

 **Bright Futures.**
prevention and health promotion for infants, children, adolescents, and their families™

Bright Futures: An Overview of Preventive Services Guidelines and Other Resources

Bismarck, North Dakota
November 29, 2012

Judith S. Shaw, EdD, MPH, RN, FAAP
AAP Bright Futures Steering Committee
Executive Director, Vermont Child Health Improvement Program
Research Associate Professor of Pediatrics, UVM College of Medicine

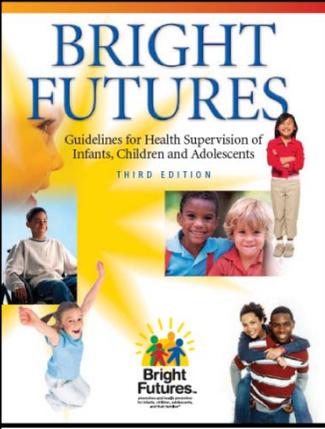
 

 **Bright Futures.**
prevention and health promotion for infants, children, adolescents, and their families™

What I have planned

- **Bright Futures**
 - Overview of Changes and Important Topics
 - What about the evidence for the guidelines?
 - What makes a health supervision visit a Bright Futures well child visit?
 - How Bright Futures visits are structured?
- **Implementing Bright Futures (clinical care, public health, community)**



...is a set of principles, strategies and tools that are theory - based, evidence - driven, and systems - oriented, that can be used to improve the health and well-being of all children through culturally appropriate interventions that address the current and emerging health promotion needs at the family, clinical practice, community, health system and policy levels.

 **Bright Futures.**
prevention and health promotion for infants, children, adolescents, and their families™

Recommendations for Preventive Pediatric Health Care



 **Bright Futures.**
prevention and health promotion for infants, children, adolescents, and their families™

Affordable Care Act – Section 2713

...requires all health plans to cover, with no cost-sharing,

“with respect to infants, children, and adolescents, evidence-informed preventive care and screenings provided for in the comprehensive guidelines supported by the Health Resources and Services Administration,”



the services outlined in *Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents*. (Hagan J, Shaw JS, Duncan PM eds.)

 **Bright Futures.**
prevention and health promotion for infants, children, adolescents, and their families™

Overview of Changes and Important Topics

How do the 3rd Edition Guidelines differ from previous editions?

Part I—Themes

- 10 chapters highlighting key health promotion themes
- Emphasizes “significant challenges”—mental health and healthy weight

Part II—Visits

- Rationale and evidence for screening recommendations
- 31 age-specific visits
- 5 health supervision priorities for each visit
 - Designed to focus visit on most important issues for child that age
 - Include health risks, developmental issues, positive reinforcement
- Sample questions and anticipatory guidance for parent and child

Themes



- Child Development
- Family Support
- Mental Health and Emotional Well-Being
- Nutritional Health
- Physical Activity
- Healthy Weight
- Oral Health
- Healthy Sexuality
- Safety and Injury Prevention
- Community Relationships and Resources




Overview of Changes and Important Topics



Bright Futures Changes

Infancy & Early Childhood

- Referral to dental home at one year of age
- Oral Health risk assessment
- Additional visit at 30 months
- Standardized developmental screening at age 9, 18 & 30 months
- Standardized Autism screening 18 and 24 months
- No routine urinalysis at 4 years

Middle Childhood

- Additional visit at 7 years and 9 years




Overview of Changes and Important Topics



Bright Futures Changes

Adolescence

- Vision screening is universal once in early adolescence (11-14), middle (15-17), and late (18-21); at other visits it is performed based on risk assessment
- Hearing and Anemia screening are no longer universal but based on risk assessment
- New examples of possible questions for practitioners:
 - Mood regulation
 - Sexual identity
 - Interpersonal violence
 - Graduated drivers license
 - Anabolic steroid use
 - Strengths and resiliency




Overview of Changes and Important Topics



A Brighter Future for All Children

Special Emphases in the Third Edition





Overview of Changes and Important Topics



Inclusion for all Children and their Families

- Children and Youth with Special Health Care Needs (CYSHCN) and their families are included in every chapter and every visit.
- A perspective that emphasizes the child over the specialness.
- Encouragement of families to feel comfortable asking questions, providing their insights and points of view, their preferences in care.
- Creating a welcoming health care home for diverse families and their children and their diverse care choices.




