Office of Maternal, Child, and Family Health (OMCFH) Pediatric Medical Advisory Board June 14, 2013 Meeting Minutes

Meeting called to order on June 14, 2013 at 10:00 a.m.

### Present:

- 1. Traci Acklin, MD
- 2. Norman Cottrill, DO
- 3. George Damous, MA, EdS, Licensed Psychologist/School Psychologist
- 4. Teresa E. Frazer, MD
- 5. Carlos Lucero, MD
- 6. Isabel M. Pino, MD
- 7. Jason M. Roush, DDS, WV State Dental Director
- 8. Debra Sams, DO
- 9. Gary Veronneau, OD
- 10. Charles F. Whitaker, III, MD
- 11. Sharon L. Carte, WV CHIP Executive Director
- 12. Jim Daniels, HealthCheck Region 2
- 13. Karen Dougherty, HealthCheck Region 6
- 14. Richard Ernest, Special Programs Manager, Bureau for Medical Services
- 15. Alisha Gary, Fostering Healthy Kids Project Coordinator
- 16. Jim Jeffries, HealthCheck Program Director
- 17. Ruthie Maniscalchi, WV Home Visitation Program/Help Me Grow Coordinator
- 18. Christina Mullins, OMCFH Infant Child and Adolescent Health Division Director
- 19. Jackie Newson, WV Home Visitation Program Director
- 20. Heidi Staats, Office of Nutrition Services/WV WIC Program
- 21. Kim Wentz, HealthCheck Region 8/HealthCheck Promotions Coordinator
- 22. Anne Williams, OMCFH Director

## Absent:

- 1. Yusr Aboushaar, MD
- 2. Matthew Cupp, MD
- 3. Raymond Leonard, MD
- 4. Robert Pollard, MD
- 5. Timothy York, DO

## • Welcome and introductions (Jim Jeffries, HealthCheck Director)

Certificates of Appreciation were distributed for lasting contributions to the Pediatric Medical Advisory Board and commitment to improve the health of all West Virginia's children, youth, and families.

## • HealthCheck Quality Improvement (Jim Jeffries, HealthCheck Director)

- Reviewed HealthCheck operational procedures pertaining to EPSDT outreach and proposed modifications to facilitate effective measurement of this process.
  - ♣ Dr. Whitaker pointed out problems with the current appointment sheets and referral follow up.

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- ♣ Dr. Cottrell proposed additional oversight of the EPSDT entitlement for children enrolled in Medicaid managed care.
- → Dr. Lucero suggested a centralized and accessible health record to include health maintenance, immunizations, and preventive care.
- ♣ Dr. Pino pointed out the prevalence of cell phones and the potential for effective informing via text message.
  - ✓ The Board endorsed HealthCheck's proposed modifications. HealthCheck will present revised procedures during the next Board meeting.
- Reviewed the scarce but specific reporting from three counties asserting that providers are not performing vision and hearing screening, per the *Bright Futures* standard of care. With each report, HealthCheck staff follows up with the specific provider(s).
  - ♣ Dr. Veronneau noted that the amblyopia rate has remained constant for many years.
  - → Dr. Pino recommended that we contact K.N. Chaplin of Good-Lite to explore opportunities for vision screening tools.
    - ✓ The Board recommended that HealthCheck continue its collaboration with the WVDE-Office of Healthy Schools to support the *Bright Futures* standard for pediatric preventive healthcare as well as the medical home approach to providing comprehensive primary care.
- Reviewed intervention phase of HealthCheck's quality improvement project aimed at building developmental surveillance and screening elements into the process of preventive pediatric health care in West Virginia. Discussed HealthCheck efforts from January-April 2013 to incite corrective action, i.e. promotion of "whole office" procedures, offering technical assistance, and guaranteeing the availability of developmental screening tools (Ages & Stages Questionnaires<sup>TM</sup>). Discussed ongoing efforts to repeat the original measure, thus measuring the influence of HealthCheck's interventions.
  - ♣ Dr. Cottrell suggested that the standard for development screening should be limited to the administration of a validated tool. Because of its low to moderate sensitivity (56-83%), many states recognize the PDQ-II (Denver II) as an inadequate tool.
  - → Dr. Acklin noted the challenges with integrating the standardized screening process with electronic medical record systems.
    - ✓ The Board endorsed the completion of the quality improvement cycle.
- Help Me Grow Update (Jackie Newson, WV Home Visitation Program Director)
  - Reviewed goal to successfully identify children at-risk and link them to the help they need.
  - Discussed need for physician outreach and buy-in.
    - ♣ Dr. Whitaker noted that *Help Me Grow* should not make referrals without PCP input.
    - ♣ Dr. Sams suggested providing *Help Me Grow* information to families prior to birthing facility discharge.
    - ♣ Dr. Pino pointed out the age limit (5 years).
    - ♣ Dr. Lucero suggested providing clients this information at the DHHR offices.
    - ♣ Dr. Acklin noted that *Help Me Grow* could be fundamental to pediatric practice efforts to build developmental screening elements into the process of care.
    - ♣ Mr. Damous suggested that the PCP be the gatekeeper.
      - ✓ The Board expressed continued support for the *Help Me Grow* Project suggested increased coordination with HealthCheck and WV Birth to Three.

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# Early identification and screening for mental illness and substance use disorders (Jim Jeffries, HealthCheck Director)

- Reviewed current *Bright Futures* recommendation for psychosocial/behavioral assessment at all well-child visits, newborn to age 21.
- Reviewed U.S. Preventive Services Task Force (USPSTF) recommendation (Grade B) to screen adolescents (12–18 years of age) for major depressive disorder when systems are in place to ensure accurate diagnosis, psychotherapy (cognitive- behavioral or interpersonal), and follow-up.
- Discussed clinical depression screening among individuals 12-18 years of age as a future quality reporting measure.
  - Mr. Damous suggested the Achenbach Child Behavior Checklist as inexpensive screening method.
  - ♣ Dr. Pino noted the issue of capacity. Specifically, how do we ensure accurate diagnosis, treatment and follow up.
  - ♣ Dr. Frazer noted the current wait times for mental health referrals.
    - ✓ Before considering the USPTF recommendation, the Board recommended partnering with BHHF to examine West Virginia's capacity to ensure accurate diagnosis, psychotherapy (cognitive- behavioral or interpersonal), and follow-up.
- Fostering Healthy Kids Update (Alisha Gary, Fostering Healthy Kids Project Coordinator)
  - Discussed inclusion of Kanawha County.
  - Discussed barriers to timely and comprehensive care for all foster care placements.
    - ✓ The Board expressed support for all efforts to improve coordination and information sharing, e.g. health and immunization histories.
    - ✓ The Board continued its endorsement of the OMCFH Fostering Healthy Kids project.

Meeting adjourned at 3:17 p.m.