

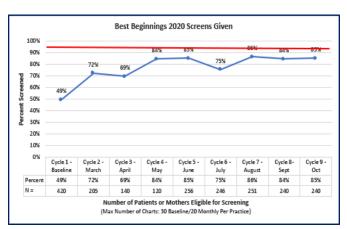
Unaddressed developmental delays, behavioral issues, and postpartum depression may adversely affect child health outcomes. The nine health supervision visits in the first two years of life are opportunities for pediatric primary care providers to identify these conditions and refer families to timely resources. Unfortunately, even when needs are identified and families are referred, specialist visits often remain 'unscheduled and unattended,' leading to persistent care gaps.

January - November 2020

Specific Aim

COVID Pause -- From March-May collaborative work "paused" as practices addressed COVID needs. Monthly interactive webinars allowed practices to share tips for schedule revisions, COVID testing, rolling out telehealth, and obtaining personal protective equipment. Several practices continued to track and enter data.

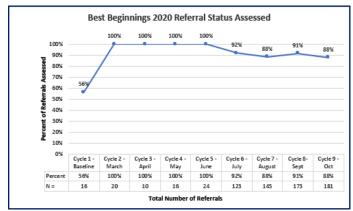
Measures



The Best Beginnings Screen measure assesses multiple components to ensure the accuracy of the screen interpretation. Practices began the collaborative with half of recommended screens appropriately completed and quickly implemented screening for around 85% of visits. Improvements most commonly noted were reliably completing the screen and scoring the screen accurately.



Practices began the collaborative with 50% of their patients or at-risk mothers having a documented follow-up plan and quickly implemented



Referral gaps exist when a patient at risk is referred for services, but the appointment is not completed.

Measuring the desired outcome of referral completion has little utility for making improvements in a 9-month collaborative as referrals may require months to complete.

This innovative measure tracked all referrals made during the collaborative. For a referral to count as "assessed," the appointment was completed $\ensuremath{\mathsf{OR}}$ scheduled for a future date.

The run chart follows the predicted pattern. Early in the collaborative when few referrals were made (especially in the pandemic), most appointments were scheduled and therefore "assessed" as 100%. Over time, as families missed appointments, referral tracking helped the practices identify and address the barriers to referral completion.

Participants

11 administrative/ support

14 practices from across

• 17 nursing/clinical

• 64 physicians

Alabama with 95 total staff:

Project Partners

- Help Me Grow • Reach Out and Read-Alabama
- Regional Autism Network
- Alabama Chapter-American Academy of Pediatrics

Project Support

- Children's of Alabama
- University of Alabama Department of Pediatrics
- University of South Alabama
- The Caring Foundation
- Alabama Medicaid Agency
- Alabama Department of Early Childhood Education

Practice panels annually have:

11 practices remained in the

extended collaborative while

navigating the pandemic

• 93,389 well visits 0 - 3 years • 237,540 total visits ages birth – 18 years • 41.06% of participating practice patients have Medicaid

Best Beginnings faculty came from across the state:

- Developmental Delay and Autism: Justin Schwartz, MD, FAAP, UAB Developmental-Behavior Pediatrics Birmingham, Alabama
- Social-Emotional Screening: Elizabeth Dawson, MD, FAAP, Charles Henderson Child Health Center, Troy, Alabama
- Postpartum Depression Screening: Lamenda Blakeney, MD, FAAP, Partners in Pediatrics, Montgomery, Alabama
- Family Representative: Susan Pannell

Alabama Child Health Improvement Alliance

For more information on this and other collaboratives, visit www.achia.org.

Participating Practices: Dothan Healthcare Network -- Dothan Pediatric Clinic, Enterprise Pediatric Clinic, Eufaula Pediatric Clinic, Ozark Pediatric Clinic; Greenvale Pediatrics - Brook Highland; Heritage Pediatrics; Huntsville Pediatric Associates; Infants' and Children's Clinic, P.C.; Midtown Pediatrics; Partners in Pediatrics; Pediatrics West Bessemer; Pediatrics West McAdory; UAB Pediatric Primary Care Clinic

LESSONS LEARNED

- prioritize and develop outside the collaborative.
- providers to bring novel ideas to their clinic.
 Bouncing ideas off of each other was especially useful during COVID to address the rapid changes around scheduling, supplies, and telehealth.