The Evidence Base for Health Promotion

There is still a long way to go!





Evidence



Approaches to the Evidence

- Multidisciplinary Expert Panels.
 - search of relevant clinical trials, meta-analyses, RCTS, Cochrane Collaborative Reviews, and USPSTF evidence reviews.
 - policies and guidelines from pediatric professional organizations.
 - use of the Guide to Community Preventive Services for preventive services delivered in the community, www.thecommunityguide.org.
- Two public reviews with over 1,000 reviewers representing national organizations concerned with pediatric health care.




Evidence



Evidence Informed

- **Evidence based recommendations – where they exist**
 - USPSTF
- **Recommendations based in science**
 - Risk and disease detection
 - Disease prevention
 - Health promotion




Evidence



US Preventive Services Task Force

If there is an A or B rated recommendation – follow it

- Cervical cancer screening (2003)
- HIV (2005)
- Chlamydia screening (2007)
- STI counseling (2008)
- Depression screening in youth 12-18 (2009)
- Obesity (2010)
- Vision screening - three to five (2011)
- Immunizations

Recommend against D rated items

- Scoliosis
- Testicular exam and self exam




Evidence



Summary

- Best evidence available
- Recommendations will have different levels of evidence available to inform the decision
- Inherently makes sense to the outcomes
- Must make sense in the context of a primary care visit
- Represent the best use of limited resources




Evidence



WHAT MAKES A BRIGHT FUTURES VISIT?





Evidence



What Makes A Bright Futures Visit?

The Focus: Assets or Deficits?

TABLE 6
Comparison of Asset and Deficit Models

Asset Model	Deficit Model
Positive family environment	Abuse or neglect
Relationships with caring adults	Witness to domestic violence
Religious and spiritual anchors	Family discord and divorce
Involvement in school, faith-based organization, or community	Parents with poor health habits
Accessible recreational opportunities	Unsafe schools
	Unsafe neighborhood




Bright Futures Visit Example

prevention and health promotion for infants, children, adolescents, and their families™

Bright Futures in Action 18 month old Example

Bright Futures Parent Handout
2 Year Visit

Here are some suggestions from Bright Futures experts that may be helpful to you as you bring your child to the 2-year visit.

Your Talking Child
The most important thing to know about your child's language is that you are the best teacher. Talk to your child every day, even when you are not together. Use simple words and phrases that your child can understand. Repeat words and phrases often. Use gestures and facial expressions to help your child understand what you are saying. Encourage your child to talk to you. Respond to your child's attempts to talk. Use simple words and phrases that your child can understand. Repeat words and phrases often. Use gestures and facial expressions to help your child understand what you are saying. Encourage your child to talk to you. Respond to your child's attempts to talk.

Your Child and TV
It is a good idea to limit your child's TV watching. Try to keep it to less than one hour a day. Choose educational programs that are designed for children. Turn off the TV when you are not watching. Encourage your child to play with toys and books. Encourage your child to talk to you. Respond to your child's attempts to talk.

Parent Training
If you are having trouble with your child, you may want to try parent training. This is a program that teaches parents how to manage their child's behavior. It is a good idea to try parent training if you are having trouble with your child. You can find parent training programs in your community. Contact your pediatrician for more information.

