once the caregiver was finished, I messaged the Adult front desk to have them start walking towards me. What I did not know is that there was a patient, parent, siblings, and a baby in a stroller all headed into the cold wind. They chose to wait outside the Adult waiting room for this reason. I had a photo of the patient from 10 years prior and was unsure if they were my patients or not. I walked to the adult side, greeted them, and confirmed they were my patient. Once we were inside the child side, we were 30 minutes into our 45-minute slot, and I pushed the time for doing notes to a different time to allow us the session. The next issue was that the caregiver spoke a second language and we then needed to get a translator to translate some of the information. Once the translation services were located, created, and enacted, the session was 40 minutes into the session, and we had to rush a lot of the introductions to honor the time spent for the family.”– *Child Mental Health Provider*

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### **In Conclusion:**

Reflecting on the feedback that has been shared amongst numerous colleagues across clinics, our patients are suffering as a result of inconsistent reception and frontline staff. Not having reception in the Child Mental Health and Wellness Department is a poor representation of Kaiser’s mission “to provide high-quality, affordable healthcare services and to improve the health of our members and the communities we serve.”

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**In Unity,**

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