



Strengthening Children's Social-Emotional Well-Being and Ensuring a Parent-Led Agenda:

*Transforming the Pediatric Well-
Child Visit through Technology*

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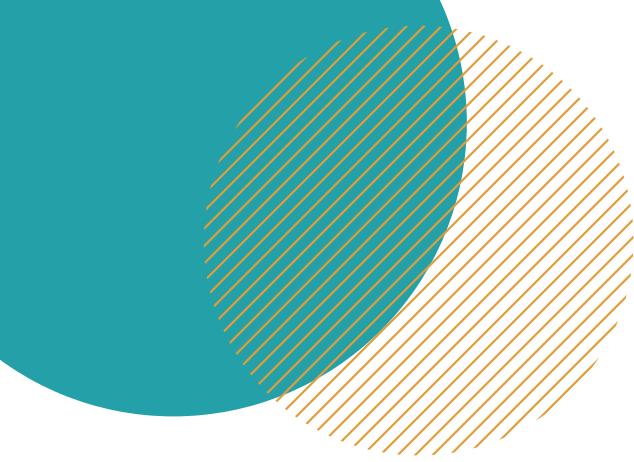
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About the Help Me Grow National Center

Dedicated to ensuring that early childhood systems maximize the potential of all young children, the Help Me Grow National Center is a program of the Office for Community Child Health at Connecticut Children's in Hartford, Connecticut. The Help Me Grow National Center serves as a national resource to support the implementation of Help Me Grow systems throughout the country. For more information, visit <http://helpmegrownational.org>.

Help Me Grow is a model that works to promote collaboration across child-serving sectors in order to build a more efficient and effective system that promotes the optimal healthy development of young children. When all of the organizations working on behalf of young children work together, we can better prevent or reduce the impact that stress or adversity may have on children and families and increase protective factors that can maximize the well-being of children and families.



Contributors

About Patient Tools, Inc.

Dr. Alan D. Malik is the founder of Patient Tools, Inc. and has been working with screening developers and innovators since the mid-90s. Patient Tools functions as both a product and medical integrator for hundreds of screenings and assessments, interfacing with a large variety of EMRs. Patient Tools implemented the Survey of Well-Being of Young Children initially in 2014 and has been involved with programs like Foundations-for-Success, Assuring Better Child Health and Development, Project LAUNCH, and Race to the Top since the early 2000s.

All of the screening and assessment content that Patient Tools has implemented is available in downloadable packages, and can be sequenced using triggers, prescreens and screening protocols. The IT technology and processes to integrate the innovator products and make them widely scalable is well understood and available.

Collaborators

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Acknowledgements

Project leadership appreciates the contributions of several partners who enabled this review of opportunities to leverage technology to strengthen the well-child visit. These partners were many and included those who facilitated our access to the parents and providers whose perspectives are captured herein, those parents and child health providers who chose to share their thoughts, opinions, and insights through project surveys, and several key early childhood and healthcare experts whose input helped to shape the report and contextualize our findings. The Help Me Grow National Center would like to thank the Pediatrics Supporting Parents Steering Committee for their support of this initiative: Einhorn Family Charitable Trust; J.B and M.K. Pritzker Family Foundation; The David and Lucile Packard Foundation; W.K. Kellogg Foundation; Overdeck Family Foundation; and an anonymous individual contributor.

Executive Summary

Background

Dramatic advances in our understanding of early brain development, child development, and the “biology of adversity” (i.e., social determinants, toxic stress, adverse child experiences), as well as health care reform’s focus on improving population health and well-being encourage and inform the transformation of child health services to emphasize developmental promotion. In recent years, innovators have designed and tested a variety of tools and processes to strengthen the pediatric well-child visit and maximize the capacity for child health providers to better engage parents and ensure a family-led agenda, to successfully perform developmental promotion and early detection through surveillance and screening, and to ensure linkage of children and their families to community-based programs and services to address parents’ concerns and priorities. While current and emerging research often confirms their validity and clinical benefit, few innovations have reached widespread adoption or acceptance as standard of care. As a result, there is considerable opportunity to take stock of provider and parent desire for such tools and the potential to create and sustain novel implementation approaches that maximize opportunity for sustainability.

We conceived and executed the following effort as our specific response the Pediatric Supporting Parents’ funders’ collaborative question as to the potential utility and benefit of an integrated modular technological platform in the well-child visit setting that merges several innovative tools: the Survey of Well-Being of Young Children (SWYC), Cycle of Engagement tools including Well-Visit Planner (WVP) and the Promoting Healthy Development Survey (PHDS), the Welch Emotional Connection Screen (WECS), and FINDconnect. While these five, specific tools served as the basis for the analysis, **our efforts were guided by a desire to understand provider and parent demand, and technological feasibility, for tools that seeks to increase parent engagement with the well-child visit and strengthen pediatric capacity to promote children’s health and development, including social-emotional development, in the well-child visit setting.**

Approach

To inform our analysis and broader project takeaways, we designed a four-pronged approach to solicit input from a diverse array of stakeholders:

- A **parent-facing web-based survey** to solicit input from parents and caregivers regarding their experience with the well-child visit, priorities for visit topics, and interest in expanding their use of technology and screening applications. Our parent survey was disseminated in partnership with several local, state, and national partners and was completed by nearly 500 parents.
- A **provider-facing web-based survey** to solicit the provider perspective on existing clinical realities that both facilitate and impede adoption of tools in the practice setting and their receptivity to an integrated screening platform. Despite a wide distribution to just over 10,000 pediatric providers, only 28 practicing physicians completed the provider survey, suggesting a general lack of interest among clinicians in either exploring this topic or survey participation in general.
- A set of **key stakeholder interviews** to balance individual parent and provider perspectives and provide a systems lens to the types of trends and observations obtained through surveys.