What to Expect at Your Child's 2-Year Visit
We will talk about:
• Your child's growth and development
• Your child's language skills
• Your child's social and emotional skills
• Your child's physical health
• Your child's safety
• Your child's nutrition
• Your child's dental care
• Your child's immunizations

www.aap.org/brightfutures

DEDICATED TO THE HEALTH OF ALL CHILDREN™

Bright Futures
Prevention and health promotion for infants, children, adolescents, and their families™

Strength Based | Parent/Provider Partnership

Materials | Putting Bright Futures to Work | Education | Family Resources | Videos | Clinical Practice | Contact Us

Practice Guides and Other Resources
Presentations and Handouts
Newsletters

Bright Futures is a national health promotion and disease prevention initiative that addresses children's health needs in the context of family and community. In addition to use in pediatric practice, many states implement Bright Futures policies, guidelines and tools to strengthen the connections state and local programs, pediatric primary care, and other community-based organizations. Whether you are a health care professional, a parent, or a child advocate, Bright Futures offers many different resources for your use in improving and maintaining the health of all children and adolescents.

[To Obtain Materials, Click Here](#)

Implementing Bright Futures into daily practice

Can it be done?

Implementing Bright Futures

prevention and health promotion for infants, children, adolescents, and their families™

New Approaches

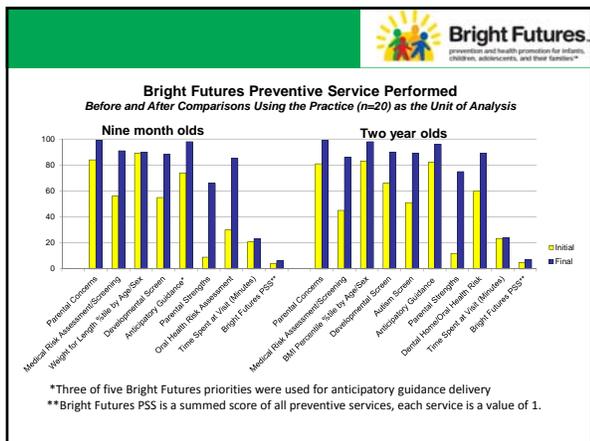
- **National AAP Preventive Services Implementation Project (Jan–Oct 2011)**
 - Pediatricians, family physicians, nurse practitioners, physician assistants, in
 - Rural, urban and suburban practices and clinics as well as community health centers and the Indian Health Service
- **Partner with Health Plan and Medicaid QI activities (e.g., CHIPRA Demo Projects)**

National AAP Preventive Services Implementation Project (Jan–Oct 2011)

Winnipeg, ND: Comprehensive Pediatric Care
Appleton, WI: Children's Health Ctr @ St Elizabeth Hosp
Washington, PA: Kessler Pediatrics
West Reading, PA: All About Children Pediatric Partners PC
Milwaukee, WI: YIP Street CHC
Philadelphia, PA: Rouborough Paeds
Haverhill, NY: Haverhill Paeds
Brooklyn, NY: Lutheran Family Health Ctr
Boston, MA: Children's Hospital Primary Care Center
Lorton, VA: All Pediatrics
Southern Pines, NC: Sandhill Paeds
St. Louis, MO: Diers Pediatrics
Memphis, TN: Memphis Pediatrics
Houston, TX: Cook Children's Physician Network
Iowa City, IA: U of Iowa Dept of Paeds
San Antonio, TX: Family Medicine Associates
Tucson, AZ: San Xavier Clinic
Flagstaff, AZ: Flagstaff Pediatrics
Redwood City, CA: East Coast Children's Clinic
Hays, KS: Hays Med Pediatric Ctr

CORNET
CONTINUITY RESEARCH NETWORK

QuIIN
Quality Improvement Innovation Networks
A program of the American Academy of Pediatrics



What are states doing to improve quality and implement Bright Futures?

