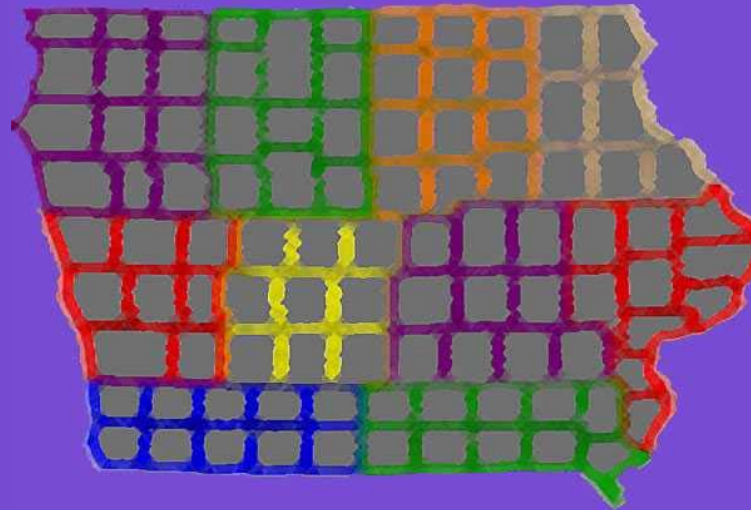


ABCD Screening Academy

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Access to Follow Up Services

Iowa's Healthy Mental Development Initiative



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Background



- Iowa's vision for young children:
Every child beginning at birth will be healthy and successful
- Legislature created Iowa Community Empowerment to improve the well being of families with young children
- The ABCD II project collaborated with other initiatives for early childhood (SECCS, Part C – Early Intervention)

Approach to Services



- Level 1 - Routine Developmental Screening, Surveillance and Anticipatory Guidance
- Level 2 - Screening, Surveillance. Identification and Referral for “At Risk” families (Project Focus)
 - *developmental services for children who are considered to be at-risk for developmental or social/emotional problems*
- Level 3 - Case Identification, Referral and Early Intervention

Project Goals



- Goal 2: Build the capacity of Iowa's public and private health systems to promote healthy mental development through the enhancement of the delivery of *Level 2* services and improved linkages

(Level 2 services = developmental services for children who are considered to be at-risk for developmental or social/emotional problems)

The Approach



- Standardized Screening
- Screen, Identify, Refer
- Two Demonstration Sites
 - One “Urban” Pediatric Practice
 - One Rural Family Practice
- Expert Resources, Inservice Training
- Identify Resources for Referrals

The Approach



Build on Existing Strengths

Community Based EPSDT Care Coordinators

A. Existing Network of 24 local Title V Child Health Centers

- Experience in Care Coordination

B. Reimbursement for Medicaid eligible families based on annual cost reports

Per unit of Service Claims = \$/ quarter hour

Strengths



Care Coordinators -

- ✓ Knowledge of community based services
- ✓ Experience in working with at risk families
- ✓ Training in cultural competence
- ✓ Reimbursement mechanism in place for Medicaid eligible children

Strengths



Physician Practices

- ✓ Physician Champion
- ✓ System level Practice Improvements
- ✓ Opportunities for Improved Patient Care without compromising efficiency

Weaknesses



Limited experience in working with private medical practices

Underestimated Relationship with Office Manager

Variability among practices

Practices lacked knowledge of Care Coordinator's role in the community

Care Coordinators not directly involved in beginning of selection and orientation for practices

Resolving Barriers to Effective Linkages



1. Build Relationships
 - Frequent Communication
2. Improve Effectiveness of Referral process
 - Focus on FEEDBACK
3. Reinforce Assessment of social-emotional well being
 - Share Successes, Tell Family Stories

Solutions to Barriers



- ❖ Focus on Outcomes for Families
- ❖ Recognize the realities of Medical Practice
- ❖ Clarify expectations
- ❖ Recognize the importance of follow-up and feedback

Access to Follow Up Services



- NEXT STEPS:

- Expansion and Spread of Demonstration Sites

- 3 Implementation
 - 1 Planning
 - RFP for 2-3 Additional Implementation Sites

- Partnering with the Iowa Medical Home Initiative