- A **targeted analysis** of the five pre-selected tools to assess their capacity for integration in the well-child visit setting and possible licensing or business model considerations that would influence such potential.

Results

Parents are frequently relying on (and expecting their provider to rely on) technology for information about health and healthcare. Parents are commonly prepared to introduce and discuss topics during the well-child visit encounter and all providers currently employ at least one strategy to help determine parent/caregiver priorities for the visit. **Both parents and providers share interest in completing a specific, pre-visit planning tool to inform their child's provider of parents' priorities for the visit.**

While providers report widespread use of electronic medical record (EMR) technology to guide clinical encounters, nearly all report that they are still implementing screening tools through a “paper and pencil” approach. In considering the desirability of adopting new screening tools, providers report that the most important variables informing provider decision-making are: **whether the screening and possibility of follow-up is likely to convey benefit to families**, whether there are resources to connect families based on concerns identified through the tool, and whether the tool is easily embedded in existing workflow. Asked specifically about their interest in access to an integrated platform of screening tools that address parent priorities, child development, social-emotional development, emotional connection, and family needs and stressors, **nearly 80% of providers report being very or somewhat likely to adopt**. Such interest is impacted by integration potential with the EMR, time, and cost, and much less by potential for reimbursement or ability to customize the platform.

Our targeted analysis of the five specific tools found that the **potential for electronic integration is high and, together, they cover a wide range of domains central to increasing parent engagement with the well-child visit and strengthening children's social emotional development**. Importantly, in contrast with the existing paradigm of individual tools going to scale on a practice-by-practice basis, **an integrated platform offers the opportunity for key economies of scale**, particularly when such tools are embedded within the context of a comprehensive, integration approach to developmental promotion, early detection, referral and linkage, such as Help Me Grow. A systems approach is essential to achieve scale and impact.

Implications

An integrated modular technological platform, embedding tools such as those proposed for the Pediatrics Supporting Parents initiative, has strong potential to strengthen child health services to better support families and enable providers to strengthen families' capacity to promote their children's optimal health, development, and well-being, including social-emotional development. For such tools, the traditional pipeline of pilot and feasibility studies, followed by validation in new settings and with expanded target populations, may lead to incremental uptake in select, early adopter, primary care settings. This incremental process can likely be modestly accelerated by addressing such systemic drivers as public policy, payment reform, and changes to medical training. Our findings suggest that truly transformational change requires a new, better solution, in which both the tools themselves, and the practices that adopt them, benefit from an over-arching system of supports and resources. An integrated modular technological platform implemented in the context of a comprehensive, integrated system, such as Help Me Grow, enables key economies of scale that overcome existing barriers and drive adoption. Such a platform can: 1) integrate multiple tools, each with the capacity to expand provider knowledge about the child and family; 2) allow the encounter to be guided by specific pre-screens and “triggers” that reflect family-driven priorities and maximize limited visit time; 3) enable

electronic information sharing with relevant sectors and services; and 4) maintain knowledge of and facilitate access to relevant community-based supports.

Recommendations

Develop an Integrated Pediatric Screening Platform for pediatric well-child visits with the capacity to embed FINDconnect, PHDS, SWYC, WECS, and WVP, among other tools, that are configurable elements of a single product. Such a product would require consideration of the following as key steps in development:

- Enabling parent and provider choice, by allowing modular adoption of specific components and through the embedding of a front-end assessment of parent priorities that triggers application of specific tools.
- Accommodating the prevalence and influence of EMR realities by ensuring that data from an integrated platform could either feasibly be embedded within, or directly integrated through, a practice-based EMR.
- Sufficient testing of implementation through the design of a prototype and the development of a guiding consortium, comprised of end users and critical implementation partners.

Develop and implement a joint marketing approach for the platform that directly responds to existing, known barriers to widespread uptake, such as limited resource availability and sharing of website, marketing, and licensing considerations. Such a marketing approach transforms the current paradigm of incremental and inefficient adoption of innovations and enables busy clinical settings to achieve more rapid adoption of a wider array of tools that meet a pre-determined threshold of clinical benefit, validity, and acceptability by parents/caregivers.

We are grateful for the opportunity to conduct this assessment and excited by the prospects of an integrated modular technological platform in the well-child visit setting to transform child health services, strengthen families, and promote children's optimal health, development, and well-being.