NIPN National Improvement Partnership Network

VCHIP Vermont Child Health Improvement Program

Mission

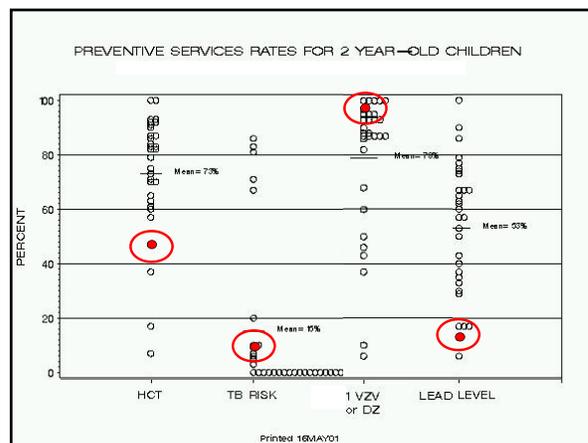
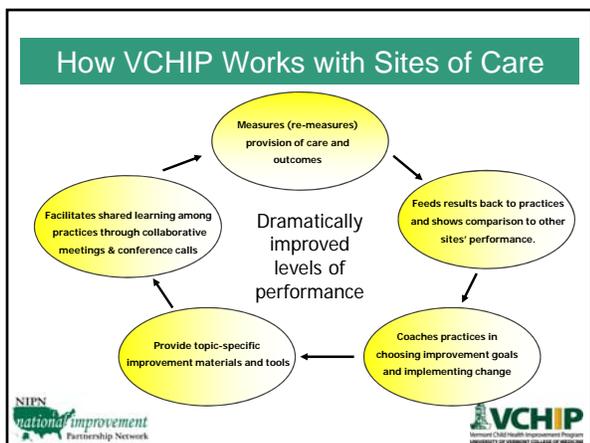
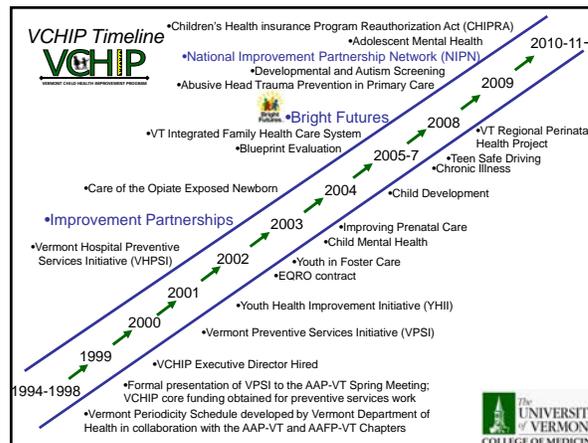
to optimize the health of Vermont children by initiating and supporting measurement-based efforts to enhance private and public child health practice.

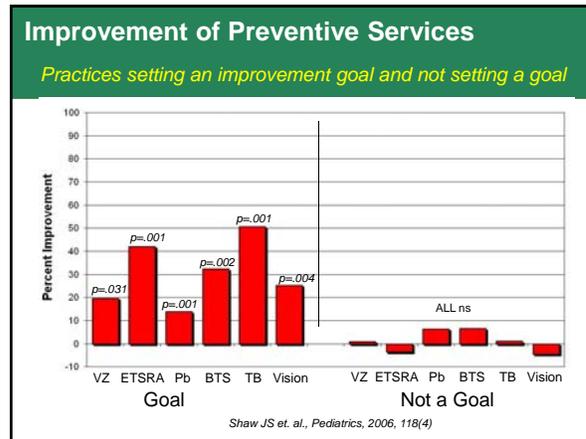
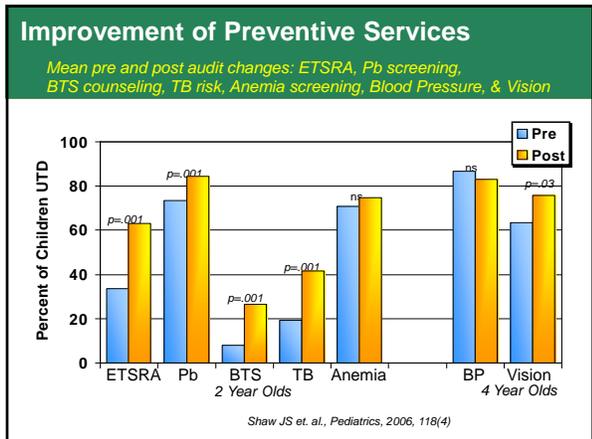
In partnership with:

