



Most adolescent morbidity and mortality is attributable to preventable risk factors, yet teens have the lowest rate of primary care use of any age group in the United States. Adolescents have unique health care needs that are not always addressed as well as face barriers to obtaining needed health care, including lack of (or perceived lack of) confidentiality. AAP quality adolescent health care guidelines include screening and counseling to promote healthy behaviors and prevent risky behaviors; the provision of confidential care; and enhancing the transition process to adult care.

January – September 2019

Project Goals

For collaborative practices to enhance teen friendly environments, to increase adolescent well visits, and improve transition to adult care

Project Aims

- Increase adolescent well-child visits for teens in the office by 10% above baseline
- Review practice confidentiality policy at 80% of adolescent well visits
- Create a transition to adult care process

Key Drivers

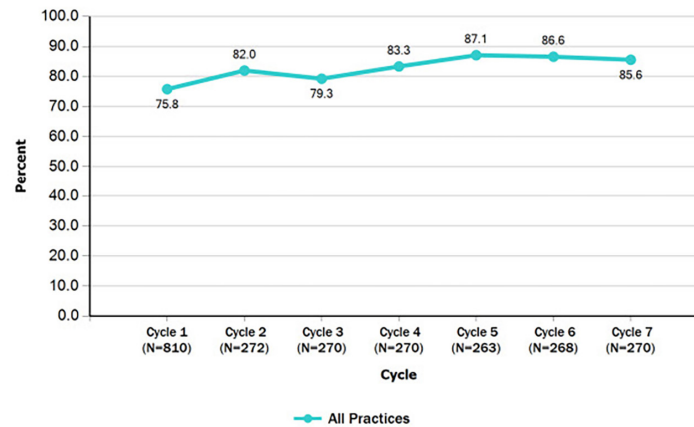
- Improve Office Reminder/Recall Systems
- Encourage Teen-Centered Care
- Leverage Missed Opportunities
- Raise Awareness of Importance of Adolescent Well Visit at Patient-Centered Medical Home
- Develop Sustainable Plan for Optimal Adolescent Care

Outcomes

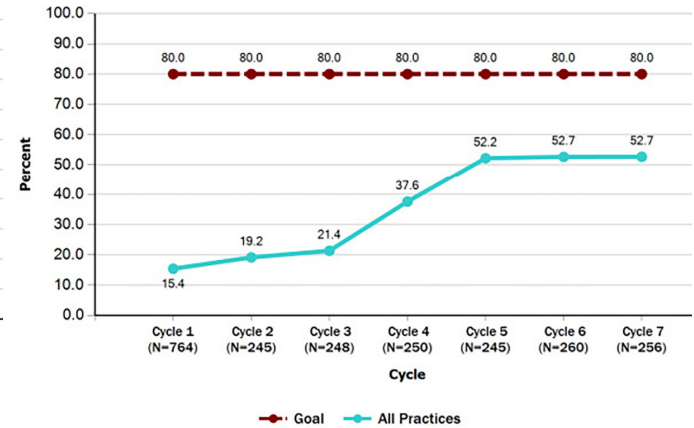
- Practices increased Teen Well Visits from 2018 to 2019 by 32% (9109 visits)

RESULTS

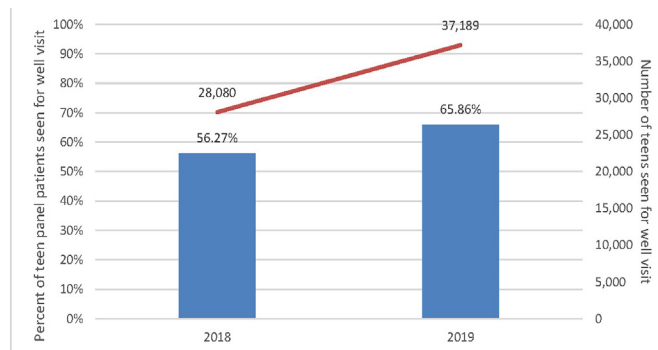
Well Visit Rate for Teens Present in Office Process Measure



Confidentiality Addressed at Teen Visit Process Measure



Adolescent Visits 2018 to 2019 Outcome Measure



20 of 27 practices reporting

LESSONS LEARNED

Confidentiality Policy

- Developing a confidentiality policy that is patient-friendly and useful to guide discussions is challenging and requires time as well as input from providers, staff, patients and families.
- Practices Reported meeting goals several months after collaborative closed

Transitioning to Adult Care

- Navigating solo visits takes practice but is foundational to crucial conversations and to transitioning teens to adult care.

Increasing Well Visit Rates

- It takes a village to increase adolescent well visits. Helping staff improve communication with teens, collaborating with community partners (schools), maximizing electronic resources for reminder calls/texts, flags in EMR, etc.

Participants	Project Partners	Project Support
27 practices from across Alabama with 178 total staff: • 96 physicians • 36 nursing/clinical • 46 administrative/support	• Alabama Department of Public Health - Family and Children's Bureau • Alabama's Children Rehabilitation Services - Family Voices of Alabama • Alabama Chapter - American Academy of Pediatrics • LEAH	• Children's of Alabama • University of Alabama - Department of Pediatrics • The Caring Foundation • Alabama Medicaid Agency • Alabama Department of Public Health
Practice panels annually have the following: • 73,646 well visits 11-18 years old • 400,541 total visits age birth-18 years		
55.6% of participating patients have Medicaid		

Transition to Adult Care

Transition Policy	February 2019	August 2019
Developed a written transition policy/statement that describes the practice's approach to transition	1/25 (4%)	18/25 (72%)

Participating Practices: Adolescent Health Center; Charles Henderson Child Health Center; Dothan Pediatric Clinic; Enterprise Pediatric Clinic; Eufaula Pediatric Clinic; Fairhope Pediatrics, Inc.; Fort Payne Pediatrics, LLC; Infants' and Children's Clinic, P.C.; Liberty Mountain Pediatrics; Mayfair Medical Group; Mobile Pediatric Clinic; Ozark Pediatric Clinic; Partners in Pediatrics; Pediatrics Plus; Pediatrics West Bessemer; Pediatrics West McAdory; Pell City Pediatrics; Physicians to Children; Primary Care Pediatrics and Family Medicine, P.C.; Purohit Pediatric Birmingham Clinic; Purohit Pediatric Anniston Clinic; Purohit Pediatric Moody Clinic; Purohit Pediatric Roanoke Clinic; Sylacauga Pediatrics; UAB Pediatric Primary Care Clinic; Vestavia Pediatrics; and West Alabama Pediatrics.