- Vermont Department of Health
- University of Vermont Department of Pediatrics, OB, FP & Psychiatry
- Vermont Chapter of the American Academy of Pediatrics
- Vermont Chapter of the American Academy of Family Physicians
- Department of Vermont Health Access (Medicaid)
- Vermont Agency of Human Services
- Banking, Insurance, Securities & Health Care Administration (BISHCA)
- Managed Care Organizations

NIPN National Improvement Partnership Network

VCHIP Vermont Child Health Improvement Program





Number of VT practices participating in at least one VCHIP project

- 97% Pediatric Practices (33/34)
- 81% Family Practices (63/78)
- 27% OB Practices (7/26)
- 39% Certified Nurse Midwife Practices (5/13)
- 100% VT Hospitals (12/12)

NIPN national improvement Partnership Network

VCHIP Vermont Child Health Improvement Program

Improvement Partnership Development

Improvement Partnerships

...a durable, state or regional collaboration of public and private partners that uses measurement-based efforts and a systems approach to improve the quality of children's health care.

NIPN national improvement Partnership Network

VCHIP Vermont Child Health Improvement Program

What Do Improvement Partnerships Do?

- Develop and test tools, measures, and strategies
- Serve as a resource for improvement assistance
- Translate knowledge through engagement of national and local experts
- Disseminate findings, spreading successful approaches and informing policy
- Serve as convener, an "honest broker"
- Provide opportunities for pediatricians to fulfill Maintenance of Certification (MOC) Part IV requirements

NIPN national improvement Partnership Network

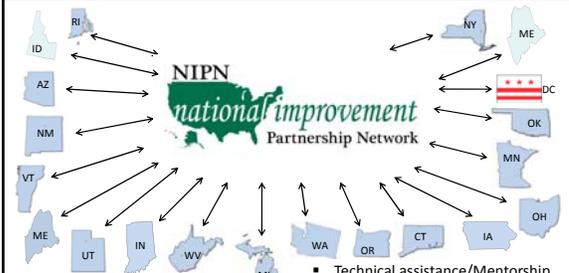
VCHIP Vermont Child Health Improvement Program

Where are they located?

- **AAP Chapter**
 - Arizona, Iowa*, Minnesota, Rhode Island, West Virginia
- **Medicaid**
 - Connecticut
- **Department of Health**
 - New York, Ohio, Washington
- **Academic Institution**
 - Indiana, Iowa*, Michigan, New Mexico, Oklahoma, Oregon, Utah, Vermont
- **Children's Hospital**
 - District of Columbia
- **Quality Improvement Organization**
 - Maine

*Iowa's IP is a partnership between the Iowa chapter of the AAP and the University of Iowa



NIPN
national improvement
Partnership Network

- Convenor for the States
- Sharing, problem solving and connecting states/regions
- Repository for tools, materials, speakers – online TA center
- Technical assistance/Mentorship
 - Network meetings/calls
 - Core staff training
 - Annual meeting
 - Monthly calls
 - Individualized TA (National QI Coach)

www.nipn.org




Selected Improvement Partnership Programs' American Board of Pediatrics – Maintenance of Certification (MOC) Projects

- **DC Partnership to Improve Children's Healthcare Quality (DC PICHQ)**
 - Improving Early Childhood Immunization Rates
- **Envision New Mexico: The Initiative for Child Healthcare Quality**
 - New Mexico Asthma Care Improvement Module
 - Developmental Screening Initiative
 - Pediatric Overweight Quality Improvement Initiative
- **Maine Child Health Improvement Partnership (ME CHIP)**
 - FIRST STEPS Learning Initiative: Raising Immunization Rates
- **Oregon Pediatric Society**
 - Oregon Screening Tools and Referral Training (Oregon START)
- **Utah Pediatric Partnership to Improve Healthcare Quality (UPIQ)**
 - Early Autism Detection and Referral in the Medical Home
 - Prevention, Recognition and Treatment of Childhood Obesity
- **Vermont Child Health Improvement Program (VCHIP)**
 - Abusive Head Trauma (AHT) Prevention in Primary Care
 - Promoting Healthier Weight in Pediatrics
 - Youth Health Improvement Initiative